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BEYOND PROCEDURAL COMPLIANCE: LIVED EXPERIENCES OF HEALTH COMMUNICATION TRANSPARENCY AMONG FILIPINO OVER-THE-COUNTER VITAMIN CONSUMERS

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Acceptance Page

This paper prepared by **DAN PATRICK T. MACAYA** with the title: **"BEYOND PROCEDURAL COMPLIANCE: LIVED EXPERIENCES OF HEALTH COMMUNICATION TRANSPARENCY AMONG FILIPINO OVER-THE-COUNTER VITAMIN CONSUMERS"** is hereby accepted by the Faculty of Information and Communication Studies, U.P. Open University, in partial fulfillment of the requirements for the degree, Master of Development Communication.

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Biographical Sketch

Dan Patrick T. Macaya is a graduate student at the Faculty of Information and Communication Studies, University of the Philippines Open University. He holds a professional background in advertising, with experience in regulatory processes governing advertising qualifiers and disclaimers in the Philippine context. His research interests include development communication, ethical health communication, consumer behavior, and phenomenological approaches to understanding lived experience. This thesis represents the culmination of his academic work in the Master of Development Communication program.

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Dedication

Behind every health decision is a story of care, hope and responsibility. This work is dedicated to the Filipino consumers whose lived experiences brought these stories to life.

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Abstract

This study explored the lived experiences of Filipino consumers as they purchased over-the-counter (OTC) vitamins and encountered advertising qualifiers and disclaimers. Employing a Husserlian descriptive phenomenological design and the analytical procedures outlined by Giorgi (2009), the research centered on how consumers experienced, perceived and made meaning of the regulatory mechanisms intended to promote transparency in health-related advertising. Data were gathered through short, informal, post-purchase interviews conducted in a drugstore in Metro Manila with nineteen (19) adult Filipino consumers.

Four themes emerged from the analysis: (1) The Routinized Lifeworld of Vitamin Consumption, describing how vitamin purchasing was experienced as habitual, family-oriented, and mediated by trusted interpersonal authority; (2) Peripheral Perception of Advertising Qualifiers, revealing that disclaimers were consistently encountered as background elements rendered invisible by their size, placement, and peripheral position; (3) Experiential Constructions of Trust, Transparency, and Sincerity, demonstrating that respondents grounded their trust in embodied experience and social relationships rather than in regulatory text; and (4) Between Compliance and Comprehension, describing the essential structure of the phenomenon as an ethical gap in which disclaimers were formally present but experientially absent.

The results suggest possible implications for understanding the divergence between regulatory assumptions about disclaimer effectiveness and the lived experiences of consumers in Metro Manila, where disclaimers appeared to function as background elements rather than meaningful communicative tools. These findings point to a possible gap between regulatory transparency and communicative

transparency, with serious consequences for development communication, ethical health advertising, and Sustainable Development Goal 12 (Responsible Consumption and Production). These findings suggest possibilities for regulatory bodies, advertisers, and development communication scholars to consider communication practices that may be more responsive to consumers' lived experiences and actual information needs.

Keywords: advertising disclaimers, OTC vitamins, phenomenology, development communication, transparency, health communication, Filipino consumers, responsible consumption

Chapter I

INTRODUCTION

Background of the Study

Development communication focuses on fostering communication practices that enable people to actively participate in creating meaning in their lives, ultimately shaping their quality of life. Fundamentally, this is a domain that privileges ethical communication and people's ability to act upon the information they receive, particularly those whose decision-making is constrained by inequality or insufficient access to knowledge (Servaes, 2008). The difference between development communication and other modes of communications is developing a practice which insists that individuals are not merely receivers of information but rather take active roles in their own lives.

This principle is critical in the area of health communication. When consumers make decisions about what to consume and how to care for their bodies, the consequences extend well beyond the personal. Decisions on health behaviour matter for a community's well-being and development (WHO, 2017). Therefore, ethical health communication is not just about the delivery of truthful messages; it needs design to make sure that such messages are capable of genuine understanding so that people can act on what they know in their own daily lives.

That can be pertinent in the Philippines given the consumption of over-the-counter (OTC) vitamins as over-the-counter (OTC) vitamins play an important role in the daily life and the wellness habits of the population. Ethnographic accounts suggest that vitamins may carry meanings beyond their nutritional function, with some researchers noting their association with concepts of strength and familial care in

certain Filipino communities (Hardon, 1987). Because they are readily available and do not require a physician's prescription, these consumers routinely obtain and take vitamins as habitual reactions to fatigue, stress, and perceived vulnerability, often without deliberate reflection on the actual health consequences.

At the heart of these consumption behaviors lies advertising. While there are policy guidelines on vitamin supplementation, advertising messages on television, digital and influencers' content construct a compelling narrative where OTC vitamins are portrayed as safe and indispensable. This feeds generally, in the popular imagination, into views that vitamins are more valuable commodities than products to be carefully considered (Knoll & Matthes, 2017). In doing so, advertising does more than merely disseminate information; it actively shapes how consumers understand the meaning of health and what they believe to be responsible behavior.

The Ad Standards Council (ASC) and the Food and Drug Administration (FDA) require that advertising disclaimers and qualifiers are included to protect consumers from health-related advertisements with the potential for misleading messages. Qualifiers like "No Approved Therapeutic Claims" or "with proper diet and exercise," are designed to moderate expectations of consumers, clarifying the limits of product claims (ASC, 2022; FDA Philippines, 2020). From a regulatory standpoint, these disclaimers function as instruments of ethical assurance, meant to establish a baseline of honesty in health-related advertising.

Transparency as a development communication term requires more than the presentation of information. True transparency is achieved only when information is contextualized in ways that allow people to comprehend and apply it to their own decision-making (Rawlins, 2008; Holland et al., 2018). In that respect, this is the case with ethical communication: one must focus, not only on what is communicated, but

on how messages transfer to and are integrated into everyday life. When disclaimers serve merely as procedural additions to advertising, without facilitating actual comprehension, the goal of transparency may remain unfulfilled.

This gap between regulatory intent and communicative reality becomes particularly consequential in the context of health consumption. When consumers fail to understand or simply ignore information that pertains to their well-being, the consequences are tangible and real. Without disclaimers functioning as meaningful guidance, their presence in advertising offers little protection against misinformation or unwarranted confidence in product claims (Bivins, 2017).

Despite the ubiquity of disclaimers in vitamin supplement advertising, existing research on the subject has largely examined disclaimers from the perspectives of health communication practitioners, regulators, or message effectiveness. Much of the available knowledge, therefore, remains focused on measures of consumer recall, attention, or regulatory compliance, while the actual experience of consumers in realworld purchasing situations has received considerably less attention (Baghi & Gabrielli, 2018).

This study addresses that gap by centering on the lived experiences of Filipino consumers as they purchase OTC vitamins. Rather than treating disclaimer effectiveness as a technical or regulatory matter, this research investigates how consumers actually encounter, perceive, interpret, and incorporate disclaimers into their processes of meaning-making. Grounded in phenomenology and development communication, this study proceeds from the premise that consumer experience is the site where advertising transparency is either realized or rendered hollow.

Statement of the Problem

The intention of advertising qualifiers or disclaimers is to create transparency and truth in health ads. But these regulatory mechanisms alone aren't a guarantee of realizing the desired communicative use. In the Philippine OTC vitamin market, it may be argued that the reliance on disclaimers led to a kind of transparency fiction, i.e., an atmosphere of regulation in which institutional mandates were fulfilled on the surface level, but not as a concern that there was communicative clarity for the consumer. With overt oversaturation of advertisements and routinization of many health-related decisions of OTC vitamins in the Philippines, it is necessary to know how informative and symbolic health disclaimers are to health care regulations.

One issue observed in the Filipino OTC vitamin advertising environment concerns the routine inclusion of regulatory disclaimers. Qualifiers such as “No Approved Therapeutic Claims” or “with proper diet and exercise” frequently appear as standardized textual components in advertisements. These statements function as required regulatory disclosures but are often integrated into advertisements in ways that may not necessarily prioritize detailed consumer engagement. As discussed by Bivins (2017), such regulatory language can sometimes operate as symbolic markers of compliance within the message structure.

Furthermore, the Filipino consumer’s lifeworld has added culturally distinct layers to this concern. Indeed, Filipino consumers tend to put affective trust, family-oriented health practices, and celebrity endorsements ahead of technical qualifiers (Hardon, 1987; Knoll & Matthes, 2017), turning the process of meaning-making around disclaimers fundamentally different from the assumptions inscribed within regulatory frameworks. This culturally embedded sense-making continues to be poorly studied, particularly in the field of development communication.

In ordinary life, the overwhelming majority of Filipinos purchase OTC vitamins as an everyday rather than a strategic health decision. Under these often-familiar conditions, disclaimers and qualifying statements are likely to be neglected, misinterpreted, or attributed meanings that deviate from the regulatory intention. This disconnect suggests the need to examine the transparency in advertising, not from an institutional standpoint, but from the standpoint of the consumers' personal lives. This study seeks to examine advertising transparency through the use of disclaimers and qualifiers from the standpoint of consumers themselves by addressing the following research questions:

1. What are the lived experiences of Filipino consumers when purchasing over-the-counter vitamins?
2. How do consumers encounter, notice, and interpret advertising qualifiers and disclaimers during the purchasing process?
3. How do these lived experiences shape consumers' meanings of transparency, trust and ethical communication?

Objectives of the Study

This study aims to explore the lived experiences of Filipino consumers in relation to the advertising disclaimers and qualifiers they encounter when exposed to promotional materials for over-the-counter (OTC) vitamins. Specifically, the study seeks to:

1. Discover the lifeworld and natural attitude of Filipino consumers in their regular purchase of OTC vitamins to understand routines, cultural motivations, embodied practices that precede and frame the encounter with advertising qualifiers and disclaimers;

2. Identify the perceptual thresholds at which advertising qualifiers transition from ritualistic presence to meaningful information that consumers actually notice, and reveal the essential structures of meaning that consumers assign to concepts of transparency, trust, credibility, and sincerity—which must be rooted in lived narratives rather than imposed by institutional or academic models; and

3. Contribute to development communication scholarship and consumer empowerment by providing a framework that explicitly links findings to Sustainable Development Goal 12 (Responsible Consumption and Production), moving advertising from mere procedural compliance toward informed, ethical choice.

Significance of the Study

For Development Communication

This study makes a contribution to development communication by adopting an empirical model for advertising transparency, in which transparency is no longer an operational mandate but rather an embodied practice. In doing so, it contributes to theoretical frameworks related to ethical communication and citizen empowerment (Servaes, 2008) and to informed decisions (Manyozo, 2022). The research problem of procedural compliance not delivering communicative justice, and the objectives of capturing pre-reflective human consciousness are relevant to the development communication mandate that recipients act in the world and reflect in their own experience, rather than being the passive recipients of information.

For Policymakers & Regulators

The findings of this study can inform regulatory bodies such as the Ad Standards Council (ASC) and Food and Drug Administration (FDA) by surfacing how consumers actually experience advertising qualifiers and disclaimers in the course of purchasing decisions. Such insights may contribute to the development of regulatory frameworks that are more attuned to consumer realities and more effective in promoting genuine transparency.

For Consumers & Educators

By illuminating how consumers navigate health-related advertising in their daily lives, the study also supports media literacy and consumer education efforts aimed at cultivating critical awareness, informed decision-making, and responsible consumption practices.

Chapter II

REVIEW OF RELATED LITERATURE

This chapter highlights scholarly literature pertaining to advertising transparency, ethical communication, consumer meaning-making, and lived experience, with particular focus on health-related consumption and development communication. This review frames “transparency” not as a technical characteristic of message making but one that is constructed via everyday human interactions with communication, as an experiential and interpretive process. The article is thematically developed from conceptual treatments of transparency and ethics to empirical studies on advertising disclaimers, phenomenological perspectives on lived experience, cultural aspects of Filipino health consumption, and the framework of empowerment and responsible consumption by development communication. The synthesis of the research gap then provides the rationale for the present study.

Transparency as Ethical Communication

Transparency is generally considered foundational to ethical communication. Organizational and public communication scholars define transparency as intentional sharing of information aimed at fostering understanding, accountability, and trust between communicating parties (Rawlins, 2008). But Rawlins argues that transparency goes much further than a mere transmission of information from one provider to another: it calls for the disclosed information to be substantive, accessible, and actually useful.

Based on this relational approach, Holland et al. (2018) differentiate between strategic transparency – the intention of the sender to disclose – and perceptual

transparency – the perception of the receiver as to whether the disclosure is honest and useful. Their study shows that perceptual transparency has a significantly greater impact on trust than does the mere disclosure of information. This distinction becomes particularly relevant to the study of disclaimers; a qualifier may be included in an advertisement, but if consumers do not perceive it as forthright or relevant, it does not achieve the trust which regulations presume it should.

Academics of ethics in communication have cautioned, however, that transparency is not to be conflated with regulatory compliance. Bivins (2017) suggests a form of what he refers to as ethical dissonance – or moral contradiction – a situation in which communication formally meets ethical requirements but sounds manipulative or insincere. This makes transparency performative: it exists only on the surface of a message without piercing its substance. Such concerns are so acute in advertising that the disclaimer often seems to be divorced from the persuasive narrative and ends up leaving consumers with little or no real reason to evaluate it.

Advertising Disclaimers: Presence Versus Experience

Disclaimers and qualifiers are standard advertising regulatory devices, mechanisms that are employed to correct, qualify, or contextualize persuasive claims. Statements like “No approved therapeutic claims” or “with proper diet and exercise” appear in health-related advertising to prevent consumer deception and support informed decision-making. Many empirical studies have shown a yawning gap between the regulatory intent of disclaimers and their actual effects on audiences.

Andrews, Burton and Netemeyer (2000) found that television health advertising disclaimers were associated with low recall, especially for information that was in smaller or abbreviated forms (i.e., smaller font sizes). They discovered that the

inclusion of disclaimers for regulatory compliance does not necessarily translate into viewer comprehension. Similarly, Boerman et al. (2017) established that in digital advertising where visual as well as emotional stimuli compete for attention, disclosures are processed peripherally, rather than through judicious use of cognition.

