

CULINARY TRADITIONS AND HEALING CHOICES: EXPLORING THE INFLUENCE OF PROPHETIC FOODS ON TREATMENT PREFERENCES IN KUANTAN

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Abstract

Background: While many Muslims in Malaysia adhere to the dietary habits of the Prophet Muhammad due to their perceived health benefits and religious significance, a significant proportion of Malaysian adults (approximately 23.3%) who report being ill tend to resort to self-medication rather than seeking professional treatment. This raises the question of whether the practice of self-medication among this group is influenced by their adherence to the dietary habits of the Prophet Muhammad, suggesting a potential link between dietary choices and healthcare decision-making in this context. **Objective:** This study examines the correlation between frequent consumption of prophetic foods and treatment preference. **Methods:** A total of 229 adults aged between 20 to 60 years old from Kuantan were selected for this quantitative cross-sectional study. The participants were recruited through Google Docs and online platforms using convenience sampling. The data collected was analysed using SPSS version 26.0 and presented in tables and diagrams based on a scoring guide. **Results:** Out of the total population surveyed ($n=115$), 50.2% consumed prophetic food in moderate amounts. The p -values indicate that the association between the level of prophetic food consumption and the preference for treatment-seeking is not statistically significant ($p>0.05$). The level of prophetic food consumption among the Kuantan population is influenced by factors such as religious belief, health benefits, taste and market availability. However, the majority of the population still prefers conventional healthcare providers for treatment. Factors such as the availability of services and facilities, accessibility to healthcare providers, and delivery of information from physicians impact the Kuantan population's treatment-seeking preference. **Conclusion:** While there is a significant preference for prophetic foods in Kuantan, this dietary choice does not appear to limit the utilization of conventional treatment options, suggesting that individuals may balance both aspects in their pursuit of health and well-being. Further research is required to explore the nuanced factors contributing to this coexistence.

Keywords: Prophetic Foods, Sunnah, Treatment Preference, Dietary Habit, Kuantan

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INTRODUCTION

As a religion, Islam encompasses all aspects of life and places high importance on maintaining good health and well-being. To achieve optimal health, one needs to consider several factors, including food intake, which can have a direct impact on one's emotional, physical, and spiritual well-being. In line with this, Muslims are encouraged to consume halal foods, which are permissible under Shariah Law. This not only keeps the heart pure and the mind sound but also nourishes the body and spirit. Muslims are trained to make informed choices about their food by selecting halal, nutritious, and reasonable options.

Allah SWT mentioned in chapter 2 of the Quran, verse 172, “O you who have believed, eat from the good things which We have provided for you and be grateful to Allah if it is [indeed] Him that you worship.” Allah SWT ordered Muslims to eat the healthy foods that The Almighty gave for humanity, alluding to the whole, pure and clean foods. The Prophet Muhammad (peace be upon him) serves as an exemplary role model for Muslims, demonstrating the importance of maintaining a healthy physical, emotional, and mental state. Muslims are encouraged to follow his teachings and apply them in their daily lives. The Prophet's guidance on various aspects of life, including diet, provides valuable principles for society. The prophetic foods he recommended cover all areas of nutrition, health, and human psychology, making them a comprehensive guide for a healthy lifestyle.

Prophetic foods or Sunnah foods, are foods that are validated in Quranic verses, and prophetic traditions (hadith) and have been shown to have numerous benefits. Prophet Muhammad PBUH recommended these foods for Muslims to live a better and healthier lifestyle. The term "Prophetic food" specifically refers to the best meals that meet the body's sanitary standards, the food revealed in the Quran and Hadith, and the food that Prophet Muhammad PBUH consumed (Khadher Ahmad, Zulkifli Mohd Yusoff, Mohd Farhan Md Ariffin, Munirah Abd Razzak, 2015). Some of these are mentioned in the hadiths, such as olives, dates, honey, pomegranates, grapes, and figs. The Prophet Muhammad also preferred honey, yoghurt, barley, dates and grapes (Ahmed I. A et al., 2017). Some of these prophetic foods have been proven in studies providing benefits to health (Table 1).

