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# Hoax and the Crisis of Health Communication-Public Sphere

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## ABSTRACT

Digital media development makes easier for everyone to share information. One of the visible characteristics is the change of audience role to be more active in the convergence era. At this point, hoax comes, such as vaccine danger that massively spreads in 2017-2018. The hoax case content is about kinds of concern, such as health clinical sense, work of digital media, to religious dogma. The article studies the vaccine danger polemic in 2017-2018, from the kinds of hoax appearance to the crisis of the health communication-public sphere in the digital era. This study finds that: First, new media offers people more personal communication space where they can be a consumer and producer of information at once. Second, a clinical sense of health becomes a claim for being right that makes people trust scientific logic and eliminate critical attitude to manipulative works. Third, the health information gap and lack of people's understanding of medical and technical terms make them active consumers who look for information independently through digital media. Fourth, people concern about health information needs so they pay attention to see, read, and even share information. Fifth, hoax with certain interest tends to purpose on fake news that spreads in social media massively. Sixth, insufficient digital literacy in society makes them lost in mass information in the new media era.

## Keywords

Hoax, public space, digital media, vaccine polemic, health communication

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## INTRODUCTION

Vaccination is a process to produce immunity, which is often also called immunization. Immunization itself has been known in Indonesia since the Dutch colonial era. In June 1804, the smallpox vaccine came first in Batavia (Loedin, 2005). Based on the Civil Service Regulation of

1820, the immunization program has been carried out routinely every week under the supervision of an inspector. Initially, Indonesia had to bring in vaccines from Europe, which have very limited coverage of immunization. Of course, the pattern is not perfect. In 1884, Dr. Schuckinik Kool successfully developed a research study using cattle as a breeding place for vaccines.

Since then, the local educated people, namely the elites of Bumiputera, make improvements to the smallpox vaccine. In fact, at the beginning of the establishment of Javanese

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medical education in Batavia, School tot Opleiding van Indische Artsen (STOVIA), a high school level institution, educated its students to become medisch vaccinateur (smallpox nurses) with a two-year education period (Emilia, 2016).

Until now, vaccination has become an official government program that aims to suppress the growth and expansion of dangerous infectious diseases in Indonesia, such as BCG, DPT, Hepatitis B, Measles, and Polio vaccines. Various successes of this program began to be found. As reported by the World Health Organization (WHO, 2017), in 1974, Indonesia was declared free of smallpox. In fact, the Indonesian government only found one of the last polio cases in 1995.

Although the various success of the vaccine program has been well and widely informed, as WHO claims, the discourse on eradicating infectious diseases has re-emerged as the government intensified the Measles-Rubella (MR) immunization campaign in Java since August 2017. Various reactions come from the community, both those which fully support the program to reduce the risk of child mortality and reduce birth defects due to congenital rubella syndrome, to those which reject the vaccines that are considered as not in line with religious teachings, as well as a 'coercive' implementation of health programs.

The act of rejecting the vaccine did not appear suddenly. Since the 1880s in England, an assistant of natural researcher, Alfred Russel Wallace stated that he had never doubted his belief that the use of smallpox vaccine was not beneficial and even harmful to health (Fichman and Keelan, 2007). This movement eventually led to various reactions from other scientists to change the general 'figure' of vaccination, not only based on statistical achievement of program success, but also through the development of innovations that were not limited to the domain of laboratories and pathologists.

Over time, anti-vaccine tensions in Indonesia have increased and culminated as the

Deputy Secretary-General of the Indonesian Ulema Council (MUI), Sholahudin Al-Aiyub stated that the MR vaccine is unclean according to the Islamic Law because it contains trypsin and gelatin enzymes come from pigs (Amindoni, 2018). Mega Indah Tomeala is an example of parents who actively reject vaccination programs. Through her social media account, Tomeala states zero tolerance for pigs (Lestari and Budhi, 2017).

Various other reactions rejecting the vaccine programs have also emerged in social media. They deliver various messages such as 'dangerous immunization', 'containing pig enzymes', 'ethyl mercury vaccine is not safe', 'MMR vaccine causes autism', 'vaccine made in America', 'death caused by vaccine', 'vaccine weakens the nation', and 'herbal supplements are able to replace immunizations'. Through digital media, the anti-vaccine discourse seems to be more massive.

