When Trust Falters: The Impact Of Negative Information On Traditional Medicine Repurchase Intentions In Indonesia

Rizka Zulfikar[1,2], Ananda Sabil Hussein[3], Nanang Suryadi[4], Margono[5]

[1,3,4,5]Department Of Management, Faculty of Economics and Business, Brawijaya University, Malang, Indonesia
[2]Department of Management, Economic Faculty, Islamic University of Kalimantan MAB, Banjarmasin, Indonesia
*Corresponding Author:
Email: rizkazulfikar@student.ub.ac.id

Abstract.

This study investigated how exposure to negative information influenced consumer trust and repurchase intention within Indonesia's traditional medicine market. By integrating the Theory of Planned Behavior with Trust Deterioration Models, the research addressed a critical gap concerning the impact of adverse digital narratives on culturally embedded health products. A quantitative, cross-sectional design was employed using an online survey that collected 207 valid responses from traditional medicine users across Indonesia. Data were analyzed using Descriptive analysis and Partial Least Squares Structural Equation Modeling (PLS-SEM) to evaluate both measurement and structural models. Results showed that negative information significantly undermined trust in traditional medicine, which in turn reduced consumers' intention to repurchase. The strongest effects emerged from the perceived credibility and virality of negative news, which heightened risk perception and skepticism toward product quality, brand integrity, and regulatory oversight. Trust was found to partially mediate the relationship between negative information and repurchase intention, highlighting its central role as both a psychological enabler and a vulnerability point in consumer behavior. These findings provided substantial implications for producers, regulators, and marketers in preserving consumer confidence, suggesting the urgent need for reputation management strategies and transparent communication to counteract digital skepticism in emerging markets.

Keywords : *Negative information; traditional medicine; consumer trust; repurchase intention and digital perception.*

I. INTRODUCTION

Indonesia's rich heritage of traditional medicine, particularly "jamu," is intricately linked to the nation's cultural identity and public health practices. Traditionally recognized as essential components of wellness, jamu has gained significant recognition, particularly following its designation by UNESCO as an intangible cultural heritage. This acknowledgment highlights not only the historical importance of jamu but also its relevance in contemporary health discourses, wherein natural remedies are increasingly appealing amid global health crises. The jamu industry has expanded significantly; once characterized by local street vendors, it now encompasses sophisticated commercial packaging and availability through pharmacies and retail outlets, generating substantial annual sales. The surge in demand reflects a renewed interest in traditional remedies, likely fueled by rising consumer awareness of natural health options amidst growing skepticism towards chemical pharmaceuticals [1].The evolution of jamu aligns with broader trends in health consumption, but this has been accompanied by a troubling rise in negative reports regarding its safety and regulatory compliance. A significant outpouring of critical information emerged between 2022 and 2024, particularly from the Indonesian Food and Drug Authority (BPOM), which documented hundreds of cases involving illegal or contaminated traditional medicines. For instance, BPOM's findings in 2022 exposed numerous instances where traditional medicines were marketed without necessary distribution permits, revealing hazardous contaminants such as corticosteroids or painkillers commonly found in these products [2]. Moreover, a substantial raid in West Java in 2024 uncovered a significant number of herbal products that contained banned pharmaceutical ingredients, raising alarms for public health, as excessive chemical exposure can lead to severe health complications, including risks to liver and kidney function [3].

Moreover, BPOM's ongoing surveillance reports brought to light traditional medicine products that failed to meet safety and quality standards due to contamination or hazardous chemical content. Such results necessitate comprehensive regulatory action and improved consumer education. Previous academic inquiries into the motivations behind consumers' purchasing decisions regarding herbal products have categorized trust, brand image, and perceived quality as influential factors [4], [5]. Notably, broader studies across Indonesia have confirmed that elements like brand experience, brand preference, and established trust

significantly enhance consumer satisfaction and subsequent repurchase behaviors in herbal medicine [6], [7].Consumers are more strongly influenced by negative information than positive, a phenomenon known as negativity bias[8]. Exposure to adverse news such as contamination or harmful ingredients in traditional medicine can significantly erode trust in product safety and effectiveness, particularly when the information comes from credible sources [9]. This heightened concern has led many consumers to distance themselves from affected products, especially in cases involving hazardous substances [10].Trust plays a pivotal role in shaping consumer responses to negative information. Harmful narratives often prompt skepticism toward not only products but also manufacturers and regulatory authorities [11]. Many consumers report diminished confidence in government oversight, which, in turn, weakens their belief in the safety and authenticity of traditional remedies, reducing their willingness to repurchase [12].These effects are evident in shifting purchasing behavior. Research on herbal products shows that exposure to negative news frequently leads consumers to seek safer alternatives, affecting both short-term decisions and long-term brand loyalty. This behavioral change aligns with the Theory of Planned Behavior [13], [14], which suggests that attitudes shaped heavily by trust drive intention.

