



The effect of halal labels on Muslim consumer decisions in buying cough medicine

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ABSTRACT

Indonesia, a country with a predominantly Muslim population, mandates halal certification for all products that enter, distribute, and trade within its borders, including medicines with several critical halal points. This research focuses on understanding the characteristics of Muslim consumers in DKI Jakarta and analyzing the factors that influence their decisions to purchase cough medicine. A total of 100 respondents were surveyed in DKI Jakarta, and descriptive analysis and structural equation modeling partial least squares (SEM-PLS) were employed in the study. The results revealed that halal labels, personal factors, and product quality were significant factors influencing the purchasing decisions of DKI Jakarta Muslim consumers for cough medicine. However, social and psychological factors had little impact on their decisions.

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1. Introduction

Indonesia, with the largest Muslim population globally, has significant potential as a target for the halal pharmaceutical market. Based on (DinarStandard, 2022), in 2021, Indonesia was the world's fourth-largest Muslim consumer market in the pharmaceutical sector. In 2019, the Halal Product Assurance Organizing Body (BPJPH) required halal certification in Indonesia as a form of implementation of Law Number 33 of 2014 concerning Halal Product Assurance, which reads, "products that enter, circulate and trade in the territory of Indonesia must be halal certified" (Ministry of Religion, 2019). Mandatory halal certification was implemented in stages. The first phase was conducted in 2019 and targeted food and beverage products. The next stage will be carried out in 2021 with a target of products other than food and beverages, including pharmaceutical or medicinal products (Ministry of Religion, 2021).

Indonesia, with its tropical climate, is often subjected to extreme weather fluctuations during the transition period. These variations in temperature and air pressure can cause the body to adjust automatically, leading to a decrease in immunity and increased vulnerability to illnesses such as coughs (Health Office, 2022). One way to cure cough is to use cough medication. Two types of cough medicines are circulating in the Indonesian market: liquids and tablets. However, this type of liquid cough medicine is critical for halal status because it can contain alcohol or ethanol (LPPM MUI, 2020). Alcohol or ethanol is widely used to produce liquid medicines, usually used as a solvent and preservative in cough medicines (Suseno & Qomariyah, 2021).

The law on the use of alcohol or ethanol in drugs depends on their type. It is difficult to determine whether the alcohol/ ethanol used comes from the khamr industry. For alcohol/ ethanol derived from non-khamr industrial products, there are two laws, namely mubah (if it is not medically harmful) and haram (if it is medically harmful) (MUI, 2009). The use of alcohol is regulated by (BPOM, 2010) Number HK.03.1.23.06.10.5166. The regulation states that producers are required to include the percentage of alcohol content in their packaging so that it does not endanger the health of consumers. In 2018, Fatwa Commission scholars throughout Indonesia stipulated that it was obligatory to seek treatment using methods based on Islamic law and holy and halal medicines (MUI, 2018).

The halalness of a drug can be ensured through a trusted halal certification. However, pharmaceutical products in Indonesia are not halal-certified. As a nation with a predominantly Muslim populace, the progress towards the establishment of halal certifications for pharmaceutical goods in Indonesia has been modest. At present, only 4% of the total pharmaceutical products manufactured in Indonesia have been certified as halal (Pathoni, 2021). In medicine, alcohol is one of the critical components of halal. The law on the use of alcohol in drugs is based on the origin of alcohol. Alcohol that does not come from the khamr is permitted under several conditions: not endangering health, not being abused, being safe and according to the dosage, and not being consumed for drunkenness (MUI 2018). However, it was found that 9 out of 15 samples of liquid cough medicine contained alcohol with the largest concentration of 1.569%, which did not include the percentage of alcohol content on the packaging (Suseno & Qomariyah 2021).

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it was found that 9 out of 15 samples of liquid cough medicine contained alcohol with the largest concentration of 1.569%, which did not include the percentage of alcohol content on the packaging. It violates BPOM RI Regulation Number 03.1.23.06.10.5166 of 2010 regarding the inclusion of the percentage of alcohol content in the packaging that endangers the health of consumers. According to the BPS (2021) the monthly per capita medical expenditure in urban areas surpasses that of rural areas. DKI Jakarta is a large city in Indonesia, with the majority of the population embracing Islam, with a total Muslim population of 9,431,949, or around 83.84% (Ministry of Home Affairs, 2022) In addition, DKI Jakarta also occupies the first position in the average monthly expenditure per capita for medicine costs of IDR 7,561 in 2022 (BPS, 2022). According to Indonesian data (2023), among the big cities in Indonesia, DKI Jakarta has the second-largest consumption rate of cough medicine, with a total of 30.8%.