On the other hand, the pro-vaccine claimed that the refusal action did not have a fundamental reason and could not be scientifically proven so that it was considered incorrect, or often considered as 'fake news' (hoax). The hoax label cannot be used injudiciously, because it is not a meaning could be generally understood (Ireton and Posetti, 2019), and it is a form of the corruption of communication (Wijaya, 2013). In the 'fake' label there could be various interests. This is because individuals have a psychological process of selective exposure to reduce dissonance by consuming, choosing, and processing information which in accordance with their beliefs and attitudes (Barran, 2010).

The Indonesian Ministry of Health finally took action. By utilizing digital media, the Ministry of Health posted several facts of immunization through social media accounts to deliver new discourses (Depkes, 2018). It is hoped that various controversial messages will soon subside. But, in fact, the vaccine controversy still to be a dominant debate in

digital media spaces, at least until the end of 2018.

Through this article, the authors expose the study on the polemic of the dangers of vaccines in social media in the period of 2017-2018, since the emergence of various hoaxes to the occurrence of the crisis of the health-public space in the digital era, in several points of exposure. First, the myth of modernity constructing a single truth claim where various interests reside. Second, convergence as a form of new media development that has an impact on health public space. Third, a critical reflection on the development of health-public space in the digital era, as well as various recommendations to the studies. A series of literature studies conducted to analyze critically the kinds of hoax appearance to the crisis of health communication-public sphere in a digital era.

## **METHOD**

This study is an in-depth literature review by collecting documents relevant to the topic, either through scientific documents or media documents. Scientific papers focus on theoretical studies and relevant previous studies, while media documents focus on phenomena and discourses related to health communication and hoaxes. This research relies on secondary data, with self-reflectivity analysis (Wijaya et al., 2019), which dialogues the researchers' reflection with phenomena (and experiences), theory, and previous studies.

Adopting the Golash-Boza (2015) model in Wijaya et al. (2019), this study goes through several stages, including, first, determining the area or corpus of the course. The second step is collecting literature. Thirdly, select relevant quotations. Fourth, creating literature codes. Fifth, starting a conceptual scheme. Sixth, writing the results of literature studies and conceptual models or new ideas that authors can propose to develop the next research or literature review. By the objectives, this research then systematically discusses the results of the study, starting from dissecting the myth of modernity, elaborating the crisis of

public health, and concluding the review by highlighting the insights about the hoaxes in health communication and the public sphere that are currently rife.

## **FINDINGS AND DISCUSSION**

### **The Myth of Modernity**

Health is one of the basic needs of human life. Everyone certainly hopes to be free from the risk of illness. In order to survive, humans must also be able to overcome the problem of illness and disease. It could be said that this dimension developed throughout the evolution of human civilization. The system of development, technique, tradition, belief, or all the values of health is a living reality that continues to develop in the community.

The way humans deal with the problems of illness and disease has developed since the traditional societal culture. In a traditional society, illness can be interpreted as a form of karma or a curse, even as God's punishment associated with the sins. This myth lives in traditional societies and continues to transform.

The period of modernity characterized by the development of the reason for knowledge and technology brings people to a process of emancipation of reason. Human rationality is increasingly developing, and constructing a 'scientific culture'.

In the modern era, human beings are understood as subjects of thinking and complemented by higher rationality. In the end, all the life dimensions produced by scientific reason, constitute an absolute truth claim which cannot be debated and become a dogma. The public trust in the work of health institutions increases. As a result of the success of this scientific reasoning work, the community increasingly abandoned their traditional beliefs.

Humans are increasingly dependent on all elements of modernity, such as modern health lifestyles which make people regarded as 'healthy humans'. The health dimension has even become a contested strategic business commodity. The presence of a beauty clinic has become a primary need in a modern lifestyle.

Healthy is no longer meant as mere freedom from disease but also regarded as something related to social identity. The reason for modernity which originally carried out a mandate of the emancipation of reason so that humans do not fall into dogma actually creates new dogma.

This reasoning work can also be seen through health advertising and propaganda, the use of scientific words, hygienic and clinical trials, and various foreign medical terminologies which make many people believe in the work practices of scientific reasoning, and the dominance of technical-instrumental reasoning referred to as the 'making scientific'. This work potentially ignores 'practical work', namely an inter-subjective communication process for achieving understanding (Hardiman, 2009).