When trust declines, repurchase intention follows.Interestingly, recent empirical findings suggest that while positive branding and product attributes are important, the influence of negative information has been insufficiently explored. Current theories, such as the Theory of Planned Behavior (TPB), primarily address attitudes, norms, and beliefs; however, they frequently overlook the impact of negative cues that substantially undermine brand trust [15], [16].. Additionally, Trust Deterioration Theory indicates that adverse publicity can severely disrupt trust dynamics, yet this area remains relatively under-researched within the domain of traditional medicines [17]. Recognizing this critical gap, our research aims to examine how negative information affects trust and alters repurchase behaviors specifically in the Indonesian jamu market, addressing the absence of empirical studies focused on the consumer response to negative cues.In a bid to fill these gaps, our study presents two integral contributions. We first integrate the literature on negative information processing from consumer behavior with the regulatory challenges facing jamu producers today. The second aspect of our research involves employing a theoretical framework that merges TPB with constructs from trust deterioration models, such as trust repair and resilience theory, enabling a nuanced understanding of how negative information influences cognitive dissonance and shifts in consumer intention regarding jamu. This theoretically robust approach allows for a comprehensive understanding of consumer behavior shaped by socio-cultural connections to traditional products and the complexities injected by the digital communication landscape [18].This research sets out to investigate two primary areas: the manner in which exposure to negative information impacts trust and repurchase intentions in traditional medicine products, and the mediating role that trust plays within this framework. This leads us to our overarching research questions:RQ1: How does exposure to negative information impact trust and consumer repurchase intention in traditional medicines?

RQ2: What is the mediating role of trust between negative information and repurchase intention?

By addressing these questions, we aimed to deepen theoretical understandings of trust dynamics within consumer behavior and offer actionable strategies for traditional medicine producers in Indonesia to preemptively manage reputational risks, respond to negative publicity pragmatically, and maintain consumer trust in an increasingly interconnected and digitally influenced market.

II. METHODS

a) Research Approach

This study employed a quantitative approach to investigate the relationship between negative information, trust, and repurchase intention regarding traditional medicine in Indonesia. A cross-sectional survey design was used, enabling empirical testing of structural relationships among latent constructs. This method ensures statistical rigor, supports generalizability, and is well-suited for analyzing mediating and moderating effects using multivariate analysis [19].

b) Population and Sample

The target population comprises Indonesian consumers who currently or previously used traditional medicine, such as jamu or herbal products. A total of 207 valid responses were collected via online surveys distributed through social media, Whatsapp group, and health-related forums. Respondents had to have used traditional medicine within the past 12 months. The sample size meets recommended thresholds for Partial Least Squares Structural Equation Modeling (PLS-SEM), satisfying requirements for models with multiple constructs and paths [20].

c) Data Collection

Data were gathered using a structured, self-administered questionnaire adapted from validated instruments. Items measured key constructs such as negative information exposure, trust, and repurchase intention using Likert scales. Prior to the main survey, the instrument underwent pilot testing with 30 participants for clarity. Online data collection provided broad geographic reach and was suitable given the rising digital engagement of Indonesian consumers. Ethical standards were upheld, with informed consent and confidentiality guaranteed.

d) Data Analysis

Data were analyzed using SmartPLS 4.0 software, applying PLS-SEM due to its effectiveness in handling complex models, small to medium sample sizes, and non-normal data. This method supports both theory development and simultaneous estimation of measurement and structural models. A two-step process was followed: assessment of the measurement model (reliability, validity) and the structural model (path coefficients, R^2, and predictive relevance). Bootstrapping with 5,000 subsamples ensured statistical significance testing [19], [21].

e) Hypothesis and Research Model

To address the research objectives and test the proposed hypotheses, this study developed four Hypothesies and a conceptual model. The model was designed to capture the dynamic relationship between negative information, consumer trust, and repurchase intention within the context of traditional medicine consumption in Indonesia. Specifically, it sought to investigate both the direct and indirect effects of negative information exposure on repurchase behavior, with trust acting as a mediating variable.This integrative model reflects the assumption that exposure to adverse narratives—particularly those perceived as credible or viral can disrupt consumers' psychological evaluations, weaken perceived product credibility, and ultimately reduce behavioral intention. By incorporating both cognitive and affective elements, the model provides a holistic view of how trust mechanisms function under the influence of negative informational cues in a culturally embedded product category.The structural relationships hypothesized in the model are empirically tested using Partial Least Squares Structural Equation Modeling (PLS-SEM), enabling simultaneous estimation of both measurement and structural components. The visual representation of the research model is presented in Figure 1, outlining the hypothesized causal pathways among the three core constructs: Negative Information (NI), Trust (T), and Repurchase Intention (RI).

