

CHAPTER I

INTRODUCTION

1.1 Research Background

Indonesia is the fourth most populous country behind China, India, and the USA. According to a recent publication from the Central Bureau of Statistics (BPS) (2022), in 2021, as shown in table 1.1, Indonesia's population will be around 272.68 million, and the growth rate will be 1,22% from 2020 - to 2021. Within a year, Indonesia's population increased by 2.4 million, and approximately the daily growth is around 6,791 people.

Directorate General of Population and Civil Registry (Ditjen Dukcapil) (2021) recorded the number of baby births as many as 501,319 from November 2020 to February 2021. It means approximately 4.000 babies are born daily in Indonesia, and the potential market for the baby product is high.

Table 1. 1 Population of Indonesia

Population (thousand)		Annual Population Growth Rate %	
2020	2021	2010-2020	2020-2021
270,203.9	272,682.5	1.25	1.22

Source: (Badan Pusat Statistik, 2022)

Children are assets, heirs, and the next generation of the nation. Therefore, children are expected to grow and develop healthy so that later they can grow into physically, mentally, socially, and emotionally healthy adults. Thus children can achieve optimal development with their potential and become

quality human resources (Permono, 2013). Therefore, child health problems need attention from parents and the government.

Despite the high growth rate, the Central Bureau of Statistics (BPS), as published in Databoks (2021), recorded that in 2020 mortality rate of children below five years old will reach 28,158 people. The highest mortality occurred in neonatal (0-28 days), with 20,266 or 71.97%. 5,386 or 19.13% of mortality occurred between ages 29 days to 11 months. Meanwhile, 2,506 or 8.9% of mortality occurred at age 12 to 59 months.

27,4% of mortality of neonatal in Indonesia is caused by asphyxiation. Meanwhile, the Institute for Health Metrics and Evaluation data shows that asphyxiation and neonatal trauma are the fourth largest causes of toddler death, as shown in figure 1.1 (Databoks, 2019).

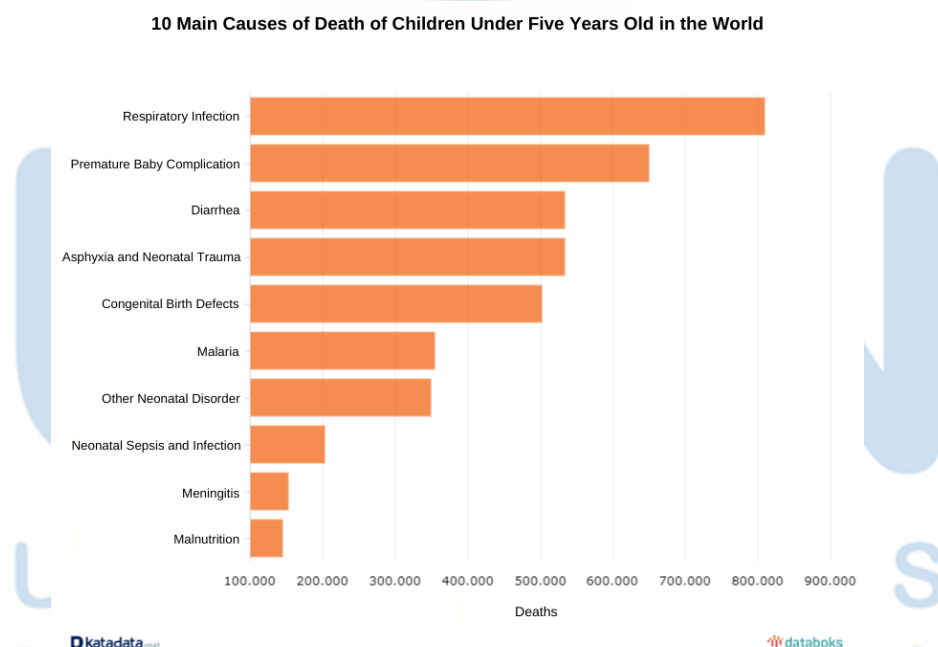


Figure 1. 1 10 Main Causes of Death of Children Under Five Years Old in the World

Source: (Databoks, 2019)

An article from WebMD (2021b) mentions that it is called asphyxia, when the body does not obtain enough oxygen to keep from passing out. Suffocation, which occurs when something heavy covers the face or chest and stops a person from breathing, is one of the causes of asphyxia. It can also happen if a person is in a situation where oxygen is scarce, like a cramped, airtight environment (WebMD, 2021a).

