Awareness Towards Jamu Classification in JABODETABEK Area

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Abstract. Indonesia is endowed with natural resources especially medicinal plants. The medicinal plants have been used as the raw material of traditional medicine to treat and prevent various diseases long before modern pharmaceutical was introduced. The most popular Indonesian traditional medicine called as *jamu*. *Jamu* have been consumed by the ancestors and passed down from generation to next generation. The local society believed the health benefits after consuming *jamu* such as to maintain health and wellness and boosting immune system and the consumption of *jamu* significantly increased during covid-19 pandemic. There are three classification of traditional medicine which are *jamu*, standardized herbal medicine, and *fitofarmaka*. This study aimed to discuss the awareness towards *jamu* classification in Jabodetabek area. This study was a quantitative research by distributing a questionnaire through social media that was filled by 309 respondents. Result showed that less than 20% of both male and female respondent aware different *jamu* classifications. The factors that make respondent do not know the *jamu* classification is the lack of information in the internet sources or news. Therefore, the role of the government, health workers, and herbalist are needed to socialize the information about traditional medicine directly.

Keywords: Jamu, Herbal Medicine, Classification

1. INTRODUCTION

Public knowledge of medicinal plants has long been owned by the ancestors and it has been scientifically proven. Traditional medicine has been consumed by the local society due to it is easy to obtain and the price is quite affordable and efficacious for the prevention and treatment of any diseases. The local society believe that traditional medicine is safer than modern pharmaceuticals because it contains herbs rather than chemicals and fewer side effect (Arsyah, 2014).

The classification of traditional medicine is divided into three groups, namely: *jamu*, standardized herbal medicine, and *fitofarmaka*. In general, 92% of people stated that they knew about traditional medicine, but when it focused to the *jamu* about 88.2% of people only know *jamu*. Meanwhile, less than 30% of people knew about standardized herbal medicine and only 3% knew about fitofarmaka (Pratiwi, Hanfi, Artanti, & Pratiwi, 2018).

According to this, people know that *jamu* is more popular than standardized herbal medicine and *fitofarmaka*. Therefore, there is a factor that makes people do not aware with the *jamu* classification such as the lack of information about

traditional medicine (*jamu*). In addition, the update information has not reached all the levels of the society in the various regions. Even though people are living in the digital era that very easy to obtain information from the internet, but not all of the people can understand the information. So, the direct explanation through seminars is being needed to help people choose the right traditional medicine to be consumed.

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2. LITERATURE REVIEW

2.1 Traditional Medicine

According to (Handayani & Suharmiati, 2002), based on the source of the manufacturer or producer, traditional medicines are grouped as follows:

- Homemade traditional medicine
 Sources of plants for making traditional medicine are provided by the community itself, either individually or collectively in the community.
- 2. Traditional medicine from the herbalist A business of mixing, processing and distribution of *jamu* in the form of liquid, without label or detail information of the product composition. Carried jamu is made and

sold by young woman who are wearing batik and kebaya with a basket full of bottles containing jamu carried with shabby scarves on their backs (Kodim, 2000).

3. Industry of traditional medicine

According to the Minister of Health Regulation No. 246 / Menkes / Per / V / 1990, the traditional medicine industry is classified into large industry and small industry based on the total assets owned, excluding the price of land and buildings. *Industry Kecil Obat Tradisional* (IKOT) is a traditional medicine industry that required to follow CPOTB guidelines which are stated by the authorized officer through inspection (Badan, 1990). Herbal medicine companies or industries are increasingly producing herbal products as traditional medicine in the form of pills, powders, tablets and capsules.

2.2 Traditional Medicine Classification

Based on the manufacture and the type of claims of use and the level of proof of efficacy, Indonesian natural drugs are grouped into three categories, namely with the logo as a marker on the packaging:

2.2.1 Jamu or Indonesian Herbal Medicine

Jamu must meet the following criteria:

- 1) Safe in accordance with the requirement set
- 2) Efficacy claim proven based on empirical data
- 3) Meet applicable quality requirements



Figure 1. *Jamu* logo Source: Kumparan, 2018

2.2.2 Standardize Herbal Medicine

Standardized herbal medicine is a preparation of natural ingredients that have been proven safety and efficacy scientifically with the pre-clinical tests and raw material have been standardized. Standardized herbal medicine must meet the following criteria:

- 1) Safe in accordance with the requirement set
- 2) Claims of efficacy scientifically proven or preclinical
- 3) The raw materials have been standardized that used for the product
- 4) Meet applicable quality requirements