The effectiveness of disclaimers, as Baghi and Gabrielli (2018) observe, is heavily dependent on linguistic clarity and perceived sincerity, and use of ambiguous or unnecessarily technical wording tends to generate skepticism rather than reassurance among consumers. These studies have helped provide empirical work on which features of disclaimers catch or hold attention under specific conditions; however, these experimental results have been limited by laboratory designs. Empirically, we know relatively precious little about how consumers actually interact with disclaimers when making habitual purchase decisions in real situations—when time is of great importance and context is key.

Phenomenology and Lived Experience in Communication Research

Phenomenology offers both a philosophical orientation and a methodological framework for studying how people experience phenomena in their everyday lives. Husserl's phenomenological approach calls for the bracketing of presuppositions to examine how meaning appears within consciousness, prior to the imposition of theoretical categories. This stands in contrast to positivist approaches, which seek to explain experience through the measurement of variables.

Van Manen (2014) extends this tradition into applied research, emphasizing that description and interpretation are deeply intertwined in the study of lived experience. For Van Manen, meaning does not emerge through mechanical extraction from data but through sustained, reflective engagement with participants' narratives.

Communication, from this perspective, is not simply transmitted and received; it is lived, felt, and interpreted within the circumstances of a person's life.

When applied to the context of advertising and health communication, phenomenological thought suggests that the purchase of OTC vitamin supplements is more than an economic transaction—it is an experiential process shaped by prior knowledge, bodily awareness, cultural beliefs, and communicative encounters. Advertising disclaimers, within this frame, are not isolated textual elements; they are encountered at moments where emotions, expectations, routines, and habits all converge in the consumer's consciousness.

As Creswell (2013) emphasizes, phenomenological research is one of five key qualitative frameworks that can capture a sense of the commonness of experience shared amongst people. Creswell describes phenomenological research as a way of capturing the meaning of the lived experience of a concept or phenomenon from several individuals. The method involves the researcher setting aside personal experiences to understand the participants' experiences to obtain a description of the universal essence of the experience. This methodological rigor is vital in consumer health research, where the researcher's professional experience with advertising regulation has the potential to unconsciously affect interpretation. Accordingly, Creswell's framework provides additional methodological justification for adopting a Husserlian approach to examining Filipino consumers' experiential navigation of advertising disclaimers.

Development Communication, Empowerment and Responsible Consumption

Development communication understands communication to be the process by which individuals develop capacity for informed decision-making about their own

circumstances. According to Servaes (2008), in development communication, the locus of communication must be the people themselves rather than the agencies or institutions that claim to act on their behalf. Transparency, in turn, holds value only insofar as it contributes to development and strengthens people's capacity for critical engagement with the conditions of their own lives.

Manyozo (2022) reinforces this position, stressing that development communication must attend to people's everyday practices and experiences, particularly in contexts involving health and well-being. Communication that fulfills procedural requirements without fostering genuine understanding does not empower—it renders empowerment rhetorical.

Within health-related advertising, these principles connect directly to Sustainable Development Goal 12 on Responsible Consumption and Production. Transparency in advertising serves a developmental function when it enables consumers to make ethical and informed choices about what they consume. For disclaimers to contribute to this goal, they must operate as meaningful communicative cues rather than as ritual performances that satisfy regulatory form without substance.

Health Literacy and the Filipino Consumer

Consumer ability to access health-based advertising information is intrinsically influenced by their health literacy. Tolabing et al. (2022), in the first national health literacy survey conducted in the Philippines involving 2,303 residents aged 15 to 70, found that Filipinos have limited health literacy: the prevalence varies considerably according to dimension, region, and sociodemographic variables. This finding has immediate consequences for the present study: where a significant portion of consumers in the Philippines is deprived of functional health literacy, that is, the ability

to decipher regulatory qualifiers, the presupposition that disclaimers can actually be effective communicative devices soon becomes dubious.

Tolabing et al. (2022) also found that older adults, individuals with low educational attainment, and low-income rural populations experience a particularly high risk of limited health literacy. These are the demographic segments that are most likely to use OTC vitamins as a primary measure of health maintenance, and least likely to have the literacy resources to critically analyze advertising claims or the related qualifiers.

In a complementary study, Dayrit et al. (2024) studied the self-care readiness of consumers in four Asia-Pacific countries, including the Philippines. Filipino respondents showed a mean Consumer Health Literacy Quotient (CHLQ) score of 78.6 out of 100, with five distinct consumer health literacy profiles identified. The study found that Filipino consumers had a fair amount of basic knowledge in health, yet their critical evaluation of health information sources (including advertisements) was limited.

Javier et al. (2019) conducted a study of health literacy of 855 Filipino middle school students which concluded that the dimensions of consumer health literacy are especially weak among younger populations. Such results imply the lack of alignment between regulatory intention and communicative reality observed in this study is not limited by age but reveals an overarching issue at the systemic level in the way that health information is conveyed and consumed in Filipino society.

In this way, health literacy offers an important optic to view the reasons why advertising disclaimers fail to operate as a meaningful communication tool. When Nutbeam's (2008) framework is applied to the Philippines, it becomes apparent that most consumers engage with disclaimers at the level of functional literacy—basic

reading—if they engage at all. The interactive and critical health literacy that would empower consumers to analyze, question, and act upon disclaimer information is structurally unsupported by current advertising practices.

Self-Medication Practices and OTC Vitamin Consumption in the Philippines

More so, the Philippine context of OTC vitamin consumption is shaped by entrenched self-medication practices. Amit et al. (2023), in a policy analysis of self-care in the Philippines, found that three to six in ten Filipinos engage in self-medication, which both reflects the availability of OTC products and the structural limitations of the Philippine healthcare system. While the 2019 passage of the Universal Health Care Act increased formal access to healthcare, self-medication is still prevalent, especially in communities where visiting a doctor for consultation can be costly, time-consuming, or geographically inaccessible.

Hardon (1987), in a groundbreaking ethnographic study of pharmaceutical use in a Filipino village, concluded that most childhood illnesses were addressed without the consultation of a doctor, and that both prescription and non-prescription drugs were obtained through informal channels. In Hardon's later work (1992), she introduced the culturally significant concept of hiyang—the notion that a particular drug is personally suited to an individual's body. This concept operates outside biomedical frameworks and reflects a mode of evaluating drug efficacy based on embodied experience rather than clinical evidence or regulatory disclosure.

Loreche, Pepito and Dayrit (2023) conducted a scoping review covering the literature and collected pertinent studies regarding 26 studies concerning self-care practices for common acute conditions in the Philippines and noted that Filipinos perform both safe and unsafe self-care practices (e.g., routine use of vitamins and

supplements are done without medical supervision). These results support the demand for a national strategy that encourages responsible self-care within the context of cultural and economic determinants of self-medication behavior.

Collectively, these studies underline that OTC vitamin consumption in the Philippines is not a consumer behavior but rather a culturally embedded practice defined through economic need, limited access to healthcare, and a value system in which family member care and bodily maintenance take high priority. Advertising disclaimers, therefore, function in a scenario very different from the one that regulatory regimes envision: a context in which the consumer already has made the decision to purchase a product, prior to encountering the words that may qualify for inclusion.

Advertising Literacy and Consumer Empowerment

The issue of whether disclaimers shield consumers is the more general issue of advertising literacy, or the ability to recognize, evaluate, and critically respond to advertising messages. Rozendaal, Lapierre, van Reijmersdal, and Buijzen (2011) questioned the commonly held belief that cognitive knowledge of advertising's persuasive intent is enough to protect consumers from advertising effects. They suggested that advertising literacy should also be broadened to reflect attitudinal and performance aspects, noting that even those who could grasp advertising's commercial purpose did not necessarily respond differently to advertising messages. Hudders, De Pauw, Cauberghe, Panic, Zarouali, and Rozendaal (2017) further developed this framework by identifying three dimensions of advertising literacy: cognitive (understanding advertising's intent), moral (evaluating advertising's fairness), and affective (managing emotional responses to advertising). Their research demonstrated that the mere presence of a disclosure—analogous to an advertising

disclaimer—was insufficient to activate the critical advertising literacy necessary for informed consumer decision-making.

These results, when applied to the OTC vitamin advertising in the Philippines, indicate that the “No Approved Therapeutic Claims” disclaimer alone cannot give consumers the power to judge the health claims that surround it. The disclaimer is a piece of regulatory information, but it does not build advertising literacy; the cognitive, moral, and affective capacity of consumers to absorb and integrate that information into their decision-making processes.

The Elaboration Likelihood Model and Health Advertising

While this study will employ a Husserlian phenomenological approach to describe consumers’ lived experiences with advertising disclaimers, existing communication theories remain useful in contextualizing how persuasive messages are typically processed. One such framework is the Elaboration Likelihood Model (ELM), which explains how individuals engage with persuasive information under different levels of cognitive involvement. It is important to clarify that the ELM is presented here solely as background context for situating the study’s findings within existing scholarship. The ELM does not guide the phenomenological analysis, which remains grounded exclusively in participants’ lived accounts as described through Giorgi’s (2009) method.

Elaboration Likelihood Model (ELM), proposed by Petty and Cacioppo (1986), offers a theoretical model explaining the processing of persuasive messages through two cognitive routes. The central route consists of thoughtful, active assessment of the message's arguments and is triggered if the recipient has both motivation and the ability to evaluate the content. The peripheral route, on the other hand, is based on

superficial signals (e.g., source attractiveness, message length, emotional tone) and operates in contexts of low motivation or limited ability to process. The way a message is processed determines not only the depth of attitude change it creates but also its durability.

The relationship between the ELM and advertising disclaimers is direct and important. Disclaimers are, by design, textual, factual, and regulatory—they are argument-quality information that needs to be considered via a central route. But the advertisement contexts in which disclaimers are inserted are also set up to facilitate peripheral-route engagement: rich visual images, celebrity endorsers, emotive appeals, brand familiarity are peripheral cues which attract attention and influence attitudes, without resorting to effortful cognitive evaluation (Petty, Cacioppo, & Schumann, 1983). This structural mismatch — between the processing requirements for disclaimers and the processing environment in advertisements — represents one of the key challenges for regulatory transparency.

Celebrity Endorsement as a Peripheral Cue

Celebrity endorsement, a major aspect of Philippine OTC vitamin advertisements, functions as a paradigmatic peripheral cue under the ELM. Knoll and Matthes (2017), conducting a multilevel meta-analysis that combined 46 studies with 10,357 participants, demonstrated that celebrity endorsements positively influenced attitudes via peripheral mechanisms including attractiveness, familiarity, and likability—without requiring consumers to scrutinize substantive product claims. Importantly, they discovered that celebrity endorsements performed less effectively than quality seals or awards and found that when consumers had access to central-route quality indicators, the peripheral celebrity cue became less influential.

In a prior meta-analytic synthesis, Amos, Holmes, and Strutton (2008) recognized trustworthiness, expertise, and attractiveness as the three most influential celebrity endorser effects on purchase intentions and brand attitudes and found that trustworthiness was the strongest predictor. When used in a health promotion context, the perceived endorser credibility can bypass critical evaluation of product efficacy claims and disclaimer information, effectively functioning as a substitute for the substantive argument evaluation that the central route would require.

Consumer Involvement and OTC Label Processing

Sansgiry, Cady, and Sansgiry (2001) experimentally evaluated the effects of consumer involvement on information processing from OTC medication labels. Using 256 participants and simulated product labels, they discovered that consumers with high involvement were significantly more likely to comprehend label information, including warnings and regulatory text, and to evaluate it accordingly. It is observed that under low-involvement conditions, comprehension and evaluation of label information were significantly reduced. This clearly shows that routine purchasing of OTC health products—the condition that the respondents in this study mentioned repeatedly—is associated with low elaboration of disclaimer and regulatory information.

Collectively, these studies outline a theoretical context for examining how advertising disclaimers are encountered and processed within OTC vitamin advertising. At the same time, advertising environments often contain elements commonly associated with peripheral-route processing, such as celebrity endorsers, emotional imagery, brand familiarity, and other attention-grabbing cues. These

conditions may influence the extent to which audiences attend to and engage with disclaimer information.

Within the context of this study, the ELM provides a useful framework for understanding how such advertising environments may shape consumer encounters with disclaimer messages. While the phenomenological approach of this research focuses on describing participants' lived experiences, existing communication theories such as the ELM offer a broader conceptual background for interpreting how advertising disclosures may be positioned within persuasive messages.

Synthesis and Research Gap

The literature reviewed in this chapter converges on a central finding: there is a persistent mismatch between the regulatory intent of transparency in advertising and its practical realization in the lives of consumers. Although transparency remains a priority in advertising and marketing research, it has frequently been reduced to a matter of regulatory procedure, with the actual experience of message recipients receiving insufficient attention.

Most research on advertising disclaimers has been experimental and message-oriented to the extent that work has emphasized recall, attention, and comprehension. Although such studies have provided meaningful understandings of the conditions under which disclosures attract or fail to attract attention, they are by their very nature insulating consumers from the social and situational contexts in which health-related decisions are actually made. In these paradigms, the disclaimer is treated as a discrete textual variable rather than as an element embedded in everyday practice, habit, and feeling. As a consequence, there is relatively little empirical work looking at how consumers experience disclaimers at the actual moment of purchasing—when

decisions are habitual, time-constrained, or guided by trust and familiarity rather than by deliberate evaluation.

Moreover, a significant part of the available literature on transparency comes from advertiser-, regulatory-, or institution-centered perspectives. Some of the questions around ethical communication are examined through the lens of compliance—whether proper procedures have been followed and whether disclosures meet regulatory standards—instead of the perspective of the individuals receiving and interpreting the disclosed information. This framing serves to mask the possibility that transparency may be formally present yet experientially absent.