Many people are unaware that carrying a baby in the wrong position can cause suffocation—especially when carrying a baby in the cradle position using a traditional sling or, in Indonesia, known as *jarik*. Carrying a baby is common in Indonesia, but unfortunately, the technique is not entirely safe.

According to the U.S Consumer Product Safety Commission (2010), 12 of the 14 deaths were reported from infants' slings in children younger than four months old. Due to weak neck muscles, babies cannot control their heads in the first several months. As a result, a sling can press on a baby's nose and mouth, obstruct the baby's breathing and quickly strangle the baby within a minute or two.

Carrying a baby has been done centuries ago and passed down from the previous generation. Hence, the traditional sling that has been used for generations in Indonesia is called *jarik*. Based on Mu'minah & Nugraha (2021), *kain jarik* or *kain batik* is mainly used as a hip cloth worn by men and women. Most of the *kain batik* size is 2x1 meter and has been commonly used by Javanese people for a long time.

Jarik might be easy to use and versatile. However, using *jarik* for a long time might make the shoulder sore. The traditional way to use a *jarik* is to tuck and slip it on the shoulder. However, *jarik* with the tuck and slip technique might not be safe, especially for babies. The fabric might come off easily, so the baby can fall easily. For young parents, especially millennials, it is not easy to use *jarik* this way. It looks easy to wear, but since the mobility of millennial parents these days and no maid, babysitter, or relatives can help them look after the baby, they need carrying aids that can help them multitask. In addition, they need both hands free to easily do the house chores or work from home in this pandemic era.

Carrying may seem trivial and very easy. In the past, sling products were not as diverse as today. With just a piece of *selendang* or *jarik*, a mother can carry her child safely and comfortably. In this modern era, there are many choices of the carrier. However, innovation is not always positive. Innovations that are not based on science can be dangerous too. The main thing to note when carrying is safety. Safety comes first because it relates to a child's safety and life. When carrying a baby, we need to avoid two things: suffocation and fall hazards.

According to UK Sling Consortium (2012), to avoid suffocation and fall hazard, there are five things we should pay attention to: (1) T: Tight - Sling should be tight enough to hold the baby. Something saggy can cause the baby to fall from the sling or be immersed in it (2) I: In View at All Times – The child's face should be consistently and easily visible. This is because the

material or sling cloth does not cover the child's face, so it can block the child's airway. Furthermore, it is easier to check the child's airway (3) C: Close Enough to Kiss - The top of the baby's head is close enough to the face of the parent's mouth/chin so that we can quickly kiss our child. This position is also a benchmark for how low or high our child should be carried (4) K: Keep Chin Off the Chest - When in a sling, the baby's chin should not stick to his chest (5) S: Supported Back - When carried in an upright position, the baby's back must always be supported or supported by a good sling without us always having to hold the child's back (hands-free). That means the sling must always be tight. Because if the sling is too saggy, the baby's back is not supported.

In addition to TICKS rules, there are two other things to note when carrying: upright position and legs forming M-Shape. The position of an M-Shape or spread squat position or triad is closely related to preventing hip dysplasia in infants. According to International Hip Dysplasia Institute (IHDI) (n.d.), hip dysplasia is a condition in which the baby's femur socket does not stick or is not in its supposed position. This condition will result in unbearable pain and cause the child difficulty walking and disability for the rest of his life.