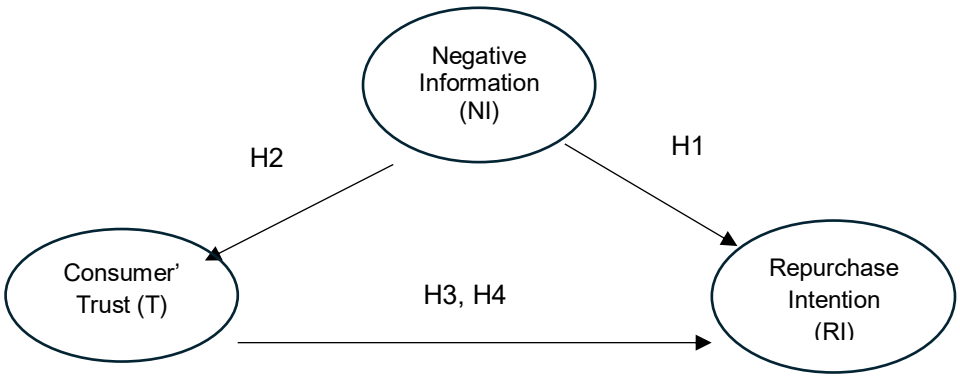

Fig 1. Research Model

Source : Prepared by Author, 2025

Description :

- H1 predicted a negative relationship between exposure to negative information and repurchase intention.

- H2 assessed the effect of negative information on consumer trust.
- H3 tested whether trust positively influenced repurchase intention.
- H4 examined the mediating role of trust in the relationship between negative information and repurchase intention.

The development of these hypotheses aimed to confirm the structural validity of the proposed model and to provide empirical evidence for the conceptual pathways through which consumer behavior is influenced in the context of traditional medicine.

III. RESULTS AND DISCUSSION

a) Respondent's Characteristics

Table 1 presents the demographic and geographic distribution of the 207 respondents who participated in the study exploring how negative information impacts trust and repurchase intention for traditional medicine products in Indonesia. As a foundational component of the research, this table establishes the representativeness, diversity, and reliability of the data sample and, therefore, underpins the generalizability of the study's conclusions.

Table 1. Respondent's Characteristics

No	Description	N	%	No	Description	N	%
1	Gender			**4**	Occupation		
	• Male	93	44.93%		• Student	20	9.66%
	• Female	114	55.07%		• Government Employee	137	66.18%
2	Age				• Private Employee	44	21.26%
	• Below 20 years	2	0.97%		• Enterpreneuers	5	2.42%
	• 21 – 30 years	22	10.63%		• Not Working	1	0.48%
	• 31 – 40 years	92	44.44%				
	• 41 – 50 years	64	30.92%	**5**	Regional Origin		
	• More than 50 years	27	13.04%		• Sumatera (Aceh, Riau, Lampung, Sumbar, Sumut, Sumsel)	16	7.73%
					• Jawa (Jatim, Jabar, Jateng, Yogyakarta)	78	37.68%
3	Education				• Jakarta, Banten	42	20.29%
	• High School	9	4.35%		• Sulawesi (Sulsel, Sulteng, Sulut)	8	3.86%
	• Graduate (S1)	5	2.42%		• Kalimantan (Kalsel, Kalteng, Kalbar, Kaltim, Kaltara)	50	24.15%
	• Master Degree (S2)	149	71.98%		• Bali	4	1.93%
	• Doctoral Degree (S3)	44	21.26%		• Nusa Tenggara (NTT, NTB)	3	1.45%
					• Papua	1	0.48%
					• Maluku	5	2.42%

Source : Data Processed, 2025

The respondent profile reveals several critical dimensions relevant to understanding trust in traditional medicine. Women made up the majority of respondents (55.07%), reflecting their dominant role in household health decisions and potentially greater exposure to health-related information an important factor in trust formation and risk aversion. The age distribution centered around mature adults aged 31–50 (75.36%), a demographic known for its proactive health behavior and sensitivity to health-related risks. Limited participation from individuals under 20 or above 50 years suggests a possible digital divide, as younger and older populations may be less reachable through online surveys.Educational attainment among respondents was notably high: 71.98% held a Master's degree and 21.26% a Doctorate, indicating an academically elite sample. This high level of education implies greater critical thinking and heightened awareness of safety and regulatory issues, making such individuals more susceptible to trust deterioration

when exposed to negative information consistent with the theory of negativity bias.The occupational composition was largely dominated by government employees (66.18%), followed by private-sector workers and students. While this distribution may reflect the researchers' networks or sampling ease, it also introduces potential bias related to institutional orientation and regulatory awareness, both of which may influence trust in traditional remedies.Geographically, the sample was diverse. Java (37.68%) contributed the largest share, followed by Kalimantan and Jakarta-Banten. Smaller but meaningful representation from other Indonesian regions enhances the generalizability of the findings. Differences in digital literacy and access to online information across regions may also shape how consumers encounter and respond to negative news about traditional medicines.