There is a gap in development communication, for this, development communication is seen as a process in which agency and informed choice are encouraged, and participation in everyday decision-making is given. If transparency is understood only in procedural or symbolic terms, rather than as a condition that must be experienced by the people it is meant to protect, then its promise to enable responsible consumption and health-related empowerment goes unrealized in effect. However, empirical work in development communication involving advertising transparency as an aspect of lived experience related to health consumption is limited. In the context of the Philippines, qualitative research that foregrounds consumers' everyday meaning-making of advertising disclosures is lacking. Cultural factors—routinized self-medication, family-oriented health practices, and affective trust in brands and celebrity endorsers—indicate that Filipino consumers are likely to experience disclaimers in ways that differ significantly from the assumptions embedded in regulatory frameworks. Yet these experiential dimensions have not been explored in sufficient depth to capture how transparency is actually negotiated within the lifeworld of Filipino consumers.

The current study attempts to fill these intersecting gaps by applying a Husserlian phenomenological approach in the development communication framework. Thus, by focusing on the experiences of Filipino consumers in the moment of actual OTC vitamin buying, this research goes beyond mere questions of presence and effectiveness—and addresses how, rather than if, disclaimers are understood, how they are located and negotiated within the everyday course of what people do. In this way, this study contributes to current development communication literature by reframing advertising transparency as not a limited domain of regulatory discourse but one of lived ethics that must be thought of as one that concerns the consumer on whom it is intended to be perceived.

Chapter III

METHODOLOGY

Research Design

This study employed a qualitative phenomenological research design grounded in the tradition of Husserlian phenomenology. Originating from the philosophical work of Edmund Husserl, this approach seeks to describe phenomena as they appear in everyday experience, with the aim of uncovering the essential structures of consciousness through which those phenomena acquire meaning (Husserl, 1970).

Central to Husserlian phenomenology is the commitment to describing experience prior to interpretation or theoretical framing—to going “back to the things themselves” and attending to how phenomena present themselves in conscious experience. In this study, the phenomenon under investigation is the experience of encountering advertising qualifiers and disclaimers in promotions for over-the-counter vitamins, particularly as these encounters occur prior to and shape consumers’ purchasing decisions.

In line with this methodology, the research did not use a predetermined conceptual model prior to data gathering and analysis. Instead of imposing institutional categories of transparency, trust, or ethical communication, the research permits these constructs to be generated by participants’ own accounts of their experiences. This methodological position is in keeping with the commitments of development communication, which prioritizes understanding how people make sense of information within the conditions of their everyday lives. By putting description before explanation, the study hoped to portray precisely how advertising transparency is actually experienced by consumers, rather than how it is designed to function by advertisers or regulators.

Research Positionality

The researcher brings a professional background in advertising, including familiarity with the regulatory processes governing advertising qualifiers and disclaimers. This background offers valuable contextual awareness of the advertising environment, but it also introduces the risk of presuppositions—particularly concerning assumptions about regulatory intent, the ethical efficacy of disclaimers, and the nature of consumer understanding.

The researcher deliberately acknowledges and carefully negotiates this positionality throughout the research process. Recognizing how one's professional experience shapes perception is essential to maintaining methodological integrity, particularly in a study designed to learn from consumers' experiences rather than to confirm practitioner or organizational assumptions.

To this end, the researcher adopts a sustained reflexive practice, attending throughout data collection and analysis to how pre-existing professional knowledge may influence his engagement with participants. This reflexive orientation supports the descriptive character of Husserlian phenomenology by orienting the researcher toward receptivity—listening to what participants say rather than evaluating their accounts against prior professional assumptions.

Phenomenological Reduction and Bracketing (Epoché)

Phenomenological reduction, or epoché, is a foundational procedure in Husserlian phenomenology that requires the intentional suspension of taken-for-granted assumptions so that the researcher may attend more closely to the structures of lived experience. In this study, bracketing is treated not as a one-time act but as an

ongoing methodical practice that accompanies every stage of data collection and analysis.

Bracketing is operationalized through systematic reflexive memo writing. Throughout fieldwork, transcription, and analysis, the researcher maintains reflexive memos documenting assumptions, expectations, professional instincts, and emotional responses related to advertising, health communication, and consumer behavior. These memos are recorded immediately after each interview and revisited during later stages of analysis to identify moments where the researcher's prior experience may be shaping his attention to the data.

The memos also document affective reactions—such as acceptance, discomfort, surprise, or skepticism—since these responses often signal points of overlap between the researcher's own biography and the narratives of participants. By externalizing these reactions in writing, the researcher can more effectively set them aside and return attention to the participants' own accounts of their experiences.

Through this disciplined practice, the phenomenological reduction supports fidelity to the voices of lived experience and ensures transparency regarding the researcher's own standpoint. The credibility of the research is thereby strengthened, as its findings remain grounded in participants' accounts rather than in the researcher's professional or theoretical presuppositions.

Husserlian Phenomenology vs. Hermeneutic Phenomenology

It is important to clarify the methodological distinction between Husserlian (descriptive or transcendental) phenomenology and hermeneutic phenomenology, as this distinction carries significant implications for the design and conduct of the present

study. Neubauer, Witkop, and Varpio (2019) explain that transcendental phenomenology, grounded in Husserl's philosophical work, seeks to describe the essential structures of consciousness through which phenomena acquire meaning, while hermeneutic phenomenology, associated with Heidegger and Gadamer, emphasizes interpretation and the historical situatedness of understanding.

The choice of a Husserlian approach for this study is deliberate and methodologically grounded. Because the phenomenon under investigation—the consumer's encounter with advertising disclaimers—has not been extensively studied from the consumer's perspective, a descriptive approach that suspends prior theoretical and professional assumptions is more appropriate than an interpretive one. The Husserlian commitment to description before interpretation ensures that the findings emerge from participants' own accounts rather than from the researcher's professional knowledge of advertising regulation.

Frechette, Bitzas, Aubry, Kilpatrick, and Lavoie-Tremblay (2020) provide additional methodological justification by noting that descriptive phenomenological inquiry is particularly suited to research questions that seek to uncover the essential structures of an experience that has not been previously well understood. The present study's focus on how Filipino consumers actually experience disclaimers—as opposed to how they are theoretically assumed to function—makes the descriptive orientation both appropriate and necessary.

Selection of Participants and Information Power

The selection of nineteen respondents is consistent with recommendations for phenomenological research. Creswell and Poth (2018) recommend between five and Johnson (2006) empirically demonstrated that data saturation in qualitative interview

research typically occurs within the first twelve interviews. In the present study, data saturation was observed by the fourteenth interview, with subsequent interviews confirming and enriching established themes without introducing substantially new experiential structures.

Malterud, Siersma, and Guassora (2016) propose the concept of information power as an alternative to numerical saturation thresholds. According to their framework, the information power of a sample is determined by five factors: the breadth of the study aim, the specificity of the sample, the use of established theory, the quality of the dialogue, and the analysis strategy. The present study's narrow and specific aim, purposively selected participants with direct experience of the phenomenon, strong theoretical grounding in phenomenology, descriptive interview quality, and rigorous Giorgian analysis collectively contribute to high information power, supporting the adequacy of the sample size.

Hennink, Kaiser, and Marconi (2017) further distinguish between code saturation, which occurs when no new codes emerge from additional data, and meaning saturation, which requires that each code be fully understood in terms of its dimensions, nuances, and contextual variations. They found that code saturation typically occurs at approximately nine interviews, while meaning saturation requires sixteen to twenty-four interviews. The present study's sample of nineteen respondents falls within the range recommended for achieving meaning saturation, supporting the depth and completeness of the thematic analysis.

Research Site and Participants

The study was conducted in a drugstore in Metro Manila where OTC vitamins are routinely purchased. The research site is deliberately chosen to situate data collection within the natural context of the phenomenon, enabling the capture of experiences as they occur in the flow of everyday life.

Participants are adult Filipino consumers who have just purchased OTC vitamins for personal or household use. Participant selection followed a purposive selection criteria appropriate to phenomenological research: participants must have direct, firsthand experience of the phenomenon under study—namely, the purchase and consumption of OTC vitamins and their encounter with the advertising and advertising disclaimers and qualifiers that surround these products.

It is important to note that the topic of disclaimers was not imposed upon respondents through leading questions. Participants were shown the actual product they had just purchased and invited to describe their experience in their own words. The emergence of disclaimer-related themes was organic, arising naturally from respondents' accounts of their purchasing experience. The product packaging itself served as a visual elicitation tool to ground the conversation in concrete experience, not to direct it toward predetermined conclusions.

Data Gathering Procedure

Data were collected through short, informal interviews conducted immediately after consumers complete a purchase. The researcher stationed himself in a drugstore location and invited consumers to participate voluntarily. This approach ensured that participants can articulate their experiences while the purchasing encounter remains fresh and accessible to reflection.

Interview questions were descriptive rather than evaluative, designed to encourage participants to narrate:

- Reasons why they purchased the vitamin
- What they noticed or remembered from advertising or packaging
- How they encountered and understood any qualifiers or disclaimers, and how these factors were considered in their decision to buy.

The interview process did not presume that participants possessed prior knowledge or awareness of advertising disclaimers. Instead, priority was given to documenting participants' spontaneous responses and lived experiences as they naturally emerged from the purchasing context.

To facilitate reflection on prior encounters with advertising disclosures, a sample advertisement containing typical disclaimer and qualifier elements was occasionally presented during the interview. The material was used as a visual elicitation tool intended to support participants in recalling and describing their experiences with similar advertising messages. Consistent with phenomenological principles, the visual prompt was used only to facilitate recall of prior advertising encounters, not to evaluate reactions to a specific advertisement. Participants were not asked to assess or judge the shown material although remained open and took note of similar spontaneous responses. The prompt served as a memory cue to help them articulate their ordinary experiences with advertising disclaimers as they encountered them in everyday contexts.

The aim of the interview process was therefore to understand how the purchasing encounter is experienced by consumers, rather than to assess or test their knowledge of advertising disclosures.

Data Analysis

Data analysis followed the procedures of descriptive phenomenology as developed by Giorgi (2009), which are specifically designed for research grounded in the Husserlian tradition. In practice, the researcher assumed the phenomenological attitude throughout analysis by deliberately setting aside professional assumptions about how disclaimers "should" function in advertising. For example, when a participant stated that they did not read the fine print on vitamin packaging, the researcher resisted the impulse to interpret this as a regulatory failure and instead attended to what this non-reading revealed about the structure of the participant's purchasing experience.

Giorgi's Method in Detail

The analytical procedures employed in this study follow Giorgi's (2009) descriptive phenomenological method, which involves five sequential steps. Giorgi (2012) provides a concise summary of the method's philosophical and procedural foundations, emphasizing that the researcher must first assume the phenomenological attitude—a mode of consciousness that brackets prior knowledge and attends to phenomena as they present themselves.

The first step requires the researcher to read each transcript in its entirety to gain a sense of the whole. This initial reading is not analytical; it is an act of receptive engagement with the participant's account. Giorgi, Giorgi, and Morley (2017) note that this step establishes the experiential context within which subsequent analysis will occur.

The second step involves the demarcation of meaning units—segments of the transcript where a shift in experiential meaning is observed. These meaning units are

not thematic codes in the conventional qualitative sense; they are segments identified through the phenomenological attitude, marking transitions in how the participant experiences the phenomenon under investigation.

The third step, phenomenological reduction, requires the researcher to examine each meaning unit for its essential qualities while suspending causal, evaluative, or theoretical assumptions. This is where the discipline of bracketing is most rigorously applied. The researcher must resist the impulse to explain why a participant experienced something and instead attend to what the experience was and how it presented itself in consciousness.

The fourth step involves the transformation of meaning units into descriptive statements that express the essential psychological or experiential content of each unit. Beck (2021) notes that this transformation preserves the language and texture of the participant's account while rendering its experiential content in a form suitable for cross-case synthesis.

The fifth and final step synthesizes the transformed meaning units into a general structure of the phenomenon. This structure represents the essential features of the experience as it was lived across participants—not an interpretation of what the experience means, but a description of what it is.

Trustworthiness and Rigor

Methodological rigor were maintained through reflexivity, thick description, and the use of audit trails throughout the analytical process. Credibility is supported by close adherence to participants' language and by the consistent application of phenomenological reduction. Reflexive memos served as an additional mechanism

for trustworthiness, providing a documented record of the researcher's positionality and its potential influence on the analysis.

Ethical Considerations

All participants were informed of the purpose of the research, its voluntary nature, and the measures in place to protect their confidentiality. Written or oral consent were obtained prior to participation, and participants were assured of their right to withdraw at any point without consequence. Pseudonyms were used in all reporting, and all data were securely stored in accordance with the university's research ethics guidelines.

Chapter IV

RESULTS AND DISCUSSION

Introduction

This chapter presents the findings of the study based on the lived experiences of nineteen Filipino consumers who were interviewed immediately after purchasing over-the-counter vitamins in a drugstore in Metro Manila. The data were gathered through short, informal, post-purchase interviews designed to capture the phenomenon within its natural context. All interviews were conducted in Filipino, with responses transcribed verbatim and translated where necessary. Pseudonyms are used throughout this chapter to protect respondents' identities.

The analysis followed Giorgi's (2009) descriptive phenomenological method. Each interview transcript was first read in its entirety to gain a sense of the whole. Horizontalization was then applied: every statement was treated as potentially significant for understanding the essential structure of the experience (Moustakas, 1994). Only after this initial leveling were overlapping or redundant meaning units set aside, and the remaining invariant constituents clustered into thematic groupings. Meaning units were identified within each transcript, marking shifts in experiential content related to vitamin purchasing, advertising encounters, and the interpretation of qualifiers and disclaimers. These meaning units were subjected to phenomenological reduction, through which the researcher examined the descriptions for their essential qualities while setting aside causal or evaluative assumptions. The meaning units were subsequently

transformed into descriptive statements and synthesized into meaning clusters that revealed the essential structures of the phenomenon across participants.

The chapter is organized as follows: it begins with a profile of the participants, followed by the presentation of four emergent themes and their constituent meaning clusters. Each theme is illustrated with representative quotations from participants' accounts and analyzed in relation to the research objectives. A cross-theme analysis, demographic patterns analysis, and composite textural-structural description follow, culminating in a summary of findings organized by research question.

The interviews followed the descriptive interview guide developed for this study, allowing participants to narrate their purchasing experiences, advertising encounters, and meaning-making processes in their own words and at their own pace. Data saturation was observed as recurring patterns in participants' descriptions became apparent by the fourteenth interview, with the remaining interviews confirming and enriching the established themes without introducing substantially new experiential structures.