The objective of this study was to determine the characteristics of Muslim consumers and investigate the impact of halal labels on purchase decisions for cough medicine, considering the issues outlined previously. In this study, there were additional variables, namely religiosity and knowledge of halal products, which affect the halal label in this research model. In previous studies regarding the effect of halal labels on cough medicines, the location chosen was Malang, whereas in this study, DKI Jakarta was selected as the research location

2. Methodology

2.1 Sources and Methods of Data Collection

This study employs a quantitative approach by utilizing primary data. Data collection was conducted from March to April 2023 in DKI Jakarta through the distribution of online questionnaires via social media platforms such as Twitter, Instagram, and TikTok. A sample of 100 respondents was selected based on the Slovin formula, with criteria including being Muslim, residing in DKI Jakarta, and currently consuming or having purchased and consumed cough medicine.

2.2 General Description of Structural Equation Modeling Partial Least Square (SEM-PLS)

Structural Equation Modeling (SEM) is a multivariate analytical technique used to simultaneously analyze the relationship between several variables with many indicators by combining factor analysis and path analysis (Latan, 2013) This study uses SEM-PLS as an analytical method. SEM-PLS is also called PLS path modeling. The PLS path model consists of two models (Hair *et al.*, 2017).

- a. Outer Model: The relationship between latent variables and all indicators is described in this model. Reliability and validity tests are used to evaluate the measurement model.
- b. Inner Model: This model explains the relationship between latent variables.

3. Results

3.1 Respondent Characteristics

Based on the study results, the characteristics of the respondents were obtained and are summarized in Table 1, including information on domicile, gender, age, occupation, income, expenditure, type of cough medicine, cough medicine brand, and cough medicine price. The questionnaire data was completed by 100 respondents, it was observed that the majority of respondents reside in East Jakarta, comprising 40 respondents (40%). The respondents in this study were predominantly female, with a total of 91 respondents (91%) Furthermore, only 9 respondents (9%) were male. The study population was primarily composed of individuals aged 17-25 years, suggesting that Generation Z dominated the respondents. This could be attributed to the distribution of questionnaires through social media platforms, such as Twitter, Instagram, TikTok, and others, which are popular among the younger generation.

The survey showed that the majority of respondents were students, and the occupations with the lowest number of respondents were civil servants, freelancers, and teachers, each with only one respondent (1%). The majority of respondents in this study had a monthly income of less than IDR 1,000,000, with 37 respondents (37%). This is consistent with the typical income source for most respondents, who are students and rely on pocket money as their primary source of income. The table also shows that the monthly expenditure of the majority of respondents falls within the range of IDR 1,000,000 to IDR 2,500,000, with a total of 44 respondents (44%).

Based on the type of cough medicine consumed, 87 respondents (87%) consumed this type of liquid cough medicine. At the same time, 13 other respondents chose the type of cough medicine tablets. Based on data obtained from 100 respondents, 24 brands of cough medicine were

mentioned. Most respondents mentioned OBH as the brand of cough medicine they consumed. There are 6 brands off cough medicine out of 24 mentioned by respondents who were not registered on the Halal MUI page, namely alpara caplet, decadryl, demacolin, hufagrip, lapisiv, and sanadryl. In This study, most respondents bought cough medicine in the UDR 10,000 – IDR 20,000 price range.

3.2 Knowledge of the Indonesian Official Halal Label

Table 2 shows that 40% of respondents know the MUI halal label, and 39% of respondents know the latest Indonesian halal label. So, it can be interpreted that most respondents already know the halal label that applies in Indonesia.

Table 2 Knowledge of Indonesia halal label on respondents

No.	Halal Label	Halal Label	No.	Halal Label	Halal Label
1.		40	2.		39
1.		16	2.		5

3.3 Analysis of Cough Medicine Purchasing Decisions in DKI Jakarta

3.3.1 Evaluation of the Outer Model

a. Convergent Validity Test

Convergent validity testing is a critical aspect of evaluating the outer model. It involves examining the \ correlation between each indicator's value and its corresponding latent variable. As depicted in Figure 2, the loading factor value for each indicator has met the criteria (≥ 0.5) after discarding several indicators. In addition to the loading factor value, the Average Variance Extracted (AVE) value can also be used to assess convergent validity, with a criteria of > 0.5 . Table 3 indicates that the AVE value obtained during the retest is greater than 0.5, suggesting that each latent variable satisfies the validity criteria. Therefore, it can be inferred that all latent variables in this study possess good validity.