b) Descriptive Analysis

Table 2 presents the descriptive analysis of respondents' responses across three key dimensions: negative news exposure, trust, and purchase intention toward traditional medicine products. Each statement is categorized based on the percentage distribution of responses across low, middle, and high levels.The first dimension, negative news, illustrates a high level of exposure among respondents, particularly in terms of frequent encounters with negative news (65.2%) and trust in these sources (68.6%). This indicates a strong engagement with potentially damaging narratives regarding traditional medicine.In the trust dimension, notable proportions of respondents reported declining confidence in product benefits (42.5%) and increased skepticism toward brand and manufacturer credibility. Nevertheless, a relatively high percentage also expressed confidence in institutional oversight, suggesting a nuanced perception of regulatory trustworthiness.Next, the purchase intention category highlights a significant tendency toward reconsideration of future purchases. Over half of respondents indicated intentions to explore alternatives (55.6%) and reduced loyalty due to negative information (52.7%), underscoring the broader implications of news consumption on consumer behavior.

Table 2. Respondent's Responses Descriptive Analysis

Statement	Low	Middle	High
Negative News			
1. Often see negative news	22.2%	12.6%	65.2%
2. Trusting negative news sources	21.3%	10.1%	68.6%
3. Know the issue of hazardous materials in the news	29.0%	26.1%	44.9%
4. Knowing the Virality of Negative News	32.9%	21.7%	45.4%
5. Be aware of the spread of news in online groups	35.7%	27.1%	37.2%
Trust			
1. Declining confidence in the benefits of traditional medicine	40.6%	16.9%	42.5%
2. Believing that there is an impact of negative news on decreasing confidence in product quality	39.1%	12.6%	48.3%
3. Declining trust in traditional medicine brands	43.5%	15.9%	40.6%
4. Doubts about the manufacturer's commitment	40.1%	17.4%	42.5%
5. Confidence in government regulations	58.5%	8.6%	32.9%
6. Confidence in institutional oversight standards	54.6%	12.6%	32.8%
7. Perception of health risks	31.4%	9.7%	58.9%
8. Concerns about side effects	36.7%	12.6%	50.7%
9. The influence of bad news despite positive effects	41.5%	15.9%	42.5%
Purchase Intention			
1. Decrease in future purchase intentions	38.6%	9.2%	52.2%
2. Search for alternative products	34.8%	9.7%	55.6%
3. Other product considerations	36.2%	11.1%	52.7%
4. Influence of friends/family opinions	29.5%	10.1%	60.4%
5. Hesitation to stick with the brand	37.7%	14.0%	48.3%
6. The impact of negative news on brand loyalty	35.7%	11.6%	52.7%
7. Not sure to buy again	39.1%	9.2%	51.7%
8. Reluctance to reuse products	41.5%	10.1%	48.3%

Source : Data Processed, 2025

c) SEM-PLS Analysis

Measurement Model Analysis (Outer Model)

Table 3 displays the initial results from the exploratory factor analysis conducted to evaluate the outer model specifically the item loadings of indicators on their respective latent variables: Negative Information (NI), Trust (T), and Repurchase Intention (RI). This table serves as the first step in validating the reliability and convergence of measurement constructs, critical for ensuring that each observed item accurately reflects the underlying theoretical concept it is intended to measure.

Table 3. Exploratory Analysis

	Negative_Information	Repurchase Intention	Trust
NI_1	0.938		
NI_2	0.925		
NI_3	0.940		
NI_4	0.947		
NI_5	0.822		
T1			0.596*
T2			0.855
T3			0.874
T4			0.936
T5			0.927
RI_1		0.944	
RI_2		0.957	
RI_3		0.955	
RI_4		0.845	

Source : Data Processed, 2025

The item loadings for Negative Information (NI_1 to NI_5) range from 0.822 to 0.947, indicating excellent internal consistency and construct validity. These high loadings suggest that the selected items robustly capture the construct of negative information as perceived by consumers in the context of traditional medicine. Given the research objective to assess how such information shapes trust and intention these strong loadings reinforce the integrity of the foundational construct in the model. The consistently high factor loadings underscore the internal coherence of the concept, aligning with prior literature on negativity bias and consumer risk perception, wherein consumers respond more intensely to harmful or alarming information than to positive content.For the Trust construct, four of the five indicators (T2 to T5) show loadings above 0.85, while one item (T1) is marked with an asterisk due to its low value of 0.596. This deviation suggests that T1 may be a weak measure of trust in this context and could potentially be excluded in the final model to improve overall construct reliability.