Profile of the Participants

Table 1 presents the demographic profile of the nineteen respondents who took part in the study. Respondents ranged in age from 20 to 85 years old, represented a variety of occupational backgrounds, and purchased a diverse range of OTC vitamin products. The diversity of the sample ensured that the findings reflect a broad spectrum of lived experiences within the phenomenon under investigation.

Table 1. Demographic Profile of Respondents

Code	Pseudonym	Sex	Age	Occupation	Vitamin Purchased	Primary Information Source
P1	Elaine	Female	Not stated	Self-employed	Stresstabs	TV advertisements
P2	Cristine	Female	54	Housewife	Ascorbic Acid, Zinc	Radio commercials
P3	Vivian	Female	Not stated	Employed	Centrum Silver	Doctor, family referral, posters
P4	Beverly	Female	Not stated	Not stated	Sangobion, Neurobion	Doctor prescription, Mets
P5	Nicole	Female	20	Student	Berocca	Doctor, peer feedback, Tiktok
P6	Joelito	Male	65	Retired	Enervon, Revicon	TV advertisements
P7	Cristina	Female	46	Office worker	Enervon	Doctor, Tiktok

P8	Filipinas	Female	85	Retired	Ultima, Afegon, Fennal	Doctor, personal research, Tiktok
P9	Emily	Female	50	Self-employed	Vitamin C, E, Fish Oil	Doctor, friends, posters
P10	Cora	Female	27	Unemployed	B-Complex	Doctor prescription, posters
P11	Bayani	Male	77	Retired	Multiplex	Word-of-mouth, Tiktok
P12	Angel	Female	29	Physician	ImmunPro, Enervon	Professional knowledge, TV
P13	Nathaniel	Male	65	Retired	Multivitamins (Unilab)	Doctor, Meta, TV
P14	Mhel	Female	48	Government employee	B-Complex, Calcium	Doctor, TikTok

P15	Carmicita	Female	55	Store owner	RiteMed Ascorbic Acid	Doctor prescription, TV
P16	Ashley	Female	66	Pharmacist	B-Complex (B-Nerve), C,ImmunPro	Professional knowledge, TV
P17	Jean	Female	64	Government employee	Enervon, Centrum, ImmunPro	Doctor, TV commercials
P18	Judith	Female	49	Retired OFW	ImmunPro, Pharex, Stresstabs, Enervon	Social media, doctor

Note. Pseudonyms are used in place of respondents' real names. Ages listed as "Not stated" indicate that the respondent did not disclose their age during the interview. Some participants chose not to disclose their exact age. As the study focused primarily on the lived experiences of consumers encountering advertising disclaimers rather than demographic comparisons, this omission did not affect the analysis of experiential themes.

As shown in Table 1, respondents included students, retirees, healthcare professionals, government employees, homemakers, a store owner, a pharmacist, and a retired overseas Filipino worker (OFW). The vitamin products purchased ranged from common multivitamins (Enervon, Centrum Silver,

Multiplex) to specific supplements (Ascorbic Acid, B-Complex, Fish Oil, Sangobion, Neurobion). Information sources were varied, with doctor prescriptions, television advertisements, social media, radio, word-of-mouth, and professional knowledge all represented. This diversity of profiles is significant in that it reveals the breadth of the phenomenon: the purchase of OTC vitamins is not limited to a particular demographic segment but is a widespread practice cutting across age, occupation, and socioeconomic positioning.

Presentation of Themes

The findings are organized around four themes that emerged inductively from the data. To demonstrate how these themes emerged, Table 3a presents a representative verbatim statement from each of the nineteen participants alongside the meaning unit derived from that statement and the theme it contributed to. This analytic progression from participant narrative to initial coding to emergent theme follows Giorgi's (2009) descriptive phenomenological method: no theme was named before the data were analyzed. Following Table 3a, each theme is presented in full of supporting participant quotations, meaning cluster analysis, and discussion.

Table 2 provides a summary overview of all four themes with corresponding research objectives and representative meaning clusters.

Table 2. Summary of Emergent Themes, Research Objectives, and Meaning Clusters

Emergent Theme	Meaning Clusters	Representative Pattern
Theme 1: The Routinized Lifeworld of Vitamin Consumption	Habitual purchasing; family-oriented care; medical authority; embodied need	Vitamins experienced as automatic, relational acts embedded in routines of care and bodily maintenance
Theme 2: Peripheral Perception of Advertising Qualifiers	Invisibility of fine print; prompted recognition only; qualifier as background element; material inaccessibility	Disclaimers described as present in advertising but absent from conscious purchasing experience
Theme 3: Experiential Constructions of	Bodily trust; social credibility; managed skepticism;	Trust grounded in embodied experience and social

Trust, Transparency, and Sincerity	transparency as felt relevance	relationships rather than in textual disclosure
Theme 4: Between Compliance and Comprehension — The Ethical Gap	Disclaimer as ritual; partial understanding; felt information gap; regulatory vs. communicative transparency	Formal presence of disclaimers experienced alongside their experiential absence from decision-making

Note. Themes emerged inductively from the data through Giorgi's (2009) descriptive phenomenological method. No conceptual framework was applied a priori.

Table 3. Analytic Progression: From Participant Statements to Meaning Units to Emergent Themes

Participant Statement (Verbatim Excerpt)	**Meaning Unit / Initial Code**	**Emergent Theme**
P1 — Elaine: "Hindi ko naman siya mababasa. Hindi ko naman siya binabasa."	Packaging text excluded from purposive attention during purchase; non-reading as default, not deliberate avoidance.	Theme 1: The Routinized Lifeworld of Vitamin Consumption

P2 — Cristine: “Kasi po, Vitamin C is important. May dalawa akong anak…That’s what I give them.”	Vitamin purchased as communal health resource for family; purchase driven by relational obligation, not advertising encounter.	Theme 1: The Routinized Lifeworld of Vitamin Consumption
P3 — Vivian: “Yung doktor ang nag-reseta nito. Actually, noon wala pang Facebook.”	Doctor’s prescription as the settled and primary authority; advertising content rendered secondary or irrelevant	Theme 1: The Routinized Lifeworld of Vitamin Consumption
P6 — Joelito: “Pag iinom ako, medyo nakapagpaganda yung ano ko… maya-maya, antok ka na. Matutulog ka ng mga	Trust in vitamin grounded in felt bodily effects — improved energy and sleep; purchase as habitual bodily maintenance	Theme 1: The Routinized Lifeworld of Vitamin Consumption
aga.”		
P8 — Filipinas (85 yrs): “Since time immemorial, maski nung baby pa ako, talagang binavitamin ako ng nanay ko.”	Lifetime continuity of vitamin use across generations; practice inseparable from familial caregiving and bodily identity	Theme 1: The Routinized Lifeworld of Vitamin Consumption

P4 — Beverly: “Reseta ng doktor. Wala. Ayan pa rin. Ayan lang din ang tinitake ko na gamot.”	Purchase decision settled through medical authority alone; advertising qualifiers absent from the experience of choosing	Theme 2: Peripheral Perception of Advertising Qualifiers
P7 — Cristina (46 yrs): “Hindi ko nakita sa label. Kadalasan hindi ko tinitingnan yung technical na parte. Kadalasan yung expiry lang.”	Selective engagement with packaging; only expiry date sought; qualifier and regulatory text outside the perceptual field	Theme 2: Peripheral Perception of Advertising Qualifiers
P9 — Emily (50 yrs): “Sinasabi lang saan kasi sa sobrang liit ng text hindi ko mabasa… Sabi ko, anak, ano ba?”	Disclaimer physically inaccessible due to font size; participant required assistance to read it — material barrier to engagement	Theme 2: Peripheral Perception of Advertising Qualifiers
P11 — Bayani (77 yrs): “No. I’m not familiar. Basta po anong sinabi lang sa akin sa school.”	Complete unfamiliarity with “with proper diet and exercise” qualifier; purchasing guided entirely by prior social instruction	Theme 2: Peripheral Perception of Advertising Qualifiers

P13 — Nathaniel (65 yrs): “Meron lang. Pero hindi mo pinapansin.”	Disclaimer acknowledged as present in advertising environment but experienced as not warranting attention	Theme 2: Peripheral Perception of Advertising Qualifiers
P15 — Carmicita (store owner): “Hindi. Pagkakaroon ba ng nakapanood ko sa TV, gano’n. Yung kung anong gamot na yun.”	Advertising encounter limited to product identification; qualifying or regulatory text did not register in conscious experience	Theme 2: Peripheral Perception of Advertising Qualifiers
P5 — Nicole (20 yrs): “May good feedback naman po lalo sa friends. And may mga, I sure recommend it.”	Trust constructed through social network feedback and peer recommendation; credibility grounded in relational, not textual, evidence	Theme 3: Experiential Constructions of Trust, Transparency, and Sincerity
P10 — Cora (27 yrs): “Simulang pinagtake po ako ng vitamins na po yun, hindi na ako hinika.”	Trust established through tangible bodily change — reduction of asthma episodes; felt transformation as primary evidence of product efficacy	Theme 3: Experiential Constructions of Trust, Transparency, and Sincerity

P12 — Angel (29 yrs, physician): “Parang, kasi sa medical perspective, parang false siya. Kasi 100% immunity…misinformation siya if ever.”	Professional knowledge reveals internal contradiction between advertising claim and qualifier; disclaimer experienced as insufficient to counterbalance misleading primary message	Theme 3: Experiential Constructions of Trust, Transparency, and Sincerity
P14 — Mhel (48 yrs): “Tinatry ko siya. Pag sinasabing okay naman, parang nagiging kalma… nagkakaroon ka ng tiwala.”	Trust emerging through trial and felt bodily reassurance (“kalma”); affective, embodied process rather than information-based evaluation	Theme 3: Experiential Constructions of Trust, Transparency, and Sincerity
P16 — Ashley (pharmacist): “Nakalagay din yung disclaimer na with proper diet. Kahit na 100% nagbibigay immunity… meron pa din na nasa baba na ganon.”	Professional background enables recognition and valuation of disclaimer; gap between professional and lay consumer perception of identical advertising material	Theme 3: Experiential Constructions of Trust, Transparency, and Sincerity
P18 — Judith (49 yrs):	Affordability as lived	Theme 3: Experiential

“Siyempre, alam nyo naman sa hirap ng buhay. Siyempre, kung ano lang yung kaya.”	constraint shaping purchase decision; economic reality of household budget more determinative than advertising content or qualifiers	Constructions of Trust, Transparency, and Sincerity
P17 — Jean (64 yrs): “Parang wala lang pag wala ito. Basta may 100% immunity tapos nakalagay vitamin C and zinc. So okay lang kung wala.”	Disclaimer’s presence or absence described as inconsequential; primary advertising claim perceived as sufficient without qualifying text	Theme 4: Between Compliance and Comprehension — The Ethical Gap

Statements are presented in the original Filipino with analysis provided in English. Meaning units were identified through phenomenological reduction following Giorgi (2009). Themes in the right column were derived inductively from the clustering of transformed meaning units across all participants’ transcripts; no theme was defined prior to analysis.

Table 3a above demonstrates how each of the four themes emerged from participant data. Each row represents the analytic movement from a participant’s verbatim account to the meaning unit distilled from that account to the theme which that meaning unit helped constitute. Following this table, each theme is presented in full of supporting quotations and discussion.

Theme 1: The Routinized Lifeworld of Vitamin Consumption

The first theme describes the experiential context within which Filipino consumers purchase OTC vitamins. To most participants, buying vitamin supplements was not just something they look forward to as a discrete, purposeful health decision, but a habit built into their daily routines and social commitments, into culturally derived concepts for their own self-care.

Meaning Cluster 1.1: Vitamins as Routine and Embodied Habit

The majority of respondents described vitamin purchasing to be automatic rather than deliberative. Respondents said purchasing vitamins was part of habitual patterns that had formed over years or decades — often based on childhood practices or long-standing advice from their physician. Buying was not often preceded by comparison or evaluation of product claims.

> *"Pagod na pagod na ako mula umaga. Pagod na ako. Lagi na lang mahirap pumasok sa umaga."*
>
> — Cristina, 46 years old

Cristina described purchasing Enervon as a continuation of a practice that began in her youth. Her account revealed that the decision to buy was not re-evaluated each time; rather, it had become an automatic extension of her sense of bodily need. She described having used the vitamin since high school, through decades of evolving formulations, noting: "Habang tumatagal, siyempre eventually, habang tumatagal nag- upgrade sila. Sanay na talaga ako." The vitamin was experienced as inseparable from her daily capacity to function.

“Since time immemorial, maski nung baby pa ako, talagang binamin- vitamin ako ng nanay ko kasi ayaw niyang masakitin.”

— Filipinas, 85 years old

For Filipinas, the eldest respondent at 85 years old, the practice of taking vitamins was experienced as having been present throughout her entire life—from her mother’s early caregiving through marriage, childbearing, and aging. The purchase of vitamins was inseparable from a lifetime of bodily maintenance and familial responsibility. Her account traced a continuous line from childhood nurturance to her present-day routine of taking multiple prescribed supplements: Ultima, Afegon, and Fennal.

Angel, a 29-year-old physician, described her own vitamin use as a response to the demands of a medical career:

“Kasi medyo unhealthy yung lifestyle kapag doctor ka. Wala kang time kumain tamang oras. So, additional lang siya.”

— Angel, 29 years old, physician

Angel’s account described the vitamin as a supplement to an irregular lifestyle rather than a deliberated health choice. Her professional medical knowledge did not lead her to evaluate advertising claims more carefully; instead, she described choosing any available multivitamin brand without particular selectivity: “Basta yung multivitamins lang kasi okay naman. Kahit anong brand.” This pattern appeared across respondents regardless of educational attainment.

Jean, a 64-year-old government employee, described a similar pattern of routine purchasing driven by a combination of TV advertising and doctor

prescription: *“Nakikita ko sa mga commercial. Tapos sinasabi ko sa doktor, nire-resetahan nyo po ako. From A to Z daw.”*

— Jean, 64 years old

Jean’s account revealed that advertising served as an initial prompt, but the purchase was legitimized and sustained through the doctor’s authority. She described taking Enervon and Centrum as routine acts that required no re-evaluation: the product’s value was already established and did not need to be reconsidered at each purchase.