The early thinkers have complained about this method of work. The reason which originally constituted the ethical effort to promote human thinking comes to a paradoxical condition in themselves. The reason for scientific knowledge is often used for manipulative work in the name of scientific truth dogma.

Jurgen Habermas considers this condition as a symptom of the inability of modern society to distinguish between 'practical' dimensions and 'technical' dimensions (Hardiman, 2009). It is precisely this 'technical reasoning' dimension that dominates human relations. The act of communication tends to be an effort to achieve certain goals and interests, rather than as an effort to achieve mutual understanding.

This kind of reasoning in Weber's terms is often referred to as 'objective rationality' or by Frankfurt thinkers such as Herbert Marcuse, Horkheimer, and Jurgen Habermas also commonly referred to as 'technological rationality' or 'instrumental rationality', where the process of communication has become an instrument to achieve goals (Hardiman, 2009).

In the end, the decisions took place in the lives of modern society become a process of 'automation', which worked like mechanical

machines, and lost the critical aspects of society. As a result, information using health labels is considered a truth claim.

The development of digital media has become a new alternative space for human life to always be connected to others beyond physics, space, and time. This digital media channel makes it easy for anyone to get and distribute health information.

It is at this point that dogma of health will be increasingly massive as digital media become a space to distribute ideas, so they can create hoaxes of health. Advertisements of the health treatment delivering the promise of definite cure are the examples. Medical professionals themselves claim that medicines are used to suppress or relieve pain, not to cure illness.

Circulation of hoaxes can also manifest in various contests of interest. At least, during the past two years (2017-2018), the vaccine debate on social media has become a content that the public pays their great attention to. Of course, this tension is not a new issue in the world of health. It is the same as the debate about traditional versus scientific medicine, which still arguing with each other.

The polemic about vaccines can be a real portrait of the new formula of negotiations between the scientific claims of modern health, the advancement of the digital era, and religious dogmas which are interwoven and mediated by digital technology.

### **The Crisis of Public Sphere**

Digitizing information media brings a new 'face' to the health communication space. Given its history, the science of communication develops along with the emergence of communication technology across the times. The invention of the printing machine by Johannes Guttenberg in the 15th century was a sign of the historical movement of the revolution of human civilization [8]. Following this was the discovery of telegram, telephone, radio, television, and the internet. This internet is regarded as a sign of the birth of a major change in the study of

communication, namely the emergence of media convergence.

This era of media convergence has a significant impact on the ease of getting information. In fact, the personal nature of the speed and breadth of coverage is a new paradigm in producing and consuming information. Negroponte argued that the internet raises the digital revolution paradigm, as the internet will replace all types of old media (Jenkins, 2006). However, what happened then was that all the media actually complemented each other and did not negate each other, which was called convergence:

By convergence, I mean the flow of content across multiple media platform, the cooperation between multiple media industries, and the migratory behavior of media audiences who will go almost anywhere in search of the kinds of entertainment experience they want. Convergence is a word that manages to describe technological, industrial, cultural, and social changes depending on who's speaking and what they think they are talking about (Jenkins, 2006, pp. 2-3).

Jenkins in his presentation emphasized that media convergence has several characteristics. First, the development of connected communication technology. Second, interaction among platforms or the media industry. Third, the active audience and the social changes accompanying it. In this case, it emphasizes that the audience can be both consumers and producers (prosumer) (Livingstone, 2004).

Being 'active' can be understood as some efforts to meet their needs to develop strategies for institutional competition, legitimacy, and increasing income (Sundet and Ytreberg, 2009). It is hoped that the convergence can open the flow of ideas and content for a more participatory audience. The activeness of the audience to search for the latest information from various types of media and to distribute it independently is a necessity.

The easiness to get information is indeed regarded as one of the benefits in the era of convergence. The public can easily access and produce information on one occasion. Indeed, the internet in the digital era allows audiences to be able to connect anywhere and anytime (Livingstone, 2004). This pattern allows audiences to face a risk of easily 'slip' in the shallowness of the information stack (Supelli, 2013). The logic of the speed of receiving information coincides with their failure to distinguish between information and knowledge. Often, unwittingly, audiences easily share information without discerning first.