Table 1: The Benefit of Prophetic Foods

Prophetic Food	Benefit
Honey	Improve body immunity and general well-being due to its anti-inflammatory properties (Dolezal & Toth, 2018)
Black cumin	Improve body immunity due to its antibacterial, antifungal, anti-inflammatory, antioxidant and anticancer properties (Yusof et al., 2018)
Dates	Improve the quality of breast milk that rich in nutrients and vitamins (Saryono et al., 2016)
Raisin	Promoting colonisation and proliferation of good bacteria such as <i>Lactobacilli</i> sp. in intestines (Olmo-Cunillera et al., 2020)

It is important to consume prophetic foods for early prevention at all times. Some people refuse to undergo rehabilitation or delay medical procedures, prioritizing the consumption of sunnah-food items. This can be dangerous and extreme, as some patients believe that these foods alone are safe and can replace modern medicine for treating sickness. As a result, they stop taking contemporary medication prescribed by their physician. Additionally, some people believe that vaccines are irrelevant for preventing or treating Covid-19, and instead rely solely on prophetic food to prevent the disease's symptoms from worsening, rejecting the vaccination altogether (Norkumala Awang, 2020). While many Muslims in Malaysia adhere to the dietary habits of the Prophet Muhammad due to their perceived health benefits and religious significance, a significant proportion of Malaysian adults

(approximately 23.3%) who report being ill tend to resort to self-medication rather than seeking professional treatment (Mohd Noh et al., 2022).

This raises the question of whether the practice of self-medication among this group is influenced by their adherence to the dietary habits of the Prophet Muhammad, suggesting a potential link between dietary choices and healthcare decision-making in this context. This study aims to investigate the potential link between dietary choices rooted in religious beliefs and the propensity for self-medication, thereby addressing a critical gap in understanding the interplay between faith-based dietary practices and healthcare decision-making in the Malaysian context.

MATERIALS AND METHODS

A) Study design

A quantitative cross-sectional study was carried out through an online survey among the residents of Kuantan, Pahang. The study was conducted using Google Docs and lasted from December 12th, 2020 to January 12th, 2021. Participants were selected from residents who lived within a 30km radius of the International Islamic University Malaysia (IIUM) in Kuantan, Pahang. A total of 229 participants were successfully recruited for the study.

B) Sampling

To be eligible for this study, participants had to be Muslim citizens of Kuantan between the ages of 20 and 60, capable of understanding Malay, with prior experience consuming prophetic food and seeking treatment. Individuals who were terminally ill, unconscious, and mentally unstable.

C) Study Instrument

This instrument was taken and adopted from a questionnaire from a study Syazana et al. (2016) and Ministry of Health. The questionnaire was divided into 3 major parts which are:

Part A: Sociodemographic data including the age, race, marital status, educational level, occupational status, household income category, and a number of household dependents.

Part B: The knowledge and practice of prophetic food consumption. The questions were regarding the types of prophetic food taken, the frequency of consuming prophetic food and reasons for consuming prophetic food.

Part C: Treatment seeking preference. The questions were regarding the tendency of seeking modern treatment. Part B and Part C will be done in Likert Scale.

For validating and reliability, the instrument was examined by three experts using Content Validity Index (CVI) for its clarity and tested with Cronbach's alpha.

D) Data Analysis

The collected data were analyzed with Statistical Package for the Social Sciences (SPSS) version 26.0. The sociodemographic details were tabulated in frequency and percentage. To check the normality of the variables, the Shapiro-Wilk test was performed, which showed that the p-value of the variables is less than 0.05. As a result, it can be concluded that the variables are not normally distributed.