Meaning Cluster 1.2: Family-Oriented Care and Relational Motivation

Respondents frequently described their vitamin purchases as motivated not only by personal health concerns but by a sense of responsibility toward family members. The purchase of vitamins carried an affective dimension: it was experienced as an expression of care, duty, and the desire to remain capable of fulfilling household roles.

“Pag ang mother nagkasakit, patay na. Walang magwawalis. Walang magluluto. Wala lahat. As in, wala.”

— Filipinas, 85 years old

Filipinas experienced vitamins as essential to her capacity to sustain her role within the household. The purchase was not framed in terms of personal health optimization but as a means of ensuring that she could continue to care for her family. She articulated a direct link between her body’s strength and the functioning of her entire household, describing how her bones, joints, and mental acuity were all domains that required maintenance through vitamins.

Cristine, a 54-year-old respondent, similarly described purchasing Vitamin C and Zinc not only for herself but for her children and grandchildren. She experienced the vitamin as a communal resource—something she shared with family members as part of an everyday practice of collective health maintenance:

> *"Kasi po, Vitamin C is important. May dalawa akong anak. Now, meron na akong wife at family. They're still young. That's what I give them. Vitamin C."*
>
> — Cristine, 54 years old

> *"Kasi po sakitin po. Ang bilis ko po mahawa, kaya kailangan ko po talaga ng vitamins."*
>
> — Cora, 27 years old

Cora's account described her vulnerability to illness as the primary motivation for purchasing vitamins, a practice closely tied to a doctor's recommendation. She detailed how her frequent asthma episodes drove the need for daily supplementation. For her, the vitamin was experienced as a source of resistance—a means of strengthening the body against the constant presence of illness in her everyday environment.

Judith, a 49-year-old retired OFW, described the economic dimension of vitamin purchasing as a relational consideration:

> *"Kasi actually, siyempre, alam nyo naman sa hirap ng buhay. Siyempre, kung ano lang yung kaya."*
>
> — Judith, 49 years old

Judith's account introduced affordability as a lived dimension of the vitamin purchasing experience, revealing that her choice of products was shaped not solely by health concerns but by the economic constraints of her household. She

described switching from ImmunPro to more affordable alternatives and mixing multiple brands depending on availability and budget.

Meaning Cluster 1.3: The Role of Medical Authority in Shaping Purchase Experience

A recurring pattern across respondents was the central role of physicians in shaping the initial vitamin choice. Of the nineteen respondents, fourteen described their vitamin use as originating from a doctor's prescription or recommendation, which then became routinized over time. This reliance on medical authority functioned as a primary source of trust, often rendering advertising and packaging information secondary in the purchase experience.

> *"Yung doktor ang nag-reseta nito. Actually, noon wala pang Facebook. Kaya yung doktor ang nag-reseta."*
>
> — Vivian, on Centrum Silver

> *"Reseta ng doktor. Wala. Ayan pa rin. Ayan lang din ang tinitake ko na gamot. Nung nagkasakit ako nun, ayan yung reseta ng doktor sa akin."*
>
> — Beverly, on Sangobion and Neurobion

In these accounts, the doctor's recommendation was experienced as a settled matter—a form of trust that did not require ongoing verification through advertising claims or packaging information. The respondent's relationship with the product was mediated primarily through the authority of the prescribing physician, not through the communicative content of the advertisement.

For other respondents, the recommendation came not from a physician but from social networks—friends, family members, or coworkers who shared their own experiences with a product.

> *“Recommendation ng friends na tinitake din nila especially sa age bracket namin. So, because we have the same symptoms of menopausal stage na kami.”*
>
> — Emily, 50 years old *“May good feedback naman po lalo sa friends. And may mga, I sure recommend it.”*
>
> — Nicole, 20 years old, on Berocca

Mhel, a 48-year-old government employee, described a combination of doctor prescription and information gathered from TikTok as shaping her vitamin choices, though the doctor’s advice remained the primary determinant:

> *“Napanood ko sa TikTok yun. Pag 40 ka na, kung ano yung mga vitamins na kailangan ng katawan. Isa yun, B-complex. Isa, Calcium. Vitamin D.”*
>
> — Mhel, 48 years old

Ashley, a pharmacist, described her vitamin choice as informed by professional knowledge rather than by advertising:

> *“Talagang alam ko lang since nagtitinda ako ng mga gamot. Aware lang ako na ayun siya. Sa pangaraw-araw ko na lang din siya na lalaman.”*
>
> — Ashley, pharmacist

Taken together, these descriptions reveal a lifeworld in which vitamin consumption is experienced as habitual, relational, and grounded in trusted interpersonal authority. The purchase takes place within a natural attitude in which the product's value is already established before the consumer encounters any advertising material. This finding is significant because it establishes the experiential ground upon which qualifiers and disclaimers are subsequently encountered—a ground characterized by routine, trust, and minimal deliberative engagement with textual information.

Theme 2: Peripheral Perception of Advertising Qualifiers

The second theme describes how advertising qualifiers and disclaimers are encountered by respondents within the flow of their purchasing experience.

Meaning Cluster 2.1: The Invisibility of Disclaimer Text

Across respondents, a striking pattern emerged: disclaimers and qualifiers were either not noticed at all, or noticed only after being prompted by the interviewer. When asked whether they had observed any text or message aside from the product name on packaging or in advertisements, the majority of respondents responded that they had not. This was not described as a deliberate avoidance but as a natural consequence of how the purchasing experience unfolded.

“Hindi ko nakita sa label. Kadalasan hindi ko tinitingnan yung technical na parte. Kadalasan yung expiry lang ang tinitingnan ko.”

— Cristina, 46 years old

Cristina’s account revealed that her engagement with the product’s textual environment was selective and purpose-driven. She described looking only for expiration dates—a practical concern—while the regulatory and qualifying texts surrounding the product remained outside her perceptual field.

“Wala, hindi ako tumitingin sa mga gano’n. Mga indication. Basta may sometimes, pagka bumili ako ng gamot, tinitingnan ko lang kung anong bisa ako o paano dapat inumin.”

— Bayani, 77 years old

Bayani described a similar pattern: his engagement with the packaging was limited to information he experienced as directly relevant to consumption—how to take the product—while other textual elements, including disclaimers, remained peripheral.

Elaine, the first respondent interviewed, also described bypassing the textual content of packaging entirely:

“So, hindi ko naman siya mababasa. Hindi ko naman siya binabasa.”

— Elaine, on packaging text.

Nathaniel, a 65-year-old retiree, articulated the pattern explicitly:

“Meron lang. Pero hindi mo pinapansin.”

— Nathaniel, 65 years old

Nathaniel’s response captured a quality of experience shared by many respondents: the disclaimer was recognized as something that existed in the

advertising environment, but it was not experienced as something that warranted attention. Its presence was acknowledged without being meaningfully engaged.

Carmicita, a store owner, offered a similar response when asked about disclaimers on vitamin packaging:

> *"Hindi. Pagkakaroon ba ng nakapanood ko sa TV, gano'n. Yung kung anong gamot na yun."*
>
> — Carmicita, store owner

Carmicita's account confirmed the pattern: her engagement with vitamin advertising was limited to identifying the product itself; while qualifying or disclaimer text did not register in her conscious experience.

Meaning Cluster 2.2: Encountering Qualifiers Only When Prompted

When the interviewer introduced the phrase "with proper diet and exercise" or "No Approved Therapeutic Claims," respondents demonstrated a range of responses—from recognition to unfamiliarity—that further illuminated the peripheral status of disclaimers in the purchasing experience.

> *"Sinasabi lang saan kasi sa sobrang liit ng text hindi ko mabasa. Pinapabasa ko siya. Sabi ko, anak, ano ba? BFAD approved ba? Or safe ba?"*
>
> — Emily, 50 years old

Emily's account introduced a material dimension to the peripherality of disclaimers: the text was described as too small to read. She experienced the disclaimer not as meaningful regulatory content but as an obstacle—something she needed her children to decipher for her. Her primary concern was whether

the product was safe, but the format in which safety-related information was presented rendered it inaccessible within her own perceptual capacity.

Bayani, when asked about the phrase “with proper diet and exercise,” responded with complete unfamiliarity:

“No. I’m not familiar. Basta po anong sinabi lang sa akin sa school. Mula pa ako ng bata.”

— Bayani, 77 years old

Elaine, when prompted about “No Approved Therapeutic Claims,” offered a reaction that revealed misunderstanding of the qualifier’s regulatory function: *“Siyempre, ayaw mo nang bilhin, di ba? Kasi pag nakita mong hindi approved, ayaw mo nang itry.”*

— Elaine, on encountering “No Approved Therapeutic Claims”

Elaine’s response demonstrated that even when a disclaimer was recognized, its meaning was not understood as intended by the regulatory framework. She experienced the phrase as a negative endorsement—a warning to avoid the product— rather than as a standard regulatory qualifier applied to all supplements in the product category. This misinterpretation reveals a significant gap between the regulatory intent of the disclaimer and its experiential meaning for consumers.

Jean, a 64-year-old government employee, recognized the phrase “with proper diet and exercise” when prompted but revealed that it had not previously been an object of her attention:

“With proper diet and exercise. Yes. May nakikita lang ako dun sa pang… Sa ano.”

— Jean, 64 years old

Jean's account suggested that the qualifier existed in the margins of her awareness—something she had seen but never actively engaged with. When asked its meaning, she interpreted it as general lifestyle advice rather than as a regulatory condition.

Meaning Cluster 2.3: The Qualifier as Background Element in the Advertising Gestalt

Several respondents who were shown an advertisement screenshot during the interview further illustrated the peripheral position of qualifiers within the visual hierarchy of advertising. When asked to describe what they noticed in the image, respondents consistently identified the brand name, the product imagery, the colors, and the celebrity or model first. The qualifier text—located at the bottom of the advertisement—was noticed last, if at all.

> *"Yung pangalan mismo... Kulay lang naman yung makikita mo."*
>
> — Nathaniel, 65 years old

> *"A text? Ay, hindi ko masyadong nabasa yung ilalim. Hindi siya readable. And it's important na lahat sana ng text is clear and readable sa nagbabasa."*
>
> — Emily, 50 years old

Emily's observation was notable in that she simultaneously identified the unreadability of the disclaimer and asserted its importance. She experienced a disjunction between what she felt should be communicated and what was actually accessible within the advertisement's design.

Angel, the physician respondent, offered a perspective that connected the medical and consumer viewpoints when examining the advertisement:

“Parang, kasi sa medical perspective, parang false siya. Kasi 100% immunity, yun lang yung need mo. So misinformation siya if ever.”

— Angel, 29 years old, physician

Angel experienced the juxtaposition of the “100% immunity” claim alongside the fine-print qualifier as internally contradictory. From her medical training, the claim felt misleading even with the disclaimer present, suggesting that the qualifier did not adequately counterbalance the primary persuasive message.

Mhel, despite being shown the advertisement directly, needed her reading glasses to engage with the fine print:

“Teka lang hindi ko mabasa. Yung iba. Kailangan ko ng sandata. Baka mali yung masabi ko.”

— Mhel, 48 years old, on reading the advertisement

Mhel’s account reinforced the material inaccessibility of disclaimers: the text was physically too small for her to read without corrective lenses. The disclaimer’s communicative function was undermined not by the consumer’s disinterest but by the advertisement’s design choices.

Ashley, as a pharmacist, offered a notably different perspective—one in which disclaimers were recognized and valued:

“Nakalagay din yung disclaimer na with proper diet. Kahit na 100% nagbibigay immunity siya, meron pa din na nasa baba na ganon.”

— Ashley, pharmacist

Ashley's professional background enabled her to identify and interpret the disclaimer in ways that non-professional respondents did not. Her account underscored the gap between professional and lay consumer perception of the same advertising material.

Across respondents, the pattern was consistent: disclaimers and qualifiers were experienced as occupying the periphery of advertising perception, rendered invisible by their size, placement, and timing. Respondents did not describe actively ignoring disclaimers; rather, they described purchasing experiences in which disclaimers simply did not enter the field of conscious attention. The qualifier existed within the advertisement, but it was not experienced as part of the communicative encounter.

Theme 3: Experiential Constructions of Trust, Transparency, and Sincerity

The third theme explores how respondents constructed their own meanings of trust, transparency, and ethical communication in relation to vitamin advertising qualifiers and disclaimers. Rather than relying on institutional definitions, respondents drew upon embodied experience, social relationships, and personal narrative to define what made a product trustworthy and what made advertising feel sincere.

Meaning Cluster 3.1: Trust Grounded in Bodily Experience

For respondents, trust in a vitamin product was most described as emerging from personal, felt experience with the product's effects on the body. The most frequently cited basis for trust was not advertising content, brand

reputation, or disclaimer information, but the respondent's own embodied encounter with the product over time.

"Effective naman siya kapag iniinom ko siya eh. Sa experience ko okay naman siya. Kaya nagtitiwala din naman ako."

— Beverly, on Sangobion

"Simulang pinagtake po ako ng vitamins na po yun, hindi na ako hinika. Ilang buwan na rin po."

— Cora, 27 years old

Cora described trusting the vitamin because of a specific, tangible change she experienced in her body: her asthma attacks had subsided since she began taking the supplement. Trust, in her account, was not an attitude formed through information processing but a felt sense that arose from a bodily transformation she could directly perceive.

"Tinatry ko siya. Pag sinasabing okay naman, parang nagiging kalma.

Nagkakaroon ka ng tiwala, trust doon sa product."

— Mhel, 48 years old

Mhel's description of trust followed a similar experiential logic: trust emerged through trial, through the experience of the product's effect, and through a gradual felt sense of reassurance. The word "kalma" (calm) suggested an affective quality to trust—not merely cognitive assent to a claim but a bodily experience of reassurance. She described how the disappearance of her shoulder and foot pain after taking B- complex and Calcium confirmed her trust in the product.

Joelito, a retired respondent, described trust in similar terms:

“Pag iinom ako, medyo nakapagpaganda yung ano ko. Napagod ako ng punto. Maya-maya, antok ka na. Matutulog ka ng mga aga.”