In psychometric analysis, items with loadings below 0.70 are typically reviewed for conceptual and empirical justification. The presence of such an item introduces a human element to the study it reflects how trust is often multidimensional and not always fully captured by standard measurement items. The relatively lower response to T1 may reflect participants' ambivalence or uncertainty in articulating abstract feelings of trust in a culturally embedded yet informally regulated product like jamu.Repurchase Intention (RI) is another well-performing construct, with loadings between 0.845 and 0.957. This indicates a strong alignment between the indicators and the consumer's stated intent to continue purchasing traditional medicine. This supports the behavioral component of the Theory of Planned Behavior (TPB), particularly the construct of intention as a strong predictor of future behavior, conditional upon attitudes, subjective norms, and perceived control.Table 3 affirms the validity of the measurement instruments used in this study and strengthens the theoretical claim that negative information, when precisely defined and measured, becomes a crucial disruptor in the trust-repurchase relationship. In line with the study's novelty, this table provides evidence that the instruments developed to capture digital-age consumer skepticism in traditional product categories are both relevant and psychometrically sound.

Table 4. Outer Model Evaluation

Constructs		Outer Loading	AVE	Composite Reliability	NI	RI	T
Negative Information (NI)	NI_1	0.937	0.838	0.963	0.916		
	NI_2	0.925					
	NI_3	0.940					
	NI_4	0.947					
	NI_5	0.823					
Repurchase Intention (RI)	RI_1	0.945	0.859	0.960	-0.862	0.927	
	RI_2	0.957					
	RI_3	0.955					
	RI_4	0.845					
Trust (T)	T2	0.867	0.823	0.949	-0.921	0.871	0.907
	T3	0.889					
	T4	0.941					
	T5	0.931					

Source : Data Processed, 2025

Table 4 provides the evaluation of the outer model, showing the final values for outer loadings, Average Variance Extracted (AVE), and Composite Reliability (CR) across the three constructs: Negative Information (NI), Repurchase Intention (RI), and Trust (T). This stage in the PLS-SEM analysis verifies the convergent validity, internal consistency, and reliability of the constructs—each of which plays a central role in the structural model testing.All items for the NI construct exhibit outer loadings above 0.82, with AVE of 0.838 and CR of 0.963. These values significantly exceed the recommended thresholds (AVE ≥ 0.50 and CR ≥ 0.70), confirming that the negative information construct is well defined and consistently measured. In light of the study's novelty which situates negativity as a core antecedent of trust decay these metrics support the legitimacy of examining NI as a unique and empirically distinct concept from traditional predictors like price, quality, or brand image.The RI construct also demonstrates strong psychometric properties. The AVE is 0.859 and CR is 0.960, again exceeding the required thresholds.

These values lend statistical credibility to the argument that repurchase intention is a coherent construct in this domain. Interestingly, the correlation coefficient between NI and RI is reported as -0.862, reflecting a strong inverse relationship. This aligns directly with the first hypothesis (H1) and reinforces the theoretical assumption of negativity bias—that harmful information disproportionately influences consumer intent.For the Trust construct, outer loadings for items T2 through T5 are well above 0.86, with an AVE of 0.823 and CR of 0.949. These results confirm that trust is both reliably measured and statistically distinct from other constructs. Moreover, the negative correlation between NI and T (-0.921) affirms the psychological assumption that trust is vulnerable to disruption when consumers perceive threats—particularly regarding product safety, authenticity, or regulatory compliance.These results support the dual theoretical backbone of the study: the Theory of Planned Behavior (TPB) and Trust Deterioration Theory. They also contribute to addressing a significant research gap: the insufficient operationalization of negative information in traditional medicine markets. Table 3, therefore, not only validates the instrument but also anchors the novelty of the study in empirical precision.

Results of Structural Model Analysis (Inner Model)

Table 5 evaluates the inner (structural) model using R^2, Q^2, and the global goodness-of-fit (GoF) index. These metrics provide insight into the explanatory power and predictive relevance of the structural model linking Negative Information (NI), Trust (T), and Repurchase Intention (RI).

Table 5. Inner Model Evaluation

Construct	R^2	Q^2
Repurchase Intention (RI)	0.782	0.628
Trust (T)	0.848	0.655
goF = $\sqrt{\overline{AVE} \; x \; \overline{R2}}$ = $\sqrt{0\ 840 \text{ x } 0.815}$ =0.827		

Source : Data Processed, 2025

The R^2 values of 0.848 for Trust and 0.782 for Repurchase Intention are notably high, indicating that 84.8% of the variance in Trust and 78.2% of the variance in Repurchase Intention are explained by the predictor variables. These values substantially exceed the benchmark of 0.26 for large effects in PLS-SEM [20], reinforcing the model's robustness. Such high explanatory power is rare in behavioral studies and highlights the significance of negative information and trust as dominant variables shaping repurchase intention in the traditional medicine sector.The Q^2 values: 0.655 for Trust and 0.628 for Repurchase Intention, indicate strong predictive relevance. A Q^2 greater than zero denotes that the model has satisfactory predictive accuracy, and these results suggest that the constructs are not only statistically significant but also practically meaningful [20]. The global GoF index, reported at 0.827, indicates excellent model fit, surpassing the recommended cut-off value of 0.36 for large GoF in behavioral sciences.These results offer powerful support for the study's theoretical framework. The integration of TPB and trust deterioration mechanisms is not only conceptually sound but also empirically validated. This strengthens the argument that trust functions as both a mediator and a consequence of perceived information quality, especially in highly cultural yet increasingly commercial product domains [22], [23].