RESULTS

The data of the study participants' sociodemographics are presented in Table 2. Out of the Kuantan population, 229 citizens participated in the study, which corresponds to 59.64% of the total sample size of 384. The majority of the participants (n=145; 63.3%) fall between the age range of 20 to 29 years. Female participants (n=179; 78.2%) outnumbered their male counterparts (n=50; 21.8%). Majority of

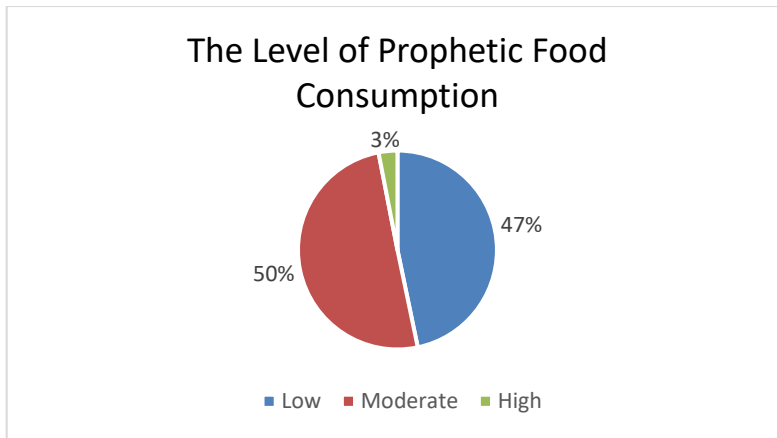
the participants were Malay (n=223; 97.4%), while Chinese, Indian and other ethnicities made up only 0.4%, 0.9% and 1.3% of the sample population, respectively.

Out of the total participants, 229 (73.8%) were undergraduate students pursuing their bachelor's degree. A significant proportion of the participants, around 54.1% (n=124), were either unemployed or students. Regarding the income groups, the number of participants from the B40 group, which includes households with an income less than RM4,849 per month, was slightly higher (n=99; 43.2%). The M40 and T20 groups had 41.5% and 15.3% of the participants respectively.

Table 2. Sociodemographic data

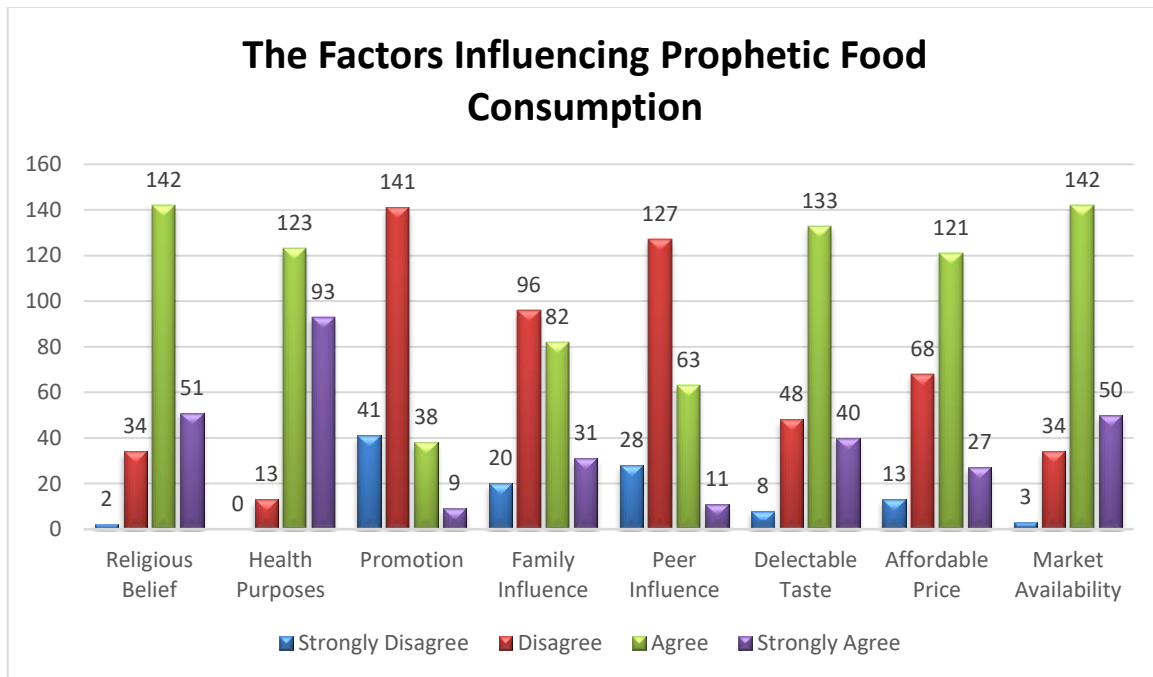
	Variables	Frequency, n (N=229)	Percentage (%)
Age	20-29	145	63.3
	30-39	20	8.7
	40-49	19	8.3
	50-59	38	16.6
	60-69	7	3.1
Gender	Male	50	21.8
	Female	179	78.2
Race	Malay	223	97.4
	Chinese	1	0.4
	Indian	2	0.9
	Others	3	1.3
Education	Secondary school	7	3.1
	Matriculation	15	6.6
	Vocational	2	0.9
	Diploma	28	12.2
	Bachelor's	169	73.8
	Master's	8	3.5
	Unemployed/student	124	54.1
Occupation	Self-employed	10	4.4
	Government employee	52	22.7
	Private employee	29	12.7
	Pensioner	14	6.1
	B40	99	43.2
Income category	M40	95	41.5
	T20	35	15.3