— Joelito, on why he trusts Enervon

For Joelito, the evidence of the vitamin’s value was felt in the body: improved energy, better sleep, and the ability to function through daily labor. Trust was not derived from any textual claim but from the daily rhythm of bodily experience.

Jean articulated the link between personal experience and belief in the product’s claims:

“Naniniwala ako kasi umiinom ako eh. Naniniwala akong totoo yun. Hindi, hindi ako iinom pagka hindi ako maniwala na totoo yun.”

— Jean, 64 years old

Jean’s account captured a circular but experientially coherent structure: she believed the claims because she took the product, and she took the product because she believed the claims. The act of consumption itself constituted a form of trust that advertising disclaimers could not meaningfully alter.

Judith’s account echoed this embodied understanding of trust:

“Siyempre, hindi mo naman mararamdaman kung hindi mo susubukan. Tamang check-up, tapos kung ano yung re-recommend yung doktor na vitamins. Yung importante rin yun.”

— Judith, 49 years old

Meaning Cluster 3.2: Social and Relational Sources of Credibility

Alongside bodily experience, respondents described trust as being constructed through social relationships—the recommendations of doctors, family members, friends, and community figures. These relational sources of credibility were experienced as more immediately persuasive than any textual or visual element of advertising.

> *"Maraming umiinom. Yung mga feedback. And yung mga, I sure recommend it."*
>
> — Nicole, 20 years old, on Berocca *"Well known. Widely used. If I know someone who's been using it and nakita ko yung effects sa kanya as a positive effect, then I would give my personal trust dun sa brand."*
>
> — Emily, 50 years old

Emily articulated a layered structure of trust: widespread use, personal acquaintance with a user, and observable positive effects. Each layer was grounded in her social world rather than in the informational content of advertisements.

> Jean described trust as rooted in the manufacturer's reputation: *"Depende yun sa manufacturer. Kung kilala yung manufacturer. Kagaya nung Unilab. Kilala dito sa atin. Quality yung products nila."*
>
> — Jean, 64 years old

Yet Jean also described how her sister, a nurse, encouraged her to choose generic alternatives, arguing that the therapeutic effect was equivalent. This tension between brand trust and practical affordability illustrated the complexity of trust formation in the lifeworld of Filipino consumers.

Filipinas, the eldest respondent, described trust as requiring independent verification regardless of advertising claims:

> *"Kailangan magse-search muna ako, maghanap ako ng paraan para ma-determine ko kung how useful is that. Hindi naman pwedeng sinabi na maganda yun, o na-display sa mga advertisement."*
>
> — Filipinas, 85 years old

Meaning Cluster 3.3: Skepticism Toward Advertising Claims

Respondents described a pervasive sense that advertising claims were not entirely sincere. This skepticism was not experienced as hostility toward brands but as a pragmatic awareness that advertising served commercial rather than informational purposes.

> *"I think, it's not entirely true. It's more of marketing. Of course, you have to sell the product, and some would use celebrities na sa totoo lang na hindi naman talaga yun ang iniinom niya."*
>
> — Emily, 50 years old

“Marami siguro. Siyempre, strategy yun di ba? Marketing strategy naman talaga.”

— Cristina, 46 years old *“50-50 yun. Lahat naman na nakasulat, hindi naman totoo. And then, pecha lang totoo, saka yung number.”*

— Joelito, on the truthfulness of advertisements

Joelito’s account expressed a common experiential structure: advertising was experienced as a mix of truth and non-truth, where only certain concrete details were perceived as reliable.

Bayani expressed even stronger skepticism:

“Ikaw ba naman maniniwala sa sinasabi nila? Hindi ako believe diyan sa mga ganyan.”

— Bayani, 77 years old

Nathaniel, reflecting on the saturation of vitamin advertising, noted:

“Siyempre pagka sa commercial kasi masyadong saturated eh. At least makita ko, kalahati man lang, tumalab sa’yo eh.”

— Nathaniel, 65 years old

This finding is significant because it suggests that disclaimers operate within an experiential context where advertising is already perceived as strategically motivated—a context in which a regulatory qualifier may simply be assimilated into the broader perception of advertising as persuasion.

Meaning Cluster 3.4: Transparency as Felt Relevance, Not Textual Disclosure

When respondents articulated what they wished to see in advertising—information they felt was currently missing—their descriptions pointed toward a

conception of transparency grounded in relevance and accessibility rather than in the mere presence of regulatory text.

> *“Siguro yung talaga, aside doon sa ingredients. Hindi mo naman kailangan ipaliwanag isa-isa. Siguro yung kung para saan talaga siya. Kasi sa dami ng vitamins, hindi mo na alam kung ano yung target niya.”*
>
> — Cristina, 46 years old

> *“If it’s safe, kung walang side effects, kung ano yung component, may allergens ba, because I have allergies, so kailangan malaman ko yung component or ingredients.”*
>
> — Emily, 50 years old

> *“Siguro mas maganda if, QR na lang na puwede i-scan, nandun na lahat ng info needed.”*
>
> — Nicole, 20 years old

Nicole’s suggestion of a QR code pointed toward a desire for accessible, consolidated information—a single point of access where all relevant details could be found.

Ashley, as a pharmacist, offered a recommendation grounded in her professional understanding:

> *“Siguro yung kung papaano siya ititake kung ano yung parang siya ititake kung with food ba or ganyan kasi karamihan hindi aware na dapat kailangan pala may laman.”*
>
> — Ashley, pharmacist

Ashley’s response revealed a professional awareness that consumers lacked basic information about proper vitamin intake—information that existing

advertising disclaimers did not provide. Her account further widened the gap between regulatory disclosure and the information consumers actually needed.

> Nathaniel described wanting to know about price and proven effectiveness:
>
> *“Presyo talaga. Kung effective, bukod sa effective, yung price.*
>
> *Tsaka kung sino yung nag-endorse.”*
>
> — Nathaniel, 65 years old

Respondents’ descriptions collectively suggested that transparency was not experienced as present merely because a disclaimer existed; it was experienced as present when information felt relevant, accessible, and genuinely addressed to the consumer’s actual concerns.

Theme 4: Between Compliance and Comprehension — The Ethical Gap in Health Communication

The fourth theme synthesizes the preceding findings into a broader structural description of the gap between regulatory compliance and communicative comprehension as experienced by respondents. This theme draws together elements of the routinized lifeworld, peripheral perception, and experiential trust construction to describe the essential structure of the phenomenon.

Meaning Cluster 4.1: The Disclaimer as Regulatory Ritual

Respondents’ descriptions, taken as a whole, revealed a consistent experiential pattern: disclaimers functioned within the advertising environment as

elements that satisfied regulatory requirements without genuinely informing the consumer.

> *“Kailangan yun. Para mababasa ng tao. Pag uminom pala ako ng vitamin, kailangan parang hindi ako mag-exercise. Pero pag wala, hindi wala. Iinom pa lang.”*
>
> — Joelito, on disclaimers

Joelito’s description captured a fundamental tension in how disclaimers were experienced: he recognized the importance of the qualifier’s presence, yet also acknowledged that in his own practice, he simply took vitamins without attending to the conditions specified by the disclaimer. The qualifier was experienced as something that should be there for others but was not integrated into his own purchasing behavior.

> *“Parang humiihina siya. Baka bali-walain na tao. Inom lang ng inom.”*
>
> — Cora, on what would happen if the qualifier were removed

Cora described a scenario in which the absence of the disclaimer would weaken the product’s credibility, suggesting that the qualifier served a symbolic function—a marker of responsibility—even if its actual content was not deeply processed during the purchase.

Cristina offered a particularly vivid analogy:

> *“Pagka tinanggal mo siya, ang dating niyan—ito na ang pang-slowdown ng aging, gamitin mo ’to. Kung baga, kunwari binigyan ka ng tinapay. Tinapay ’yan, yun lang ang alam mo. Pero pagka sinabi mo yung tinapay—ah, pandesal yan. Kasi may specific siya.”*
>
> — Cristina, 46 years old

Cristina's bread analogy illuminated the qualifier's function: without the disclaimer, the product's claim would feel unspecified and therefore potentially misleading. The qualifier, in her account, added a layer of specificity that she experienced as important for contextualizing the claim—even though she acknowledged that she herself did not attend to it during her routine purchases.

Judith offered a perspective that further illustrated the disclaimer's symbolic function:

> *"Importante yun. Kasi nga, hindi naman porket may Stresstab, take ka nalang ng take. Siyempre sasamahan ng fruits, vegetable, proper diet, tapos exercise."*
>
> — Judith, 49 years old

Judith recognized the disclaimer as important in principle, yet her own purchasing practice was shaped by pragmatic factors—affordability, doctor's advice, and bodily response—rather than by the qualifier's content.

Jean, when asked about removing the qualifier from an advertisement, offered a reaction that revealed the disclaimer's ambiguous status:

> *"Parang wala lang pag wala ito. Basta may 100% immunity tapos nakalagay vitamin C and zinc. So okay lang kung wala."*
>
> — Jean, 64 years old

Jean's response starkly illustrated the experiential absence of the disclaimer: she described its removal as inconsequential, suggesting that the primary advertising claim (100% immunity) was sufficient on its own. This finding is particularly significant because it reveals that for some consumers, the qualifier's presence or absence makes no experiential difference—a finding that challenges the regulatory assumption that disclaimers moderate consumer perceptions.

Meaning Cluster 4.2: Understanding the Qualifier — Varied but Partial

When respondents did engage with the meaning of "with proper diet and exercise," their interpretations were varied but consistently partial. Most respondents understood the phrase as a general reminder about lifestyle rather than as a regulatory qualifier indicating that the product's advertised benefits were contingent upon accompanying behavioral changes.

"Maganda rin talaga yung may exercise. Kahit na mag-iinom ka ng gano'n ng mga vitamins, may exercise ka pa rin sa sarili mo."

— Beverly, on the meaning of the qualifier

"Disiplina sa katawan po. Para lumakas ang katawan mo."

— Cora, on the meaning of the qualifier

"Hindi siya perfect. Meron at merong kulang doon. Hindi nila masusuport sa katawan ng tao. Kailangan pa rin yung support ng tao sa gamot. Sa sarili."

— Mhel, 48 years old

Mhel's description suggested that she understood the qualifier as an admission of the product's limitations—that it could not do everything alone. This was closer to the regulatory intent but still fell short of the specific meaning that the qualifier was designed to convey: that the product's advertised benefits had not been approved as standalone therapeutic claims.

Jean interpreted the phrase as basic health advice:

"Sabayan mo ng yung saktong food. Huwag kang kain ng kain sa mga fast foods. Tapos exercise. Kailangan mo kumilos."

— Jean, 64 years old

The distinction between “this product’s benefits require diet and exercise” and “diet and exercise are generally good for you” was not clearly experienced by respondents. The qualifier, while understood in general terms, did not function as a meaningful constraint on the advertising claim it was attached to.

Meaning Cluster 4.3: The Felt Gap Between What Is Shown and What Is Needed

Across respondents, there was a consistent sense that current advertising practices did not provide the kind of information that would genuinely support their purchasing decisions.

> *“Kung para ba talaga siya sa akin. Kung effective ba siya sa pangangailangan ng katawan ko.”*
>
> — Beverly, on what she wants to know before buying
>
> *“If may mga studies na ginawa, kung ano yung talagang benefits niya.”*
>
> — Angel, 29 years old, physician *“Yung mga comments ng ano. Yung mga reviews. Doon ako laging nagbe-base.”*
>
> — Mhel, 48 years old

Mhel’s reliance on online reviews—rather than on the product’s own packaging or advertising—further illustrated the felt insufficiency of current advertising communication.

Filipinas described wanting information that helped her evaluate suitability rather than promotional content:

“Kailangan, pipiliin mo yung diet mo na more on good for your health. Kailangan talaga meron kang ano, hindi yung purkin nakikita mo sa cellphone.”

— Filipinas, 85 years old

The descriptions converge on a structural finding: the information that respondents experienced as meaningful and necessary for their purchasing decisions was not the same as the information that regulatory disclaimers were designed to convey.

Cross-Theme Analysis: The Structural Relationship Among Themes

While the four themes presented above are analytically distinct, they are experientially interrelated. The routinized lifeworld described in Theme 1 establishes the conditions under which the peripheral perception described in Theme 2 occurs. Because vitamin purchasing is experienced as habitual and trust-mediated, consumers approach the purchasing environment with a natural attitude in which regulatory text occupies no meaningful place. The experiential constructions of trust described in Theme 3 further reinforce this natural attitude: trust is built through embodied experience and social relationships, not through engagement with textual disclosures.

The ethical gap described in Theme 4 is therefore not an isolated regulatory failure but a structural consequence of the relationship among these experiential dimensions. The disclaimer fails not because it is poorly designed in isolation, but because it is inserted into an experiential context that is already organized around different priorities and different sources of authority. The

consumer's lifeworld, perceptual field, and trust structures collectively constitute a lived environment in which the disclaimer's communicative function is structurally undermined.

This structural analysis is consistent with the phenomenological commitment to understanding phenomena as wholes rather than as collections of discrete variables. The experience of purchasing OTC vitamins and encountering disclaimers is not a sequence of separate events—choosing a product, reading a label, processing a qualifier—but a unified experiential flow in which these elements are nested within a lifeworld that assigns them meaning and priority. The disclaimer's ineffectiveness is not a failure of one element but a property of the whole experiential structure.

Demographic Patterns Across Themes

While the phenomenological method employed in this study prioritizes the description of essential experiential structures over demographic analysis, certain patterns in how different respondent groups experienced the phenomenon are worth noting. Healthcare professionals—Angel (physician) and Ashley (pharmacist)— demonstrated markedly different perceptual engagements with disclaimers compared to non-professional respondents. Angel identified the "100% immunity" claim as misleading even with the disclaimer present, while Ashley recognized and valued the disclaimer from her professional vantage point. These accounts suggest that professional health knowledge serves as a mediating factor in how disclaimers are perceived—a factor that most consumers lack.