Table 3 AVE Value

Latent Variable	AVE Value
Quality Product (KL)	0.586
Purchase Decision (KP)	0.555
Halal Label (LH)	0.571
Knowledge of Halal Products (PP)	0.504
Personal Factor (PR)	0.558
Psychological Factor (PSI)	0.607
Religiosity (RG)	0.529
Social Factor (SOS)	0.563

b. Discriminant Validity Test

Table 4 displays the Fornell Larcker Criterion values, which confirm the validity of the indicators utilized in this study. The correlation values of each indicator with its latent variables are higher than those of the other latent variables.

Table 4 Fornell Larcker Criterion Value

	KL	KP	LH	PP	PR	PSI	RG	SOS
KL	0,766							
KP	0,672	0,745						
LH	0,299	0,338	0,756					
PP	0,563	0,672	0,468	0,710				
PR	0,562	0,637	0,199	0,348	0,747			
PSI	0,655	0,510	0,201	0,442	0,472	0,779		
RG	0,278	0,219	0,435	0,268	0,345	0,265	0,727	
SOS	0,470	0,344	0,322	0,386	0,348	0,398	0,172	0,750

Table 1 Characteristics of respondent

Respondent Characteristic	Classification	Total	Percentage (%)
Domicile	West Jakarta	19	19
	Central Jakarta	10	10
	South Jakarta	21	21
	East Jakarta	40	40
	North Jakarta	9	9
	Kepulauan Seribu	1	1
Gender	Male	9	9
	Female	91	91
Age	17 – 25	86	86
	26 – 35	7	7
	36 – 45	0	0
	46 – 55	4	4
	56 - 65	3	3
Occupation	Student	77	77
	Private employees	15	15
	Civil servant	1	1
	Freelance	1	1
	Housewife	3	3
	Entrepreneur	2	2
	Teacher	1	1
Income	< IDR 1.000.000	37	37
	IDR 1.000.000 – IDR 2.500.000	33	33
	IDR 2.500.001 – IDR 5.000.000	26	26
	IDR 5.000.001 – IDR 7.500.000	1	1
	IDR 7.500.001 – IDR 10.000.000	2	2
> IDR 10.000.000	1	1	
Expenditure	< IDR 1.000.000	44	44
	IDR 1.000.000 – IDR 2.500.000	44	44
	IDR 2.500.001 – IDR 5.000.000	9	9
	IDR 5.000.001 – IDR 7.500.000	2	2
> IDR 10.000.000	1	1	
Type of Cough Medicine	Liquid	87	87
	Tablets	13	13
Cough Medicine Brand	Actifed	4	4
	Ambroxol	4	4
	Bisolvon	3	3
	Decadryl	3	3
	Komix	19	17
	Laserin	4	4
	Vicks Formula 44	5	4
	OBH	44	39
	Woods	7	6
	Siladex	7	6
	Others	14	12
Price of Cough Medicine	< IDR 10.000	9	9
	IDR 10.000 - IDR 20.000	46	46
	IDR 20.001 - IDR 30.000	25	25
	IDR 30.001 - IDR 40.000	9	9
	IDR 30.001 - IDR 40.000	4	4
> IDR 50.000	7	7	