Graph 1 shows the frequency of the level of prophetic food consumption among the Kuantan population. The frequency of consumption of prophetic food was determined by scoring each participants' consumption frequency (*1= Never, 2= Once, 3= Once a month, 4= Once a week, 5= A few times a week, 6= Everyday*) of each mentioned prophetic food. The score was summed up (*minimum score= 10, maximum score=60*) and divided into 3 levels based on their sum of score: Low= 10-26, moderate= 27-42, and high= 43-60. According to the findings, the majority of participants consume prophetic food at a reasonable level (n= 115; 50.2%).



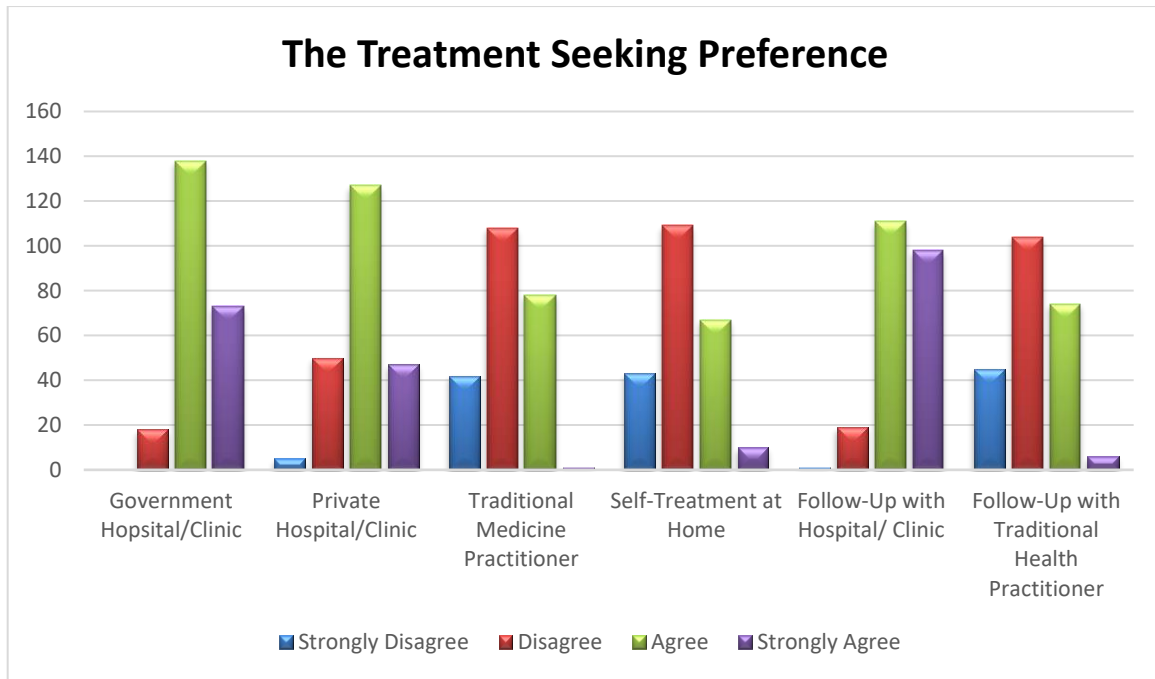
Graph 1: The frequency of prophetic food consumption