On the other hand, the development of digital media technology also brought about quite dramatic changes in the communication activities of health institutions. The communication process that was originally carried out in one direction has evolved into a broad dialogue process between institutions and the public (Juwita, 2017). Even now, the socialization process can have a wide range, directly and quickly reach stakeholders and audiences.

Visits to public health institutions can also be done through video conference classes, audio conferences, telemedicine, and webcasting. In fact, the use of Facebook accounts and other social media platforms to create public awareness and positive attitudes towards institutional social responsibility programs (Cho, et al., 2017).

Digital media technology has indeed been transformed into an effective 'vehicle' to carry out institutional interests (Argenti, 2006). Institutions are able to control more dynamic communication by involving many channels and changes in new capabilities. The process of institutional communication involving the internal-external public, and involving many functions such as relations with the media, investors, government, public relations, corporate philanthropy, institutional reputation, and public communication, can be connected digitally.

Messages personally packaged in social networking media, online journals (blogs), micro-blogging, media sharing, social bookmarking, and content media, are mutually contesting to produce virtual reality. The public is forced to consume information continuously without enough time to break and to discern it properly.

The continuous exposure of the media, brings the community which has not enough knowledge and digital literacy, to the limit between factual and virtual reality (Nasrullah, 2015). At this point, hoaxes have been produced, consumed, and massively distributed by producers and consumers. Hoax as an expression combining two conflicting ideas to create a certain effect/ oxymoron (Ireton and Posetti, 2019).

Information or false news does use mass communication channels to foster false beliefs or conclusions by the recipient. Walsh writes that hoaxes had developed since 1808 (Finneman and Thomas, 2018). At that time, hoaxes tended to be a means of the community to criticize and prove something. First, to qualify as a hoax, the sender of the message must aim to make the community or audience believe in the message. Second, hoax aims to entertain rather than to deceive the public. Third, hoaxes need a mass communication channel to reach the goal. Fourth, the rise of hoaxes is largely due to the presence of various new media information sources and the ability for anyone to post online content which can reach out to wide audiences. Hoaxes are different from fake news as hoaxes aim to entertain or educate people, while fake news has fraud as their goal (Finneman and Thomas, 2018).

Data released by the Ministry of Communication and Information in 2017 shows the number of public complaints related to negative content on the site, social media accounts, and smartphone applications increased to 900 percent compared to 2016 (Kompas, 2018). The Antara news website also stated that hoaxes on health issues achieved the

first position (Ariwibowo, 2018). In general, the emergence of many hoaxes on the health issues is related to information on food consumption, malignancy, alternative medicine, and lifestyle.

Hoaxes are considered successful when they are able to influence the mass consciousness, namely fear of the risks endangered the body. For example, the impact of drinking cold water triggers cancer, HPV vaccine causes menopause, eating chicken wings and claws cause cancer, kolang-kaling is an anti-rheumatic drug, to the consumption of energy drinks can increase stamina and confidence, and about the dangers of the vaccine itself.

Information circulating on social media last June 2017 was horrendous because of the statement of an American doctor, Dr. Bernard Mahfouz stating the dangers of vaccines. This information is uploaded in an Instagram account posting website page links and has been viral on social media. Some pro and counter opinions on vaccines began to re-emerge in the media.

After being investigated, the information did not contain the truth at all (hoax). In fact, the photo used in social media, figuring a doctor, is an adult movie star, Johnny Sins. In the same month, a private television show has also become horrendous news because it reported a child in Central Java who had suffered paralysis after being injected with the MR vaccine. This information is also viral on social media and has a negative impact on the sustainability of the national vaccine program.

This narrative wants to show that the various news present in this digital era makes the position of journalists as providers of public information also at risk of drowning in misinformation (disinformation and misinformation). This error was allegedly able to discredit the journalist profession who always worked in harmony with journalistic standards and ethics to form a public trust. Public concerns about false news appearing in the media can reduce their trust in the actual media report (Ireton and Posetti, 2019).

## **Conclusion**

The development of digital media does make it easy for anyone to become a consumer and even an information producer. In fact, the presence of new media is expected to reduce or eliminate the gap in health information.

However, various offers for the easiness of the digital era have created new problems, such as the massive spread of the hoaxes of health on social media, especially those related to the pro and counter of vaccination programs launched by the government. Of course, to study hoax in the era of new media requires a different reading method, because the potential for its emergence is stronger.