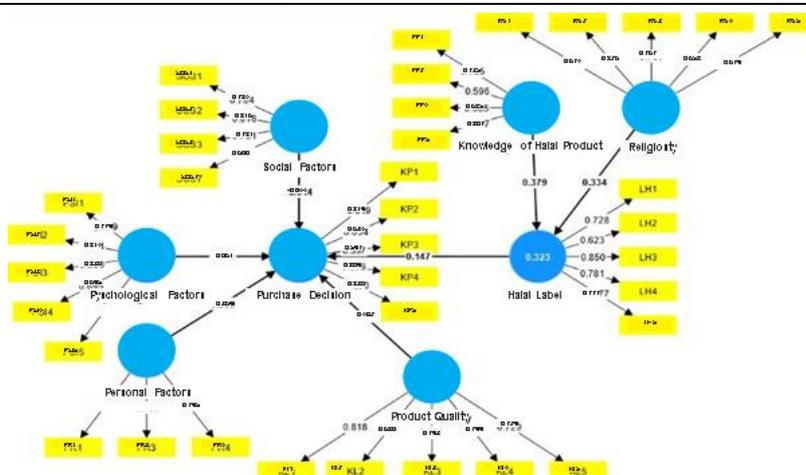


Figure 2 Final loading factor model

c. Reliability Test

The next step in the process is the reliability test, which is utilized to assess the dependability of the research variables. In order for a variable to be considered dependable, its composite reliability score must be greater than 0.7. As shown in Table 5, all of the latent variables employed in this study have a composite reliability score above this threshold, indicating that they are reliable.

Table 5 Composite reliability value

Latent Variable	Composite reliability
Quality Product (KL)	0.876
Purchase Decision (KP)	0.859
Halal Label (LH)	0.869
Knowledge of Halal Products (PP)	0.797
Personal Factor (PR)	0.793
Psychological Factor (PSI)	0.885
Religiosity (RG)	0.842
Social Factor (SOS)	0.824

3.2.1 Evaluation of the Inner Model

a. Path Significance Test

In this investigation, the path significance test employed a significance level of 5% or 0.05. If the t-statistic value is ≥ 1.96 and the p-value is ≤ 0.05 , the hypothesis can be accepted and the relationship between variables can be considered statistically significant. The direction of the relationship between variables can be established by examining the original sample value. If the original sample value is > 0 , the direction of the relationship is positive, whereas if the original sample value is < 0 , the direction of the relationship is negative. The path coefficient, which is presented in Table 6, is a measure of the strength and direction of the relationship between the variables.

b. Coefficient of Determination

Based on the R-square value presented in Table 8, the halal label variable has a value of 0.323, indicating that the level of religiosity and knowledge of halal products among consumers can account for 32.3% of the effect on the halal label. Additionally, other factors outside the scope of the current study explain the remaining portion of the effect. Similarly, the purchase decision variable has an R-square value of 0.570. In this case, the halal label variable, personal factors, psychological factors, social factors, and product quality can collectively account for 57% of the effect on purchasing decisions. The remaining portion of the effect is attributable to factors beyond the scope of the current study.

Table 6 Path coefficient value

	Original sample	T-statistics	P Value
Product Quality → Purchase Decision	0.402	3.597	0.000
Halal Label → Purchase Decision	0.147	2.062	0.039
Knowledge of Halal Products → Halal label	0.379	4.547	0.000
Personal Factor → Purchase Decision	0.369	3.725	0.000
Psychological Factor → Purchase Decision	0.061	0.593	0.553
Religiosity → Halal Label	0.334	4.073	0.000
Social Factor → Purchase Decision	-0.044	0.508	0.612

Table 7 R-square value

	R-square	R-square adjusted
Purchase Decision	0,570	0,548
Halal Label	0,323	0,309

4. Discussion

4.1 The Effect of Religiosity on Halal Label

Based on Table 6, it can be discerned that the religiosity variable has a statistically significant impact on the halal label. This is evidenced by the t-statistic value of 4.073, which is greater than the critical value of 1.96 (t-table) at a significance level of 0.05 (p-value < 0.05 , or 0.000). The direction of influence of religiosity on the halal label is positive, as indicated by the original sample value of 0.334, which is greater than 0. This suggests that an increase in religiosity refers to an increase in awareness of the halal label among consumers. Religiosity refers to an individual's level of commitment to religion, and it encompasses attitudes and behaviors that reflect this commitment. The higher an individual's religiosity, the more likely the individual is to adhere to religious teachings. In this study, the positive influence of religiosity on the halal label suggests that an increase in religious commitment among consumers is associated with an increase in awareness of the halal label on food products.

4.2 The Effect of Knowledge of Halal Product on Halal Labels

The results of the path coefficient test revealed a t-statistic of 4.547, a p-value of 0.000, and an original sample variable knowledge of halal products equal to 0.379. These findings suggest a positive and significant relationship between knowledge of halal products and halal labels. The positive correlation between knowledge of halal products and halal labels can be interpreted as indicating that individuals with higher levels of knowledge of halal products are more likely to be concerned with the presence of a halal label on a product.