Table 2 presents the factors that influence the consumption of prophetic food. A large number of participants agree to consume prophetic food for health purposes, religious reasons and due to its wide availability in the market.



Graph 2: The factors influencing prophetic food consumption

According to Graph 3, the majority of the Kuantan population prefers seeking treatment at government hospitals (n= 138; 60.3% for inpatient and n= 73; 31.9% for outpatient) or private hospitals/clinics (n= 127; 55.5% for inpatient and n= 47; 20.5% for outpatient). Their preference for modern treatment directly influences their decision to go to a hospital or clinic for follow-up. Furthermore, most participants do not prefer traditional medical practitioners or self-treatment at home.



Graph 3: The treatment-seeking preference

Table 2 shows the association between prophetic food consumption and treatment-seeking preference. The p-value for treatment-seeking preference and prophetic food consumption is greater than 0.05. It appears there is no significant correlation between the consumption of prophetic food and the preference for treatment-seeking among the Kuantan population, based on the test results.

Table 2: The Association between Prophetic Food Consumption and Treatment Seeking Preference

Prophetic Food Consumption (N= 229)		
	Correlation coefficient	<i>p</i> -value
Government hospital/ clinic	-0.166	0.12
Private hospital/ clinic	-0.111	0.93
Traditional medicine practitioner	0.159	0.16
Home	-0.15	0.816
Follow-up with hospital/clinic	-0.093	0.159
Follow-up with traditional practice	0.057	0.387

DISCUSSION

Based on the results, the majority of participants consume prophetic food once a week or once a month at reasonable levels (n=115; 50.2%). This finding is consistent with another study that showed the majority of students from Allied Health and Islamic Studies consumed dates less than 1 to 3 times a month. Specifically, 68 (32.9%) students from Allied Health and 26 (27.1%) students from Islamic Studies reported consuming dates only 1 to 3 times a year, except during Ramadan (Wan Nudri & Nor Faizatul, 2019). Another study found that 21 out of 40 participants reported consuming dates either

only once in 6 months or never at all (Syazana Umar et al., 2016). According to the results comparison, it is evident that the study's population has low consumption of dates outside Ramadan.

The population of Kuantan has various reasons for consuming prophetic food, such as reaping its health benefits. Additionally, many individuals consume prophetic food for religious reasons, as it aligns with the traditions of the Prophet p.b.u.h, who himself ate foods like pumpkin, dates, and honey (Ahmed I. A et al., 2017). It is argued that several foods, including dates, honey, and some grains, are rich in nutrients, vitamins, minerals, and antioxidants. These foods are believed to enhance overall health and may offer specific benefits, such as improving digestion or boosting the immune system. Many studies and historical references have confirmed the link between consuming these foods and improving health (Dolezal & Toth, 2018; Olmo-Cunillera et al., 2020; Saryono et al., 2016).