Hoaxes of health are indeed considered very dangerous because they are related to life and human rights. This study found that hoax of health care is increasingly prevalent and consumed by the community due to several aspects. First, new media offers a more personal communication space where people able to be consumers and producers of information. Second, clinical health reasoning has become a truth claim of knowledge that shapes people's trust in scientific reasoning and eliminates a critical attitude towards manipulative mechanisms.

The formula of hoaxes starts working using the reason of fear, the concept of human health, and the opportunity to provide alternative information. Anything that uses the words 'scientific' or 'health', 'clinical trials', and various other scientific discourses is regarded as if they cannot be debated. At that point, the hoaxes equipped with manipulative mechanisms and supported by the development of new media make it easy to breed.

Third, the gap in health information and the lack of public understanding of medical and technical terms makes them active consumers who seek to find health information independently through digital media without adequate health literacy. In this case, the community has the opportunity to consume

hoaxes of health consciously in their unconsciousness.

Fourth, hoaxes are consumed because the community cares about the information shared. Concern for healthy living, which is a necessity of society, is actually able to draw attention to seeing, reading, and even spreading information. Fifth, there is a tendency that hoax consists of certain interests leading to fake news circulates massively on social media. Sixth, the absence of adequate health literacy and media literacy in the community, makes it easy to 'slip' in a stack of information in the new media era.

Regarding the complexity of the problems of hoaxes related to health issues in the era of new media, it is time for activists on the communication issue even for public relations as the information 'Frontline' of health institutions to have the ability to package scientific information to be more communicative and educative for ordinary people.

In fact, in this text era, writing skills have become mandatory competencies of public relations professionals. First, to make the dissemination of health messages can be packaged in popular languages to help health interventions in public spaces. Second, to ward off hoaxes of health issues. However "faucets" of institutional information in the digital era are wide openable to be a public commodity. It is time for health institutions to provide information as a reference for truth, to strengthen health literacy, and open an egalitarian health-public space, to implement the public knowledge emancipation of health.

## **Acknowledgement**

It is proper to say that there are many weaknesses in this study, especially those related to the study of vaccine history, as well as the development and analysis of existing discourses. It is important that future studies pay attention to various aspects of history to more deeply finding out the development of vaccine discourse in particular and health discourse in general. This study is also still

limited to the analysis of the vaccine discourse appears in several cases on social media. In the next study, it is important to analyze the health political economy as a grand background in looking at the problems and polemics that are still debating in every government vaccine program. Especially, I would like to thank the Department of Communication Science at the Faculty of Social and Political Sciences UGM and Faculty of Medicine, Public Health, and Nursing UGM for their support in this research opportunity.