4.3 The Effect of Halal Label on Purchase Decision

Based on Table 7, the halal label variable exhibits a statistically significant effect on purchasing decisions, with a t-statistic value of 2.0662 and a p-value of 0.039. This suggests that the presence of a halal label on cough medicines has a positive influence on the purchasing decisions of Muslim consumers in DKI Jakarta, as indicated by the original sample value of 0.147 > 0 . A positive relationship between the halal label and purchasing decisions is thus confirmed, in line with the findings of previous research by Ismail *et al.* (2022) and Munir *et al.* (2019), which demonstrated that the halal label has a profound influence on consumer purchasing decisions.

4.4 The Effect of Personal Factors on Purchase Decision

Table 7 indicates that the t-statistic and p-value of personal factor variables are 3.725 and 0.000 respectively. This suggests that personal factor variables have a statistically significant effect on purchasing decisions. The original sample value of this variable is 0.369, which is greater than zero, indicating a positive relationship between personal factor variables and purchasing decisions. This positive relationship can mean that the higher the personal factors influence a person, the more likely they are to make a purchase decision for cough medicine. This is supported by previous research (Gea, 2021), which found that personal factors significantly influence drug-purchasing decisions.

4.5 The Effect of Psychological Factors on Purchase Decision

Based on the results, the psychological factor variables have an insignificant relationship with purchasing decisions. The t-statistic value is less than 1.96 and the p-value is greater than 0.05, indicating that the direction of the relationship between the variables is positive, but not statistically significant. This means that the greater the psychological factors that affect a person, the more likely they are to make a purchase, but this relationship is not statistically significant. Contrary to the findings of (Gea, 2021), which suggest that psychological factors influence drug purchasing decisions, this study found no statistically significant relationship between psychological factors and purchasing decisions. However, the results of this study align with (Diana *et al.* 2022). Which states that psychological factors do not influence purchasing decisions.

4.6 The Effect of Social Factors on Purchase Decision

Based on the path coefficient results, the social factor variables were found to have a t-statistic of 0.508 and a p-value of 0.612, indicating that their relationship with purchasing decisions is insignificant. The original sample value of this variable is -0.044, indicating a negative relationship between social factors and purchasing decisions, suggesting that the social environment has limited influence on the decision to purchase cough medicine. Consistent with this finding, a study found that social factors do not influence consumers purchasing decisions for traditional medicines (Diana *et al.* 2022). Reported that recommendations from friends and family do not influence drug purchase decisions (Temechewu & Gebremedhin 2020).

4.7 The Effect of Product Quality on Purchase Decision

Based on Table 7, the t-statistic value for the product quality variable is 3.597 and the p-value is 0.000. This suggests that product quality has a significant impact on the decision to purchase cough medicine. The positive relationship between product quality and purchasing decisions confirms that improving the quality of cough medicine will lead to increased purchases by Muslim consumers in DKI Jakarta, which aligns with the findings of previous research by Anggreini & Suwitho, (2020) and Alfairi & Karneli, (2019), who have demonstrated the importance of product in influencing purchasing decisions.

5. Conclusion

Conclusively, the respondents in this research were predominantly from the city of East Jakarta, with the majority falling within the Generation Z demographic (17-25 years of age). Most of the respondents are still students. The monthly income of most respondents was < IDR 1,000,000, while the monthly expenses of most respondents were divided into two categories, namely < IDR 1,000,000 and IDR 1,000,000 – IDR 2,500,000. The type of cough medicine consumed by most respondents is liquid cough medicine under the OBH brand and has a price in the range of IDR 10,000 – IDR 20,000. Based on the data processing results using SEM-PLS, it was found that the factors influencing Muslim consumers' decision in DKI Jakarta to buy cough medicine are halal labels, personal factors, and product quality. Meanwhile, social and psychological factors do not influence the decision of Muslim consumers to buy cough medicine. Producers are expected to be able to understand the needs of Muslim consumers for cough medicine. Based on this study's results, Muslim consumers' decision in DKI Jakarta to buy cough medicine is influenced by the presence of a halal label and product quality. It means that Muslim consumers are increasingly considering the halalness of drugs and the quality of the drugs to be purchased. Therefore, producers are expected to be able to produce medicines with ingredients that are safe for use by Muslim consumers and can consider applying for halal certification. In addition, manufacturers are also expected to improve product quality so that people will trust and buy cough medicine more. Based on the loading factor indicator value of knowledge of haram ingredients, which is very small, it is hoped that the government or authorized institutions can educate the public about knowledge of haram ingredients.

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