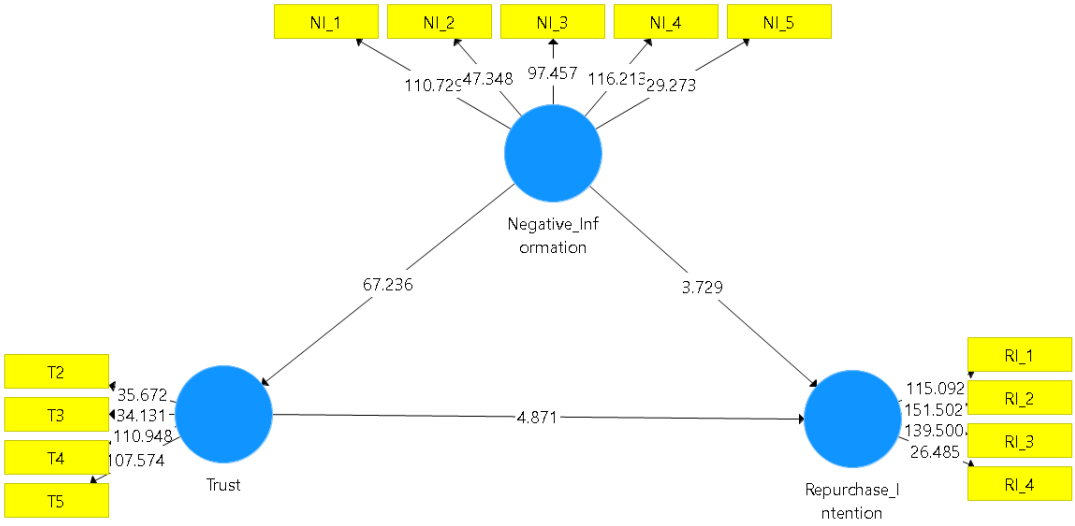

Fig 1. PLS-SEM Research Model

Source : Data Processed, 2025

Figure 1 visually illustrates the structural relationships tested in the PLS-SEM model, including paths from Negative Information (NI) to Trust (T) and Repurchase Intention (RI), and from Trust to Repurchase Intention. The mediation pathway from NI through Trust to RI is also depicted, reflecting the integrated model's theoretical logic and empirical clarity.

Hypothesis Testing

This section presents the results of hypothesis testing based on the structural model developed in the study. To examine the relationships between negative information, trust, and repurchase intention, four hypotheses were formulated and empirically tested using the Partial Least Squares Structural Equation Modeling (PLS-SEM) approach. Each hypothesis reflects a theoretically grounded expectation drawn from the integration of the Theory of Planned Behavior and trust deterioration frameworks.

Table 5 presents the results of hypothesis testing with path coefficients, t-values, significance levels, and interpretation remarks for each hypothesized relationship. All four hypotheses (H1–H4) are statistically supported with high t-values and p-values of 0.000, indicating strong significance.

Table 5. Hypothesis Testing Result

Hyphotesis	Path	Coeficient	t	Sig.	Remark
H1	NI → RI	-0.862	45.035	0.000	Supported
H2	NI →T	-0.921	67.236	0.000	Supported
H3	T →RI	0.506	4.871	0.000	Supported
H4	NI→T →RI	-0.466	4.918	0.000	Supported

Source : Data Processed, 2025

H1 shows a path coefficient of -0.862 between Negative Information and Repurchase Intention, suggesting a very strong inverse relationship. This finding validates the foundational claim that adverse information critically damages consumer intent in the context of traditional medicine [24], [25].

H2 presents an even stronger negative path coefficient (-0.921) from Negative Information to Trust. This affirms that exposure to negative content about safety, regulation, or efficacy significantly undermines the trust consumers hold in these products highlighting the vulnerability of traditionally trusted products in a digital information environment [26].

H3 reveals a positive path coefficient of 0.506 from Trust to Repurchase Intention, indicating that trust is not only a consequence of negative information but also a key antecedent of future behavior. This supports the theory that behavioral intentions are significantly shaped by cognitive trust [27], [28].