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Figure 2. Standardize Herbal Medicine Logo Source: Hipwee, 2017

2.2.3 Fitofarmaka

Fitofarmaka is a natural medicine that has been proven safety and efficacy scientifically with pre-clinical tests (in experimental with animals) and clinical trials, raw materials and finish product have been standardized. Fitofarmaka must meet the following criteria:

- 1) Safe in accordance with the requirement set
- 2) Efficacy claims must be proven based on clinical trials
- 3) The raw materials have been standardized that used for the product
- 4) Meet applicable quality requirements



FITOFARMAKA

Figure 3. *Fitofarmaka* logo Source: Kumparan, 2018

2.3 Modern Pharmaceuticals

Modern pharmaceutical is one of the irreplaceable components in the health service. Because the treatment and prevention of various diseases cannot be released from therapeutic measures with drugs or pharmacotherapy. According to Law Number 36 of 2009 modern pharmaceutical is an ingredients or mixture of ingredients that used in determining the diagnosis, preventing, eliminating, curing diseases or symptoms of diseases, wounds or abnormalities of the body.

Classification of the drugs is divided into two grouped based on how do they work in the human body, namely:

- Local: Drugs that work on local networks such as tropical usage
- Systemic: Drugs distributed throughout the human body like analgetic tablets.

3. METHODOLOGY

In this study, writer uses positivistic social science paradigm, with an explanatory quantitative approach to causality. This research logically links deductive logics with precise empirical

observations of people behavior conduct to confirm and discover a bunch of probabilistic causal laws that can be utilized to predict general patterns of human activity (Neuman, 2014).

The researcher remains neutral and objective because it measures social life aspects and examines the evidence of the other researchers. This process leads to empirical tests and confirmation of social life laws as outlined in the theory.

3.1 Population and Sample

The population of this study were *jamu* consumer in Jabodetabek (Jakarta – Bogor – Depok – Tangerang – Bekasi) area. The characteristic is male and female, age range from 18 – 70 years old, type of *jamu* consumed, and health benefits after consuming *jamu*.

This study used purposive sampling. The number of samples determined in this study was obtained by using the formula of Taro Yamane or Slovin as follows:

$$n = \frac{N}{N \times d^2 + 1}$$

Where n is total of the samples, N is total of the population in Jabodetabek, d² is precision (set at 5.75% with the level at 94.2%), and 1 is constant number. Based on the data, population of people who are living in Jabodetabek is 10.504.100 with the precision is set at 5.75% the sample required is

$$n = \frac{10504100}{(10504100) \times 0.0575^2 + 1}$$
$$n = 302.44$$

Based on calculations above, the samples taken were 303 people who are consuming Jamu.

3.2 Data Collection Technique

The data collection technique in this study is by using a questionnaire that will be distributed online. The questionnaire was created by using google form application and will be distributed directly via the internet. The process of distributing questionnaires was carried out from 28 October 2020 until 25 November 2020. Based on the source, this study used two sources which are primary data and secondary data.

3.3 Data Analysis Technique

Data analysis is an activity that carried out after all of the data from the respondents have been collected. Activities in data analysis are collecting data based on variables and types of respondents. Then, tabulating the data based on variables, follow with calculation to answer the research problem and research hypothesis. According to this, the data analysis conducted by using software Microsoft Excel. Then after that researcher is able to present the data in the report.

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4. RESULT AND DISCUSSION

There are 309 respondents participating in online questionnaire through google form, their response was then compiled to get a better understanding about the awareness between male and female towards *jamu* classification in Jabodetabek area.

4.1 Form of Jamu Consumed

In the pie chart below, it shows the comparison between male and female in form of *jamu* consumed in Jabodetabek area. There are four options of forms of jamu which are drinking liquids, capsules, sachet, and homemade *jamu*.

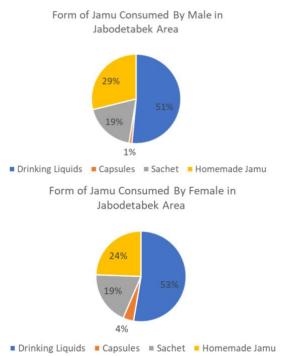


Figure 4. Form of *Jamu* Consume by Male and Female Respondent in Jabodetabek Area

According to the pie chart, there is no significant difference between male and female. Both of them mostly consumed *jamu* in the formed of drinking liquids. However, *jamu* in the form of capsules are

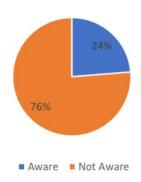
not favorited by male and female in Jabodetabek area. Both *jamu* in the form of drinking liquids and capsules are easy to consume.