Older respondents, including Filipinas (85), Bayani (77), and Nathaniel (65), consistently described the most deeply routinized purchasing patterns and the least engagement with packaging text. Their accounts revealed purchasing practices that had been established over decades and were sustained through medical authority and bodily habit. For these respondents, the disclaimer existed in an experiential world that had been organized long before the current regulatory framework was established.

Younger respondents, including Nicole (20) and Cora (27), demonstrated somewhat greater awareness of information sources beyond traditional media—particularly peer feedback and pharmacy recommendations. Nicole's suggestion of QR codes as an alternative information delivery mechanism pointed toward a generational difference in expectations about how health information should be accessed. However, even among younger respondents, disclaimers remained peripheral to the purchasing experience, suggesting that the structural ineffectiveness of disclaimers transcends generational boundaries.

The economic dimension of purchasing, articulated most clearly by Judith (49, retired OFW), introduced a consideration largely absent from the regulatory framework's assumptions about consumer behavior. When affordability constrains purchasing decisions, the informational content of disclaimers becomes even less relevant—the consumer's primary concern is whether the product fits within the household budget, not whether its advertising claims are adequately qualified.

Composite Textural-Structural Description

Drawing together the four themes, the following composite textural-structural description captures the essential structure of the phenomenon as it was lived by respondents:

Filipino consumers experience the purchase of OTC vitamins as a routine practice embedded in the everyday rhythms of self-care, familial obligation, and bodily maintenance. The decision to purchase is rarely deliberative; it is shaped by long- standing habits, doctor's prescriptions, and the recommendations of trusted social figures. Within this routinized lifeworld, advertising qualifiers and disclaimers occupy a position of formal presence but experiential absence. They exist on the packaging and within advertisements, but they do not enter the field of conscious attention at the moment of purchasing. When respondents are specifically directed to notice them, their responses range from unfamiliarity to partial understanding to misinterpretation— suggesting that the communicative function of disclaimers is structurally undermined by their format, placement, and the experiential context in which they are encountered. Trust, for these consumers, is not constructed through engagement with regulatory text but through the felt effects of the product on the body, the authority of prescribing physicians, and the shared experiences of friends and family.

Transparency is experienced not as the presence of a disclaimer but as the provision of information that is genuinely relevant, accessible, and addressed to the consumer's actual concerns. The result is a fundamental gap between the regulatory framework's assumption that disclaimers promote informed choice and the lived reality in which disclaimers serve as ritualistic markers of compliance that do not meaningfully participate in the consumer's decision-making process.

This gap constitutes the essential structure of the phenomenon: a condition of regulatory transparency without communicative transparency, in which the ethical safeguard that disclaimers are meant to provide is rendered hollow by the very design and placement practices that deliver them.

The textural dimension of this experience—the “what” of the phenomenon as it appeared to consciousness—was characterized by a sensory and affective landscape in which vitamins were seen, touched, and selected within retail environments dominated by familiar brand imagery and colorful packaging. Advertisements were experienced as a stream of bright, emotionally resonant content featuring trusted celebrities. Within this perceptual field, disclaimers appeared as small, peripheral text—materially present but experientially invisible, occupying the margins of a visual environment organized around persuasion rather than information.

The structural dimension—the “how” of the experience—was constituted by the intersection of habituation, relational trust, and low-involvement processing. The routinized nature of vitamin purchasing created a natural attitude in which critical evaluation was experientially unnecessary. Trust, built through bodily experience, familial recommendation, and social credibility, provided an affective foundation that rendered textual disclosure redundant. The low-involvement purchasing conditions promoted peripheral-route processing, ensuring that regulatory text was structurally excluded from the consumer’s decision-making consciousness.

Summary of Findings

Table 4 presents a thematic matrix that maps each emergent theme to its key findings and the corresponding research question it addresses, providing a consolidated overview of the study's results.

Table 4. Thematic Matrix: Key Findings by Research Question

Theme	Research Question Addressed	Key Findings	Implication for Development Communication
1. Routinized Lifeworld	RQ1: What are the lived experiences of Filipino consumers when purchasing OTC vitamins?	Purchasing is habitual, family-driven, and mediated by medical authority; advertising plays a secondary role	The experiential ground for advertising encounters is already structured by trust and routine, limiting the communicative reach of disclaimers
2. Peripheral Perception	RQ2: How do consumers encounter, notice, and interpret	Disclaimers are invisible, unread, or misunderstood; noticed only when prompted; format and placement render them inaccessible	Regulatory compliance does not equate to communicative effectiveness; the medium undermines the message

3. Trust and Transparency	RQ3: How do lived experiences shape meanings of transparency, trust,	Trust is embodied and socially constructed; advertising viewed	Consumer definitions of transparency are grounded in lived experience, not
	and ethical communication?	with pragmatic skepticism; transparency means felt relevance	institutional categories
4. Ethical Gap	RQ1–3 synthesized	Disclaimers are formally present but experientially absent; structural gap between regulatory and communicative transparency	Procedural compliance without genuine understanding does not empower; SDG 12 requires communicative, not merely regulatory, transparency

Note. RQ = Research Question. SDG 12 = Sustainable Development Goal 12 (Responsible Consumption and Production).

The findings of this study reveal that the purchase of OTC vitamins in the Philippines is experienced as a routinized, relationally motivated, and trust-mediated practice within which advertising qualifiers and disclaimers occupy a peripheral position. Respondents described a lifeworld in which vitamin consumption was embedded in habits of care, familial responsibility, and reliance on medical or social authority. Within this experiential context, disclaimers were

encountered as background elements—noticed, if at all, only after the purchasing decision had already been settled.

Respondents constructed trust through embodied experience and social relationships rather than through engagement with regulatory text. Their understanding of qualifiers, when present, was partial and general, functioning as lifestyle reminders rather than meaningful constraints on product claims. The gap between what respondents experienced as useful information and what disclaimers communicated constituted the essential structure of the phenomenon: a condition in which regulatory transparency was formally present but experientially hollow.

These findings establish the foundation for the discussion in Chapter V, where the implications of this lived experience will be examined in relation to development communication theory, ethical health communication, and Sustainable Development
Goal 12.

Chapter V

SUMMARY, CONCLUSION, AND RECOMMENDATIONS

Summary

This study explored the lived experiences of Filipino consumers as they purchased over-the-counter vitamins and encountered advertising qualifiers and disclaimers. Employing a Husserlian descriptive phenomenological design and the analytical procedures outlined by Giorgi (2009), the research centered on how consumers experienced, perceived, and made meaning of the regulatory mechanisms intended to promote transparency in health-related advertising.

Data were gathered through short, informal, post-purchase interviews conducted at a drugstore in Metro Manila. A total of nineteen (19) interviews were conducted among adult Filipino consumers who had just purchased OTC vitamins for personal or household use. The analysis followed a rigorous phenomenological process involving repeated readings, identification of meaning units, phenomenological reduction, transformation into descriptive statements, and synthesis of essential structures. Throughout, the researcher practiced epoché and horizontalization, suspending prior professional assumptions about advertising and disclaimer effectiveness to remain faithful to respondents' own accounts.

Four themes emerged from the analysis. The first theme, The Routinized Lifeworld of Vitamin Consumption, described how vitamin purchasing was experienced as habitual, family-oriented, and mediated by trusted interpersonal authority rather than by advertising content. The second theme, Peripheral Perception of Advertising Qualifiers, revealed that disclaimers and qualifiers were consistently encountered as background elements—rendered invisible by their size, placement,

and peripheral position within the advertising gestalt. The third theme, Experiential Constructions of Trust, Transparency, and Sincerity, demonstrated that respondents grounded their trust in embodied experience and social relationships rather than in regulatory text, and that they experienced advertising with a pragmatic skepticism that assimilated disclaimers into the broader perception of advertising as commercially motivated. The fourth theme, Between Compliance and Comprehension, described the essential structure of the phenomenon as an ethical gap: a condition in which disclaimers were formally present but experientially absent, failing to function as meaningful communicative tools within the context of everyday purchasing.

Discussion

This chapter situates the phenomenological findings of the study within the broader scholarly discourse on advertising transparency, health communication, consumer behavior, and development communication. The four emergent themes—the routinized lifeworld of vitamin consumption, peripheral perception of advertising qualifiers, experiential constructions of trust, and the ethical gap between compliance and comprehension—are discussed in relation to existing theoretical frameworks and empirical evidence. The discussion proceeds from experiential description to theoretical integration, examining how the findings confirm, extend, or challenge prior research on disclaimer effectiveness, the Elaboration Likelihood Model, and the communicative dimensions of transparency in health advertising.

The findings of this study extend and deepen existing scholarship on consumer meaning-making and health communication by grounding these concerns in the lived experiences of Filipino consumers. This discussion examines the implications of the

findings in relation to the study's research objectives, the literature reviewed in Chapter II, and the development communication commitments that frame this research.

Health Communication Transparency as Lived Experience

The findings confirm and extend the distinction drawn by Holland et al. (2018) between strategic transparency and perceptual transparency. While regulatory frameworks ensure that qualifiers are strategically disclosed in advertisements, respondents' accounts revealed that perceptual transparency—the felt experience of being honestly and usefully informed—was largely absent. This finding aligns with Rawlins' (2008) argument that transparency demands more than disclosure; it requires that information be substantive, accessible, and genuinely useful to those who receive it.

What this study adds to the existing literature is an experiential account of how this gap is lived. Respondents did not describe disclaimers as failures of information processing in the sense posited by experimental studies; rather, they described purchasing environments in which the entire perceptual field was organized around elements other than regulatory text. The disclaimer was not ineffective because respondents could not read it or because they lacked motivation to engage with it in a narrow cognitive sense; it was ineffective because the lived structure of the purchasing experience—shaped by habit, trust, and relational authority—rendered the disclaimer irrelevant to the moment of decision-making.

This finding resonates with the Elaboration Likelihood Model (Petty & Cacioppo, 1986) but also extends it. The ELM suggests that disclaimers are processed peripherally when consumers lack motivation or ability to engage with them. The phenomenological data from this study suggest that the peripheral processing of

disclaimers is not merely a cognitive deficit but an experiential structure: the disclaimer occupies a position within the advertising encounter that is inherently peripheral, not because consumers are inattentive but because the purchasing experience itself is organized around different priorities—bodily sensation, relational trust, and habitual practice.

The findings also align with Mason, Scammon, and Fang's (2007) observation that government-mandated disclaimers did not significantly impact consumers' beliefs about the efficacy or safety of dietary supplements, and that product experience moderated disclaimer effects. In this study, respondents who had long histories of vitamin use described disclaimers as entirely irrelevant to their established relationship with the product, confirming Mason et al.'s finding within a naturalistic, phenomenological context.

The Cultural Situatedness of Disclaimer Experience

The findings further reveal that the experience of purchasing vitamins in the Philippines carries culturally distinct dimensions that shape how disclaimers are encountered and interpreted. Consistent with the observations of Hardon (1987) regarding family-oriented health practices, respondents described vitamin purchasing as an expression of care, duty, and maternal or familial responsibility. This cultural framing meant that the purchase was not experienced as a moment of individual consumer choice in the way that regulatory frameworks implicitly assume, but as a relational act embedded in a web of familial obligation and trust.

Similarly, the prominence of celebrity endorsement and brand familiarity in respondents' accounts aligns with Knoll and Matthes's (2017) findings on the role of emotional authority in Philippine health advertising. The affective weight carried by

these elements consistently overshadowed the informational weight of disclaimers. Within this cultural context, the qualifier—a small, text-based element positioned at the margin of a visually and emotionally charged advertisement—was experienced as fundamentally unequal to the communicative force of the persuasive content surrounding it.

Hardon's (1992) observation that Filipino audiences attend to the tone and perceived intent of messages rather than their literal content alone was further supported by the present findings. Respondents consistently described evaluating advertisements on the basis of whether they "felt" trustworthy—an affective, holistic judgment—rather than on the basis of specific textual claims or qualifiers.

Reimagining Trust and Transparency Through Lived Experience

One of the most significant findings of this study is the way respondents constructed trust. Rather than deriving trust from textual disclosures or brand claims, respondents described trust as an experiential phenomenon that emerged from three primary sources: the felt effects of the product on the body, the recommendations of trusted social figures, and the observation of the product's effects on others. This experiential construction of trust is consistent with the interpretive consumer research orientation articulated by Szmigin and Foxall (2000), which foregrounds the subjective meanings that consumers assign to their consumption experiences.

The implications of this finding for transparency are substantial. If trust is experientially constructed through embodied sensation and social relationship rather than through informational disclosure, then the regulatory assumption that disclaimers promote trust by providing corrective information is fundamentally misaligned with how trust actually operates in consumers' lifeworlds. Transparency, from the perspective

of these respondents, is not experienced as the presence of regulatory text but as the felt relevance and accessibility of information that speaks to their actual concerns.

This experiential account of trust and transparency offers a corrective to what Bivins (2017) identifies as ethical dissonance in advertising: the condition in which communication satisfies ethical principles on the surface while remaining manipulative in practice. Respondents' descriptions suggest that this dissonance is not merely a structural feature of advertising design but a lived condition—experienced by consumers as a mismatch between what they feel they need to know and what they are actually given.

The distinction between strategic transparency and perceptual transparency, as articulated by Holland, Krause, Provencher, and Seltzer (2018), provides a useful framework for interpreting these findings. Respondents' accounts consistently demonstrated that strategic transparency—the regulatory requirement that disclaimers be present—was formally satisfied in the advertisements they encountered. However, perceptual transparency—the consumer's felt experience of being honestly and usefully informed—was largely absent. Disclaimers were present in the advertising environment but absent from the experiential landscape of purchasing.

These findings also extend the work of Rozendaal, Lapierre, van Reijmersdal, and Buijzen (2011), who challenged the assumption that advertising literacy—the cognitive ability to recognize and evaluate advertising—automatically translates into effective self-defense against advertising effects. The present study's respondents demonstrated varying degrees of advertising literacy: several recognized that advertisements were persuasive in intent, and some expressed skepticism toward health claims. Yet this cognitive awareness did not translate into behavioral change at

the point of purchase.

Implications for Development Communication and Responsible Consumption

The findings carry direct and significant implications for development communication. At its core, development communication is concerned with whether communicative practices enable people to participate meaningfully in decisions that shape their quality of life (Servaes, 2008; Manyozo, 2022). The findings of this study suggest that current advertising disclaimer practices, as experienced by Filipino consumers, do not fulfill this developmental function.