H4 confirms that trust partially mediates the relationship between Negative Information and Repurchase Intention, with a path coefficient of -0.466. This mediation effect demonstrates the central role of trust erosion in explaining how negativity leads to behavioral withdrawal a finding that enhances the theoretical depth and practical implications of the model [29], [30].

d) Discussion

Descriptive Analysis Result

The findings from the descriptive analysis revealed that a substantial majority of respondents reported high exposure and receptiveness to negative news surrounding traditional medicine, especially when this information originated from credible sources or achieved viral dissemination on social media platforms. Notably, reports regarding hazardous materials in traditional medicines were prevalent, indicating significant concern among consumers. Specifically, frequent exposure to negative news was reported by 65.2% of the participants, reflecting the pervasive nature of such content within the media landscape. This prevalence indicates a growing societal focus on the safety and efficacy of traditional remedies.Furthermore, trust in the credibility of negative news reached a notable 68.6%, which underscores the amplifying effect that perceived trust in the source has on message acceptance. This suggests that when consumers perceive a news source to be reliable, they are more likely to internalize negative information effectively. Awareness of issues related to hazardous materials was reported by 44.9% of respondents, while the virality of such negative news came in at 45.4%, showing that harmful narratives resonate widely and are readily disseminated. The role of digital communities in perpetuating these concerns is highlighted by the 37.2% of participants who acknowledged awareness of negative information shared in online groups. Collectively, these findings indicate that negative information surrounding traditional medicine is highly visible and influential, particularly when conveyed through trusted or viral channels.

In assessing consumer trust, the results notably demonstrate that negative news significantly undermines public confidence in the efficacy, quality, and safety of traditional medicine products. A considerable portion of respondents expressed skepticism toward both producers' integrity and broader institutional oversight. Specifically, 42.5% of participants noted a reduced belief in product benefits, and 48.3% reported a decline in trust regarding product quality. Concerns extend beyond just the product; 40.6% of respondents indicated diminished brand trust, while 42.5% expressed doubts about the manufacturers' quality assurance processes. Alarmingly, a systemic distrust towards regulatory bodies was illustrated by 58.5% of respondents expressing low confidence in government regulation and 54.6% voicing skepticism regarding institutional oversight. This indicates a broader crisis of confidence in the regulatory framework governing traditional medicines. Furthermore, heightened awareness of health risks endorsed by 58.9% of respondents, and concerns over potential side effects, which were noted by 50.7%, suggest that exposure to negative information has fostered a climate of increased vigilance and risk awareness among consumers. Even previous positive experiences with traditional medicines are overshadowed, with 42.5% of respondents acknowledging the detrimental impact of bad news despite having benefited from them in the past.

Overall, it appears that consumer trust in traditional medicine is highly susceptible to damage from negative media representations, particularly when compounded by skepticism towards regulatory entities. The ramifications of this erosion in trust are substantial in terms of purchase intention. Negative news significantly influences future buying behavior, with 52.2% of respondents indicating a decline in their

intention to make future purchases of traditional medicine. This is further reinforced by 55.6% of respondents searching for alternatives due to perceived risks, with 52.7% considering other products as well. Family and friends play a pivotal role in reinforcing consumer hesitation, as noted by 60.4% of participants influenced by their close social circles in their buying decisions. This erosion of brand loyalty is evident; 52.7% of respondents expressed diminished loyalty, 51.7% showed hesitancy to repurchase, and 48.3% reported reluctance to reuse traditional medicine products. These findings collectively underscore the depth of the impact that trust breaches can have on consumer behavior and the long-term commercial implications for the traditional medicine industry.

Hypothesis Finding Result

The hypothesis testing findings of this study present compelling evidence regarding how the presence of negative information can erode trust and subsequently alter consumer behavior within the traditional medicine market in Indonesia. The structural model analysis yielded support for all four hypotheses (H1–H4), providing empirical evidence that aligns with established theoretical expectations derived from consumer behavior and trust theory. Specifically, hypothesis H1 shows a statistically significant negative path coefficient of -0.862 between negative information and repurchase intention, offering urgent insights into the vulnerability of consumer loyalty in the face of harmful or controversial information. Especially in an industry where traditional medicine usage intertwines with cultural practices, the prevalence of negative narratives emerges as a critical disruptor, corroborating findings from previous literature on negativity bias, which posits that negative information has a more significant psychological impact than positive or neutral content [8]. For Indonesian consumers, who often view jamu as an emblem of cultural heritage, the intrusion of negative media coverage regarding safety scandals or contamination incidents can create cognitive dissonance, challenging their beliefs about traditional medicine amidst modern health anxieties [1] Consequently, the immediate behavioral response to such dissonance is a withdrawal from repeat usage, even in cases where individuals have previously benefited from these products.

This reveals that consumer behavior, particularly the intention to repurchase, is not solely shaped by product characteristics but by the broader informational environment surrounding these products. The stronger effect demonstrated in H2 (-0.921) emphasizes the fragile and affective nature of trust. Trust in traditional medicine is established over generations through cultural reinforcement and individual experiences, yet findings reveal how rapidly this trust can dissipate when confronted with perceived failures in safety or efficacy, aligning with Mayer et al. (1995) model of trust, which asserts that trust is contingent upon perceived ability, benevolence, and integrity of the provider. Negative information highlighting regulatory failures or unethical practices directly challenges these pillars of trust, leading to psychological retreat and diminished belief in the product. [32].Furthermore, hypothesis H3 supports the central role of trust as a driver of consumer behavior, with a path coefficient of 0.506 illustrating a positive relationship between trust and repurchase intention. This correlates with Ajzen's Theory of Planned Behavior, which identifies attitude represented as trust as a critical precursor to behavioral intention. Trust serves as a psychological enabler: consumers are more inclined to engage in repeat purchases when they have faith in the safety and efficacy of traditional medicine. Particularly within traditional medicine, trust compensates for the absence of formal clinical validation. Consequently, consumers tend to rely heavily on relational networks and brand narratives when making purchasing decisions [33].