## References

- Amindoni, A. (2018, August 22). *Vaksin MR 'tidak halal': MUI Pusat Bolehkan karena Darurat, di Daerah Masih Ada yang Menolak* [MR Vaccine is 'Not Halal': MUI (Ulema Council) allows Due to Emergency, Some Areas Still Refuse]. BBC News Indonesia. <https://www.bbc.com/indonesia/indonesia-45248643>
- Argenti, P. A. (2006). How Technology Has Influenced the Field of Corporate Communication. *Journal of Business and Technical Communication*, 20(3), 357-370
- Ariwibowo (2018, May 1). *Survei Menyebutkan Hoax Terbanyak Soal Info Kesehatan* [The Survey Mentioned the Most Hoax About Health Info]. Antara Online. <http://www.antaraneews.com>
- Barran, J. (2010). *Pengantar Komunikasi Massa: Literasi Media dan Budaya* [Introduction to Mass Communication: Media Literacy and Culture]. Salemba Humanika
- Cho, M., Furey, L. D. and Mohr, T. (2017). Communicating Corporate Social Responsibility on Social Media: Strategies, Stakeholders, and Public Engagement on Corporate Facebook. *Business and Professional Quarterly*, 80(1), 52-69. <https://doi.org/10.1177/2329490616663708>
- Depkes (2018, October 1). *Kemenkes Serius Perangi Hoax Kesehatan* [Ministry of Health Seriously Fight Health Hoaxes]. Biro Komunikasi dan Pelayanan Masyarakat Kementerian Kesehatan RI. <http://www.depkes.go.id/article/view/17121900003/kemenkes-serius-perangi-hoax-kesehatan.html>
- Emilia, O. (2016). *Sejarah Fakultas Kedokteran UGM 1946-2016: Berkembang dalam Perjuangan dan Kesederhanaan* [History of the Faculty of Medicine UGM 1946-2016: Developing in Struggle and Simplicity]. Fakultas Kedokteran UGM. [http://opac.lib.ugm.ac.id/index.php?mod=book\\_detail&sub=BookDetail&act=view&typ=html&book\\_id=771503&obyek\\_id=1](http://opac.lib.ugm.ac.id/index.php?mod=book_detail&sub=BookDetail&act=view&typ=html&book_id=771503&obyek_id=1)
- Fichman, E. and Keelan, J. E. (2007). Resister's Logic: the Anti-Vaccination Arguments of Alfred Russel Wallace and their role in the debates over compulsory vaccination in England, 1870-1907. *Studies in History and Philosophy of Biological and Biomedical Sciences*, 585-607.
- Finneman, T. and Thomas, R. J. (2018). A Family of Falsehoods: Deception, Media Hoaxes and Fake News. *Newsarticle Research Journal*, 39(3), 350-361.
- Hardiman, F. B. (2009). *Menuju Masyarakat Komunikatif* [Towards the Communicative Society]. Kanisius
- Ireton, C. and Posetti, J. (eds.). (2019). *Journalism, 'Fake News' and Disinformation: Handbook for Journalism Education and Training*. UNESCO. [https://en.unesco.org/sites/default/files/journalism\\_fake\\_news\\_disinformation\\_print\\_friendly\\_0.pdf](https://en.unesco.org/sites/default/files/journalism_fake_news_disinformation_print_friendly_0.pdf)
- Jenkins, H. (2006). *Covergence Culture: Where Old and New Media Collide*. New York University Press
- Juwita, R. (2017). Media Sosial dan Perkembangan Komunikasi Korporat [Social Media and the Development of Corporate Communications]. *Jurnal Penelitian Komunikasi*, 20(1), 47-60
- Kompas (2018). Surat Kabar Harian Kompas, 1/02/2018, p. 5.
- Lestari, S. and Budhi, O. (2017, September 18). *Imunisasi Campak dan Rubella MR di Tengah Pro-Kontra Vaksinasi* [Measles and Rubella MR Immunizations amid Vaccinations' Pro-Cons]. BBC Indonesia. <https://www.bbc.com/indonesia/indonesia-41144515>
- Livingstone, S. (2004). The Challenge of Changing Audiences: Or, what is the Audience Researcher to do in the Age of internet. *European Journal of Communication*, 19, 75-85
- Loedin, A. A. (2005). *Sejarah Kedokteran di Bumi Indonesia* [The History of Medicine in Indonesia]. Pusataka Utama Grafiti
- Nasrullah, R. (2015). *Media Sosial: Perspektif Komunikasi, Budaya dan Sosioteknologi* [Social Media: Communication, Culture, and Sociotechnological Perspectives]. Simbiosis Rekatama Media



- Sundet, V. S. and Ytreberg, E. (2009). Working Notions of Active Audiences: Further Research on the Active Participant in Convergent Media Industries. *Convergence: The International Journal of Research into New Media Technologies*, 15(4), 383-390. <https://doi.org/10.1177/1354856509342339>
- Supelli, K. (2013). Filsafat Teknologi [The Philosophy of Technology]. *Jurnal Filsafat Driyarkara*, 34(3)
- Wijaya, B. S., Faruk, Wahyuni, H. I. (2019). Nilai-Tanda sebagai Jantung Makna Relasi Konsumen dan Merek [Sign-values as the Central Meaning of Brand Relationships]. *Jurnal Ilmu Komunikasi*, 17(2), 181-192.
- Wijaya, B. S. (2013). Korupsi Komunikasi dalam Dimensi Pesan, Media, Konteks dan Perilaku: Sebuah Proposisi Teoretis Untuk Riset [The Corruption of Communication in the Dimensions of Message, Media, Context, and Behavior: A Theoretical Proposition for Research]. *Journal Communication Spectrum*, 3(1), 1-13
- WHO (2017). *Smallpox Eradication*. <http://apps.who.int/iris/bitstream/handle/10665/126397/Chapter%2013.pdf;jsessionid=D5C53BEC0F1F86DB4E96120A8804C4CE?sequence=31>

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