Although now there are still many parents who use *jarik* as the main sling to hold the baby, modernization in Indonesia to various types of slings is inevitable. In Westernized cultures, the babywearing term describes the practice of carrying an infant using a soft cloth carrier (Williams & Turner, 2020). William Sears, a pediatrician, first introduced Babywearing terms as part of attachment parenting principles (Sears & Sears, 2010). In modern society, baby

carriers have evolved from a traditional sling into a backpack from soft cloth and use webbing and buckle as an adjuster (C. Y. Wu et al., 2017). Appendix A illustrates that the backpack-style carrier can be divided into the soft structured carrier (SSC), hard structured carrier, and hip seat carrier. There are two kinds of soft structured carriers: wide-based and narrow-based carriers. The wide-based carrier is the most recommended baby carrier by babywearing consultants, so this baby carrier will be the object of this research.

A preliminary survey has been done in an online babywearing community on Facebook called “Babywearing Indonesia.” Polling asked one question “What if you can choose only one baby carrier that will help you nurture the baby while you multitask with other chores? What kind of baby carrier did you choose? Let’s say all the baby carrier price is the same, and everyone can afford it, but you only can choose one.”

In less than 16 hours, 2.754 members voted for Soft Structured Carrier (SSC), and 668 voted for *jarik*. Based on the polling answer, they choose SSC because it is practical, easy to use, and safe. The baby weight can distribute evenly to both shoulder, waist, and back, while when using *jarik*, the baby weight is only distributed to one shoulder. In addition, parents can carry their baby for a long time without quickly feeling sore around the shoulder, and both hands are free. However, when scrolling down to the comment section, many do not have any SSC. They said they do not have the SSC, but if they can only choose one without considering the price, they would love to have it.

However, this poll is also biased because it is carried out in the ergonomic carrying community. Indeed in the group, there is often education about how to carry the right one. Based on an interview conducted by the author at the XYZ sling company in July 2021, which is one of the largest manufacturers of baby slings and carriers and various baby products in Indonesia, it is stated that the Hip Seat carrier product is still occupying the top position of the best-selling carrier.

Based on a search conducted by the author in online marketplaces such as Shopee, Tokopedia, and Lazada, when searching with the keyword "baby carrier," the results were dominated by hipseat carrier. Unfortunately, SSC is only popular in certain communities where education or risk communication has been carried out on the community by Babywearing Consultants (BWC) or Babywearing Educators (BWE).

BWC and BWE might be strange or unfamiliar to most people in Indonesia. Even though carrying a baby has already become a tradition, most parents still need a babywearing consultant. School of Babywearing UK is one of the babywearing schools that train babywearing consultants by giving courses. The certificate is accredited by TQUK, one of the UK's vocational accreditation bodies. Becoming a BWC means they can help other parents experience babywearing most safely. They give proper education, spread awareness about the basic safety of babywearing, and empower other parents beyond carrying a baby.

The emergence of BWC in Indonesia in 2017 has become a game-changer in the babywearing community in Indonesia. However, there is no safety standard about how baby carriers in Indonesia should be made. Even SNI or Indonesian National Standard is still unaware of the danger of baby carriers. SNI only regulates the standard of fabric that can be used for infants up to 3 years but has not regulated the overall aspects, especially the safety and strength of the baby carrier (Badan Standarisasi Nasional, 2016).

Countries like Europe and America have long set baby carriers' safety standards. For example, EN 13209-2:2015 regulates European soft carriers' safety requirements and test methods. Then in America, ASTM International also regulates the standard consumer safety specification for Soft Infants and toddler carriers through ASTM F2236-16a.

The United States Consumer Product Safety Commission (2008) mentions that it is very important to standardize the infant and toddler carrier to reduce the risk of deaths and injuries due to the use of soft infant and toddler carriers, such as those caused by caregiver falls, infant falls from carriers, or carrier structural and design issues.

In Europe, around 2015, there was a report that carrying a baby, not in the correct position can cause SUDI (Sudden Unexpected Death Infancy) (Bergounioux et al., 2015). In addition, the report said, carrying a baby in a cradle might cause asphyxiation (suffocation). Although however, *jarik* is not a dangerous carrier. We need to pay more attention to the safety of carrying a baby.