Many people believe that Islam provides a solution to challenging circumstances (Mohamad Ismail et al., 2022), so Muslims often seek to emulate the Prophet's lifestyle and practices (Keshavarzi & Haque, 2013), including his dietary habits. This alignment with religious beliefs and the desire to follow the Sunnah (the Prophet's way of life) provide a strong incentive for consuming prophetic foods. In addition to religious beliefs, the Kuantan population is also influenced by taste and market availability when it comes to consuming prophetic food. Similar studies have shown that the price, taste, packaging, and availability of prophetic food are significant factors in determining whether or not participants choose to consume it (Haji Ishak et al., 2013; Hamdan et al., 2018). Access to prophetic foods in local markets and stores is vital for their consumption for health purposes. The reasoning behind this is that if these foods are readily available and easily accessible in Kuantan's markets, individuals are more likely to incorporate them in their diets for their perceived health benefits. On the other hand, if they are scarce, people may be less inclined to consume them.

A majority of the Kuantan population prefer seeking treatment from public and private hospitals or clinics, rather than traditional medicine practitioners or self-treatment at home. This was revealed in a survey, which showed that most participants agreed or strongly agreed with the preference for government and private hospitals or clinics. Conversely, a significant number disagreed or strongly disagreed with the idea of seeking treatment from traditional medicine practitioners. Furthermore, the survey found that the Kuantan population prefers follow-up treatment with doctors in hospitals or clinics, rather than traditional medicine practitioners. These results indicate a preference for conventional medicine over traditional medicine among the Kuantan population. This outcome is consistent with a similar survey conducted in a rural area of Kedah (Maung et al., 2020). According to the study, the residents of Kuantan prefer seeking treatment from clinics and hospitals rather than homoeopathy, faith leaders, or other practitioners. Moreover, the positive response towards conventional medicine has increased from the previous year. This indicates a growing preference for conventional medicine among the population of Kuantan, as compared to a previous study conducted by other researchers (Yusof et al., 2018).

Factors that contribute to treatment-seeking preference among the Kuantan population include satisfactory services and facilities, accessibility to healthcare centers, and information delivery by doctors or physicians. The government and private hospitals or clinics were found to have satisfactory services and facilities, and the Kuantan population has good access to them. However, a minority of the population had poor access to hospitals or clinics. This could be due to them living more than 20km from the nearest hospital, with no private or public transportation available from their homes. Specifically, 191 and 184 participants had good access to government hospitals or clinics and the private hospital or clinic, respectively (Yusof et al., 2018). Both government and private hospitals and clinics were able to provide clear information and explanations to the Kuantan population, as evidenced by 204 and 203 positive responses respectively. This indicates that both types of medical centers were effective in delivering important health information to the community. Clear and effective communication is of utmost importance in healthcare to ensure that patients fully comprehend their

condition and make informed decisions regarding their treatment. Positive feedback from patients can be seen as a testament to the well-thought-out communication strategies employed by hospitals and clinics, which include providing clear explanations that are easily understood by patients and the community (Ratna, 2019).

After conducting the study, it was found that there is no significant correlation between the level of prophetic food consumption and the treatment-seeking preference among the Kuantan population. The correlation coefficient value (r-value) falls between 0.1 to 0.29, which indicates a weak correlation. Additionally, the p-value of the association is greater than 0.05. Based on the p-value, the null hypothesis was accepted, indicating no association between the level of consumption and treatment-seeking preference. The results of the study have practical implications. They imply that healthcare providers and policymakers should take into account a wider range of factors while dealing with treatment-seeking behavior in the community. Merely concentrating on dietary habits might not lead to significant alterations in healthcare utilization patterns.

CONCLUSION

The consumption of prophetic food among the Kuantan population is influenced by their religious beliefs, taste preferences, the health benefits and availability of such food in the market. When it comes to seeking medical treatment, the majority of the Kuantan population prefers to visit government or private hospitals or clinics, and follow up with treatment at those facilities. The decision to seek treatment from a particular provider is based on factors such as the quality of service and facilities, accessibility to the treatment centre, and information provided by the healthcare provider. There is no correlation between the level of prophetic food consumption and the preference for treatment-seeking among the Kuantan population. Despite a significant preference for prophetic foods, the utilization of conventional treatment options is not limited, indicating that individuals are able to balance both aspects in their pursuit of health and well-being. Further research is required to explore the nuanced factors contributing to this coexistence.

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