Respondents' accounts revealed that disclaimers did not enhance their capacity for informed choice; instead, disclaimers were experienced as part of the regulatory background of advertising—a background that respondents navigated through habit and social trust rather than through engagement with textual information. This finding underscores Manyozo's (2022) argument that communication which fulfills procedural requirements without fostering genuine understanding does not empower—it renders empowerment rhetorical.

The concept of health literacy, as articulated by Nutbeam (2008), provides a useful interpretive lens. The respondents in this study engaged with disclaimers primarily at the level of functional health literacy—basic reading—or bypassed health literacy engagement entirely. The kind of critical health literacy that Nutbeam identifies as necessary for empowerment—the capacity to critically analyze health information and use it to exercise control over one's health decisions—was not supported by the way disclaimers were currently experienced.

In relation to Sustainable Development Goal 12 (Responsible Consumption and Production), the findings suggest that the current regulatory framework for health

communication transparency satisfies the form of responsible consumption without realizing its substance. Responsible consumption requires that consumers have meaningful access to information that enables them to make informed and ethical choices. The lived experience of respondents in this study reveals that this access is structurally constrained—not by the absence of disclaimers, but by the failure of disclaimers to function as genuinely communicative tools within the experiential world of the consumer.

The Essential Structure of the Phenomenon

By synthesizing across the four themes and the composite textural-structural description, the core structure of the phenomenon can be represented as the following: Filipino consumers experience the purchase of OTC vitamins as a routine, relationally embedded, and trust-mediated practice, positioning the qualifiers as formally present but experientially absent. Disclaimers are encountered — when they're encountered at all — as peripheral, inaccessible, and disconnected from the information that consumers need to make informed health decisions. Trust is constructed through bodily experience and social relationships, not textual disclosure. The result is a condition of regulatory transparency without communicative transparency—a gap that undermines the potential of advertising to serve as a tool for consumer empowerment and responsible consumption.

Toward Communicative Transparency: A Framework for Reform

Based on the findings and discussion presented above, this study proposes a conceptual distinction between regulatory transparency and communicative transparency that may serve as a framework for policy and practice reform. Regulatory

transparency refers to the condition in which legally mandated disclosures are present in advertising materials—the current state of affairs in Philippine OTC vitamin advertising. Communicative transparency, by contrast, refers to the condition in which disclosed information is experienced by consumers as relevant, accessible, and genuinely informative of their purchasing decisions.

The findings of this study demonstrate that regulatory transparency, while necessary, is insufficient for achieving the developmental goals of consumer empowerment and responsible consumption. The transition from regulatory to communicative transparency would require fundamental changes in how disclaimers are designed, positioned, and delivered. These changes must be informed not by assumptions about how consumers should process information but by empirical evidence of how consumers actually experience advertising in the course of everyday purchasing.

Mason and Scammon (2000) argued that the regulatory environment for health claims and disclaimers required expanded boundaries and new research approaches. The present study responds to that call by providing phenomenological evidence that the current disclaimer framework is not merely ineffective in experimental settings but experientially absent from the consumer's purchasing consciousness. This finding elevates the urgency of reform: the gap between regulatory intent and communicative reality is not a matter of optimizing message design but of reconceiving the communicative relationship between regulation and consumer experience.

Reflexive Considerations

As a researcher with professional experience in advertising and health communication, the process of conducting this study required sustained and

deliberate bracketing of professional assumptions. Throughout data collection and analysis, reflexive memos documented moments where the researcher's prior knowledge of advertising regulation threatened to shape attention to the data. For instance, when respondents described disclaimers as unimportant or invisible, the researcher's initial impulse was to interpret these responses through the lens of regulatory failure—a framing that presupposes the disclaimer's importance and treats the consumer's non- engagement as a deficit. The phenomenological attitude required setting this impulse aside and attending instead to the experiential structure of the respondent's account.

This reflexive practice was particularly important during the analysis of Theme 3 (Experiential Constructions of Trust, Transparency, and Sincerity), where respondents' constructions of trust diverged significantly from the institutional frameworks that the researcher's professional background would suggest. The finding that trust is grounded in embodied experience and social relationships rather than in textual disclosure emerged precisely because the researcher disciplined himself to listen to what respondents said about trust rather than to measure their responses against professional assumptions about what trust should entail.

Tufford and Newman (2012) recommend analytical memos, bracketing interviews, and reflexive journaling as practical methods for maintaining the phenomenological reduction throughout the research process. In this study, reflexive memos were recorded immediately after each interview and revisited during later stages of analysis, providing a documented record of the researcher's evolving relationship with the data and a mechanism for identifying and setting aside presuppositions that might otherwise have shaped the findings.

Butler (2016), in a study of Husserl's epoché and the reductions, emphasizes that Husserl's own descriptions of the phenomenological method evolved over time, and that contemporary researchers must exercise interpretive care in applying Husserlian concepts to empirical research. This observation is directly relevant to the present study, where the epoché was practiced not as a single methodological act but as an ongoing disciplinary commitment sustained throughout the research process. The researcher's professional background in advertising required particular vigilance in bracketing assumptions about how consumers "should" respond to advertising disclaimers—assumptions that, if left unexamined, could have fundamentally distorted the findings.

Giorgi (2021) provides the most authoritative argument for why the epoché and reduction are necessary in Husserlian phenomenological psychology, contending that without these methodological commitments, the researcher risks producing findings that reflect theoretical presuppositions rather than lived experience. The present study's findings—particularly the discovery that disclaimers are experientially absent from consumers' purchasing consciousness—could not have emerged without the disciplined practice of setting aside the researcher's prior assumption that disclaimers constitute meaningful communicative events.

Conclusion

Based on the results and the above studies, this research draws the following conclusions as follows:

First, the accounts of respondents in this Metro Manila study suggest that purchasing OTC vitamins was lived as a routine, relationally motivated practice grounded in interpersonal authority rather than advertising content. Within this experiential context, advertising qualifiers and disclaimers appeared to occupy a peripheral position in the consumer's purchasing experience.

Second, the data suggest that advertising disclaimers were consistently described as peripheral to the purchasing experience. Participants' accounts indicated that their format, size, and placement rendered them difficult to notice, and when noticed, the threshold at which qualifiers transitioned from background element to meaningful information was rarely described as having been crossed during routine purchasing.

Third, respondents' accounts suggest that trust and judgments of transparency were grounded primarily in embodied experience and social relationships rather than in engagement with regulatory text. The meanings these participants assigned to trust, credibility, and sincerity emerged from their lived narratives—a finding that points to possible tensions between current disclaimer practices and consumers' experiential criteria for trustworthy communication.

Fourth, the findings suggest that the current practice of including advertising qualifiers on OTC vitamin advertising may satisfy the procedural requirement of regulatory transparency without achieving communicative transparency as experienced by consumers. This gap—a condition in which regulatory requirements are formally met yet consumers remain experientially unengaged with qualifier

content—may be of relevance to development communication scholarship concerned with the distance between procedural compliance and genuine consumer understanding.

Fifth, respondents' descriptions illustrate that the peripheral position of disclaimers in their purchasing experience may reflect structural features of how advertising disclosures are currently designed and positioned, rather than simply a matter of consumer inattention. These findings point to possible directions for consideration by regulatory bodies, health communication practitioners, and development communication scholars in thinking about how disclaimer communication might be made more experientially accessible.

Recommendations

On the basis of the findings, discussion, and conclusions of this study, the following recommendations are offered. These recommendations are framed through the lens of development communication, prioritizing participatory, audience-centered, and community-driven approaches to health messaging rather than advertising-industry or regulatory-compliance perspectives.

For Health Communication Policy and Governance

The consistent experiential invisibility of disclaimers described by respondents suggests that current format requirements merit review—not merely in terms of procedural compliance, but in terms of communicative effectiveness. Consumer-oriented evaluation of health communication formats—such as participatory testing with actual purchasing populations, message pretesting in retail environments, and

iterative co-design with community representatives—could transform disclaimer communication from a regulatory ritual into meaningful health dialogue.

For Community-Based Health Communication

The finding that trust is constructed through interpersonal networks—doctors, family members, and peers—rather than through advertising text suggests that health information about vitamins, including the caveats that disclaimers are meant to convey, would be more effectively channeled through trusted community sources. Barangay health workers, who are already embedded in Filipino communities as credible health information conduits (Mallari et al., 2020; Dodd et al., 2021), could serve as interpersonal channels for communicating health product information in ways that align with the social and relational trust structures documented in this study. Community-based, peer-driven communication strategies—including testimonials, narrative-based health messaging, and community health advocate programs—should be prioritized over one-way regulatory text.

Health communication practitioners may find the study's findings useful in reflecting on how disclaimer communications are currently positioned within advertising messages. Approaches that might be worth exploring include plain language formulations, contextual placement that links qualifiers directly to the specific claims they qualify, and alternative formats such as QR codes linking to more detailed product information—an approach suggested by one participant in this study. The consistent pattern of disclaimers being described as irrelevant to participants' actual information needs may invite reflection on what constitutes genuinely transparent health advertising communication.

For Development Communication Scholars

Future research should continue exploring health communication transparency from the lived experience of consumers, utilizing phenomenological and other interpretive approaches in which meaning-making is prioritized over message processing. The finding that trust is experientially constructed through embodied sensation and social relationships, rather than through textual disclosure, opens a promising line of inquiry for development communication scholarship. Studies connecting these findings to Rogers's (2003) diffusion of innovations theory, the social marketing framework (Kotler & Zaltman, 1971; Andreasen, 1994), and Tufte's (2017) citizen-centered communication model would strengthen the theoretical foundation for participatory health messaging interventions.

For Consumer Education and Media Literacy

Health literacy initiatives should be designed as participatory efforts that draw on how consumers already know, the people they trust, and the experiential knowledge they use to evaluate health products. The concept of distributed health literacy (Edwards et al., 2015)—in which health literacy is shared across social networks rather than residing in individuals—offers a productive framework. Peer-to-peer education approaches anchored in community dialogue may be more effective than traditional top-down information dissemination. Applying the social marketing 4Ps: the Product should be reframed from "reading disclaimers" to "making informed health choices"; the Price (cognitive cost) must be reduced through plain language; the Place should diversify beyond advertising to interpersonal channels; and the Promotion should shift from regulatory text toward participatory, narrative-based approaches.

For Future Research

Future studies should extend this research to rural and provincial settings, to digital and social media health communication environments, and to other health product categories. Longitudinal approaches tracking how consumers' health communication experiences evolve over time would complement the snapshot provided by post-purchase interviews. Research employing co-design methodologies—in which consumers actively participate in developing health communication materials—would test the participatory approaches recommended here. further investigate the OTC vitamin buying experience in rural contexts, across different socioeconomic strata, or among subgroups including elderly and first-time buyers. Longitudinal phenomenological approaches that follow consumers over time, even through multiple shopping experiences, may increase understanding of how the experience of disclaimers develops over time. Furthermore, comparison studies of disclaimers lived experience across various product categories (food supplements, cosmetics, herbal products) and media platforms (television, social media, radio) would help to advance understanding of health communication transparency as a lived phenomenon through development communication.

Recommendations for Participatory Health Communication Design

Building on the conceptual distinction between health communication transparency and communicative transparency proposed in this study, several concrete recommendations for health communication reform emerge from the phenomenological data. First, the physical formatting of disclaimers requires fundamental reconsideration. The current practice of rendering disclaimer text in small

font at the margins of advertisements ensures its perceptual invisibility. Health communication bodies should establish minimum font size requirements for disclaimers that are proportional to the largest text in the advertisement, ensuring that qualifying information receives visual prominence comparable to the claims it qualifies.

Second, health communication evaluation should incorporate consumer testing as a standard component of disclaimer effectiveness assessment. Rather than assuming that the presence of a disclaimer satisfies health communication requirements, agencies should periodically evaluate whether consumers in the target market actually notice, read, understand, and act upon disclaimer information. The phenomenological approach employed in this study offers one methodology for such evaluation, but quantitative methods such as eye-tracking studies and comprehension testing could complement phenomenological findings with measurable data.

Third, as health advertising increasingly migrates to digital platforms, health communication frameworks must adapt to the communicative affordances and constraints of these new environments. Nicole's suggestion of QR codes linking to detailed product information represents one consumer-generated solution that merits health communication consideration. Digital platforms offer possibilities for interactive, layered, and personalized health information delivery that are simply unavailable in traditional print and broadcast advertising. Health communication frameworks that remain anchored in print- era disclaimer formats risk becoming increasingly irrelevant as consumer attention shifts to digital environments.

Limitations of the Study

The following limitations reflect the deliberate boundaries of this study—what it chose not to pursue. First, this study is not interested in measuring advertising

effectiveness or consumer recall of disclaimer content. It does not test whether disclaimers “work” in a persuasion or information-processing sense. Its concern is phenomenological: how consumers live through the experience of encountering health product advertising, not whether specific message elements achieve their intended regulatory or communicative outcomes.

Second, this study is not interested in evaluating the regulatory adequacy of existing disclaimer requirements or proposing specific policy reforms based on quantitative evidence. While the findings carry implications for how health communication might be redesigned, the study does not assess whether the Food and Drug Administration, the Ad Standards Council, or any other regulatory body is fulfilling its mandate effectively. Questions of regulatory performance and policy evaluation fall outside the phenomenological frame adopted here.

Third, this study is not interested in comparing consumer demographics, segmenting audiences, or correlating purchasing behavior with socioeconomic variables. Although the participant profile includes variation in age, occupation, and education, the analysis does not treat these as independent variables that explain differences in experience. The phenomenological aim is to uncover shared essential structures of the experience, not to map how the experience varies across population segments.

Fourth, this study is not interested in the production side of advertising—how disclaimers are designed, what creative or legal considerations shape their placement, or how advertisers and regulatory bodies negotiate disclaimer content. The study is exclusively concerned with the consumer’s experiential encounter with the finished advertisement, not with the institutional processes that produce it. Future research

from a production or institutional perspective would complement the consumer centered phenomenological account offered here.

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