In Indonesia, there is no official report regarding the accident while using baby carrier, so it is hard to claim that some baby carrier is unsafe. Nevertheless, the founding story of Bayiku.id, an SSC manufacturer based in Malang, East Java, is from the falling experience of the CEO while carrying her firstborn using a cheap and unqualified baby carrier which is freely sold in the marketplace and offline store. The unqualified material can cause a broken buckle and stitches, which is very dangerous while carrying the baby. Unfortunately, the accident story on the baby carrier never been recorded officially by the government and only become a sad story on social media.

Nowadays, baby carrier manufacturers consider the babywearing consultant's profession essential. Manufacturers often work with a babywearing consultant to give honest reviews about the babywearing product and educate people on how to safely and adequately use the baby carrier. In addition, a babywearing consultant is responsible for becoming a role model about how parents should take serious notes about babywearing because babywearing is not only about carrying a baby. Babywearing has a more significant impact beyond calming the baby.

In Indonesia, there is no institution responsible for the safety of baby carriers. Even though Indonesia has Indonesian National Standard (SNI), there is no safety test for the baby carrier at SNI. SNI only provides testing to the textile materials only. Because of that, there is fear in society if the baby carrier produced in Indonesia is safe and recommended for the baby's development. For that reason, most baby carrier manufacturers in Indonesia send the baby

carrier to a babywearing consultant to be checked and tested. Unfortunately, the babywearing consultant does not qualify to declare that the baby carrier is safe. However, the manufacturer trusted babywearing consultants because they have better knowledge than general parents since they have finished their study in babywearing and have certification.

In addition, babywearing consultants also play a role in communicating the risks that may arise from the mistake of using a baby carrier to mothers who still do not have enough knowledge, especially millennials who do not have enough experience. Pew Research Center defines Millennials as anyone born between 1981 and 1996 (Dimock, 2019). Central Bureau of Statistics Indonesia (BPS) also uses those measurements to define millennials. In 2022, the oldest millennials are now around 40-41 years old, and the youngest is around 25-26. Based on data from the Central Bureau of Statistics Indonesia, millennials are now the second largest population, with 25,87% in Indonesia. On the other hand, the first most significant population in Indonesia is Gen Z, with 27,94% (Badan Pusat Statistik, 2020). However, millennial parents now dominate Indonesian society in terms of parenting, and this group will become the respondent for this research.

Millennials have always been defined as the tech-savvy generation. For example, nine out of ten millennials in America own smartphones (Vogels, 2019). Millennials are also the leading generation who use social media. So, one way to educate millennial mothers about babywearing safety is by using social media and taking a risk communication approach, increasing public

awareness of potential health hazards and threats so that they can decide on protective measures.

There were 202.6 million internet users in Indonesia in January 2021 and 170 million social media users (Kemp, 2021). Jaafar et al. (2017) state that social media facilitates access to medical and health-related information. Furthermore, Zhao and Zhang (2017) claim that social media is an effective platform for patients to receive health information and seek advice and assistance from other users.

According to the research, Li et al. (Barua et al., 2020) reported that over 70% of adults use the internet to look for health-related information. However, according to the Indonesian Telecommunications Society, over 40% of hoax news items circulating in Indonesia in 2019 were about health (Puspitasari & Firdauzy, 2019).

The increase of health-related hoaxes, particularly during the pandemic, concerns Indonesians who actively seek health-related information on social media. Much prior research has found that men and women seek health information differently. Because women also seek health information for their children and other family members, women are the primary health information seekers in households (Deng & Liu, 2017).

In health communication, individuals with high-risk perceptions are more likely to engage in health-protective behavioral objectives to avoid risk. (Shim & You, 2015). Therefore, risk communication that is routinely displayed will increase risk perception. In this sense, providing risk information can be

extremely effective in modifying risk perception, with subsequent changes in risk behavior due to the impact of risk perception (Gerrard et al., 1999). So it is expected that millennial mothers understand well about babywearing safety and choose the right and safe baby carrier for their babies. In addition, risk communication also impacts the perception of people's behavioral control, leading to their actions (Liem et al., 2020). In addition to the above factors, subjective norms are external factors that can influence behavior, whereas personal impressions of societal pressure to perform or not perform a behavior are referred to as subjective norms (Susanto et al., 2022).