But, interestingly in this study only several people choose consume *jamu* in the form of capsules. However, the percentage of male and female consume jamu in the form of home made *jamu* is higher than *jamu* in the form of capsules. Whereas, it is more complicated to make homemade *jamu*. This might be happening due to people think jamu in form of capsules is contaning chemicals that will have side effect to the human body. So, people choose to make homemade *jamu* that is healthier than *jamu* in the form of capsules.

4.2 Jamu Classification Awareness

The pie chart below shows the comparison between male and female in *jamu* classification awareness in Jabodetabek area. There are three classification of traditional medicine which are *jamu*, standardized herbal medicine, and fitofarmaka.

Male - Jamu Classification Awareness



Female - Jamu Classification Awareness

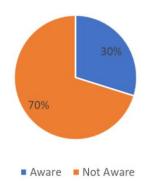


Figure 5. *Jamu* Classification Awareness by Male and Female Respondent n Jabodetabek Area

Based on the pie chart, only 20% to 30% of male and female in Jabodetabek is aware with the *jamu* classification. It means, the respondent knowledge is still very low or they might be knew but do not

understand the difference between *jamu*, standardized herbal medicine, and *fitofarmaka*. Therefore, there needs to be a role of herbalist, health workers, and the government to increase public knowledge of the traditional medicine.

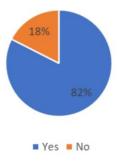
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In addition, mostly the communities in Jabodetabek area consume *jamu* in the form of drinking liquids such as carried *jamu*. The carried *jamu* do not provide label and detail information of the *jamu* product. Whereas, usually in the labelling of the *jamu* product shows the logo of the traditional medicine classification whether it is *jamu*, standardized herbal medicine, or *fitofarmaka*.

4.3 Labelling and Information in the *Jamu* Packaging

According to the pie chart, there is no significant difference between male and female. Both of male and female said that the labelling and information in the packaging of *jamu* are important.

The Importance of The Labelling and Information in The Packaging of Jamu by Male



The Importance of The Labelling and Information in The Packaging of Jamu by Female

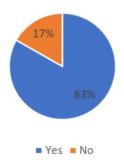


Figure 6. The Importance of Labelling and Information by Male and Female Respondent in *Jamu* Packaging

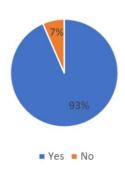
On the other hand, this answer is not corresponding with the *jamu* classification awareness because the *jamu* classification information is shown in the labelling and

packaging information of the *jamu* product. In addition, this results also do not corresponding with the of *jamu* consumed by both male and female. Because, in the figure 4 mostly male and female in Jabodetabek area consumed jamu in the form of drinking liquids such as carried *jamu* or *jamu gendong*.

On the other hand, the carried *jamu* do not shows the labelling and detail information about the *jamu* product but people still buy the *jamu* from the carried *jamu*. This is the interesting study that shows both male and female in Jabodetabek area believed the health benefit of consuming *jamu* without considering the label and detail information of the *jamu* product. Moreover, they also believed in the culture of the consuming *jamu* from the without take a look to the company brand or people who are selling the *jamu*.

4.4 Indonesian Jamu Company

Male - Would you like to see more Indonesian Jamu Company



Female - Would you like to see more Indonesian
Jamu Company

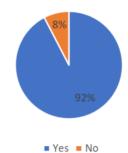


Figure 7. The expectation of *Jamu* Indonesian Company by Male and Female Respondent in Jabodetabek Area

According to the pie chart, both male and female are expected to see more Indonesian *jamu*

company. It means that people who are living in Jabodetabek is waiting for the development of the *jamu* industry that will created the innovative product that will be consumed by the locals. Not only the innovative product but it could be the most efficacy *jamu* product which can beat modern pharmaceuticals.

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5. CONCLUSION AND RECOMMENDATION

Based on the research, the respondent awareness about jamu classification is very low about 18% for male and 17% of female. It is supported by the form of jamu mostly consumed by the respondent is *jamu* in the form of drinking liquids such as carried jamu. More than 50% both male and female consumed *jamu* in the form of drinking liquids. This form of jamu do not provide label and detail information in the *jamu* product, so there is no doubt that people do not know the information about *jamu* classification.

From this research, researcher recommend that traditional medicine expertise (herbalist), health workers, and the government are needed to provide information and socialized about traditional medicine to the communities in Jabodetabek area to increase the awareness of different types and classification of Indonesia's traditional medicine.

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