In the final analysis, hypothesis H4 indicates that trust partially mediates the relationship between negative information and repurchase intention (path coefficient = -0.466). This mediation suggests an intricate pathway through which information influences behavior, indicating that the relationship is not strictly linear. Trust functions as both an emotional and cognitive intermediary; when disrupted by negative information, the route toward sustained loyalty becomes jeopardized [11]. The mediation highlights the complexity in consumer behavior, suggesting that variables such as perceived health risks, brand reputation, and peer influence may contribute to intention formation. Nevertheless, the pivotal role of trust establishes its critical importance in contemporary marketing strategies and consumer decision-making paradigms.

IV. CONCLUSION

This study demonstrated that negative information significantly undermined consumer trust and reduced repurchase intentions in the traditional medicine market in Indonesia. Despite jamu's deep cultural roots and perceived health benefits, exposure to adverse narratives—especially those perceived as credible or viral had a strong effect on consumer psychology. Trust in product quality, brand reputation, and institutional oversight diminished considerably, and this erosion of trust played a key mediating role in discouraging repeat purchases.The results of the PLS-SEM analysis confirmed all hypothesized relationships. Negative information directly and negatively impacted both trust and repurchase intention. Trust, in turn, had a strong positive effect on repurchase intention and partially mediated the influence of negative information. These findings align with the Theory of Planned Behavior and trust deterioration models, reinforcing the centrality of trust in shaping consumer behavior within vulnerable and culturally embedded product categories.This research also highlighted the psychological and social mechanisms behind consumer responses to online health narratives. Consumers particularly those who are digitally literate, educated, and embedded in social media ecosystems proved highly susceptible to risk amplification through shared content, media framing, and informal networks. Even consumers with previous positive experiences reported reduced confidence when exposed to negative news, reflecting the strength of negativity bias in shaping perceptions and choices.These insights underscore the importance of maintaining trust in traditional health sectors amid digital scrutiny. They suggest that producers and policymakers must develop proactive strategies to safeguard reputation, maintain transparency, and engage directly with digitally informed consumers in culturally resonant ways.

V. IMPLICATION

Theoretical Implications

This study contributes to the theoretical development of consumer trust and behavioral intention by integrating the Theory of Planned Behavior (TPB) with trust deterioration frameworks in the context of traditional medicine. It extends TPB by demonstrating how negative information particularly when perceived as credible and viral can disrupt established attitudes and weaken behavioral intentions, even in culturally embedded product categories. The findings also reinforce the concept of *negativity bias*, showing that adverse narratives have a disproportionately strong influence on trust erosion compared to positive experiences. Furthermore, the study empirically validates trust as a mediating variable, offering a nuanced understanding of how cognitive and affective responses to information shape consumer behavior. This enriches the literature on trust dynamics by highlighting its vulnerability in high-risk, low-regulation markets such as traditional medicine, and opens new avenues for exploring trust resilience and repair mechanisms in future research.

Practical Implications

For practitioners, the findings underscore the urgent need for proactive reputation management in the traditional medicine industry. Producers should prioritize transparency, implement rigorous quality control, and communicate clearly about product safety to counteract the effects of negative publicity. Digital monitoring tools can help detect emerging narratives early, allowing timely responses before trust deteriorates. Regulatory bodies must also enhance public communication regarding enforcement actions and safety standards to rebuild institutional trust. Additionally, marketers should leverage trusted community figures and peer networks to reinforce positive brand perceptions, especially since social influence was shown to amplify the impact of negative information. These strategies are essential not only for maintaining consumer confidence but also for ensuring long-term brand loyalty in an increasingly skeptical and digitally connected marketplace.

VI. LIMITATION

While the study provided robust empirical evidence, it carried several limitations. The data were collected cross-sectionally, capturing consumer perceptions at one point in time. This limits the ability to observe changes over time or establish causality with longitudinal precision. Moreover, the sample, though

diverse geographically, was skewed toward highly educated respondents and government employees, which may not fully reflect the broader population of traditional medicine users. The use of self-reported measures may also introduce biases such as social desirability or recall inaccuracy. Future research could address these limitations by employing longitudinal or experimental designs, expanding to underrepresented demographics, and integrating qualitative methods to capture deeper nuances in trust formation and resilience.

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