Research conducted by (Abrams & Greenhawt, 2020; Adiyoso & Wilopo, 2021; Heydari et al., 2021; Liem et al., 2020; Mushi et al., 2021) tested cases of community preventive behavior from the spread of the Covid-19 virus based on risk communication, risk perception, perceived behavioral control and norms.

However, a very limited study has been conducted on purchase intention for a baby carrier. Research by Constantinescu-Dobra & Cotiu (2017) used a focus group exploratory study as the research method. The study explores the buying decision-making process of generation Y mothers in Romania. Some factors influencing the buying decision of baby carriers are quality, discount, purposes, and trend-setting loyal. In general, generation Y is savvy consumers who rely on technology for their decision-making process, and in this study, all the respondents rely on the internet as the remaining information source.

Finally, this study is expected to contribute both practical and academic by looking at how risk communication approaches are run to shape risk perception and perception of behavior control of millennial mothers that led to their decision to buy a Soft Structured Carrier (SSC) for the safety and security of their babies.

1.2 Problem Formulation

Based on the explanation above, the following is the formulation of the problems in this study:

1. Does Risk Communication have a positive effect on the Purchase Intention of Soft Structured Carrier (SSC)?
2. Does Risk Communication have a positive effect on the Perceived Risk of Soft Structured Carrier (SSC) usage?
3. Does Perceived Risk have a positive effect on the Purchase Intention of Soft Structured Carrier (SSC)?
4. Do Subjective Norms have a positive effect on the Purchase Intention of Soft Structured Carrier (SSC)?
5. Is Perceived Risk able to mediate the relationship between Risk Communication and the Purchase Intention of Soft Structured Carrier (SSC)?

1.3 Research Objectives

This study aims to examine, analyze and reveal the factors that affect the interest in purchasing Soft Structured Carrier (SSC) in millennials mothers in the Jabodetabek region with the following details:

1. To find out the direction and magnitude of Risk Communication influencing purchase intention of the soft structured carrier (SSC).
2. To determine the direction and magnitude of Risk Communication in influencing Perceived Risk of Soft Structured Carrier (SSC) usage.
3. To determine the direction and magnitude of Perceived Risk in influencing the Purchase Intention of Soft Structured Carrier (SSC).
4. To determine the direction and magnitude of Subjective Norms in influencing the Purchase Intention of Soft Structured Carrier (SSC).
5. To determine the direction and the role of Perceived Risk in mediating the relationship between Risk Communication and Purchase Intention of Soft Structured Carrier (SSC).

1.4 Research Benefits

1.4.1 Theoretical Benefit

The limited of previous research discussing purchase intention on the baby carrier has prompted researchers to adopt the role of related variables to be tested in case studies of baby carrier buying behavior based on preventing accidents in carrying a baby due to the lack of safety in a child's sling. In addition, the thing that concerns the next researcher is the lack of testing using

the SEM-PLS method. Considering that the model used in this study is a development model from previous research, researchers chose to use SEM-PLS instead of CB-SEM. In addition, the next update is to test the role of mediation of perceived risk in encouraging public buying interest. So, it is expected that this research can make an academic contribution by expanding the existing research boundary.

1.4.2 Practical Benefit

This research is expected to contribute to Indonesia's babywearing community by confirming whether the risk communication conducted by babywearing consultants or baby carrier manufacturers on social media has a significant influence, especially in influencing people to purchase a baby carrier. Also, educating the consumer about babywearing safety and baby carriers should add more benefits for manufacturers. Furthermore, sling and carrier manufacturers can re-examine their marketing strategies from this research. In addition, this study is also expected to provide recommendations and study materials for the government to give more attention to the industry regarding the safety of the baby product, especially baby carrier products, to reduce the mortality rate that might cause by the use of the baby carrier.

U N I V E R S I T A S
M U L T I M E D I A
N U S A N T A R A