

CONSUMER PERCEPTIONS OF MASLAHAH ON HALAL-LABELED MADURA HERBAL MEDICINE

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ABSTRACT

The background of this study is based on the fact that Madura herbal medicine is an interesting alternative treatment and is believed to be effective, as well as being Madurese local wisdom that has been trusted for generations. Therefore, consumers are faced with the choice of the maslahah and halalness of Madura herbal medicine. This study was conducted as part of the description of answers to these problems by testing independent variables using comparative quantitative methods. The population was consumers of Madura herbal medicine in Kwanyar and Modung districts, Bangkalan Regency. The sampling of the population in this study used Lemeshow's formulation because the exact number of populations was unknown,. Following the principles of research methodology, a series of data analysis stages have been carried out through questionnaire instrument testing (validity and reliability tests), data distribution normality tests (as a requirement for the t-test), and the one-sample t-test. From the test results, it is known that the perception of the consumer of the maslahah of the Madura herbal medicine is different. Halal-labeled Madura herbal medicine is perceived to guarantee more maslahah, while nonhalal-labeled Madura herbal medicine is not.

Keywords: *Consumer perception, Madurese herbal medicine, Maslahah, Halal.*

ABSTRAK

Latar belakang penelitian ini didasari oleh fakta bahwa jamu Madura merupakan pengobatan alternatif yang menarik dan dipercaya berkhasiat, serta merupakan kearifan lokal masyarakat Madura yang telah dipercaya secara turun temurun. Oleh karena itu, konsumen dihadapkan pada pilihan maslahah dan kehalalan jamu Madura. Penelitian ini dilakukan sebagai bagian dari penjabaran jawaban atas permasalahan tersebut dengan menguji variabel-variabel independen dengan menggunakan metode kuantitatif komparatif. Populasi dalam penelitian ini adalah konsumen jamu Madura di Kecamatan Kwanyar dan Modung, Kabupaten Bangkalan. Pengambilan sampel dari populasi dalam penelitian ini menggunakan formulasi Lemeshow karena jumlah populasi yang tidak diketahui secara pasti. Mengikuti kaidah metodologi penelitian, serangkaian tahapan analisis data telah dilakukan melalui uji instrumen kuesioner (uji validitas dan reliabilitas), uji normalitas sebaran data (sebagai syarat uji-t), dan uji-t satu sampel. Dari hasil pengujian diketahui bahwa persepsi konsumen terhadap maslahah jamu Madura berbeda-beda. Jamu Madura berlabel halal dipersepsikan lebih menjamin maslahah, sedangkan jamu Madura berlabel nonhalal tidak.

Kata kunci: *Persepsi konsumen, Jamu Madura, Maslahah, Halal.*

A. INTRODUCTION

One of the important things in human life is to find the best way to meet your needs. The needs of human life are not only limited to physical aspects but also non-physical aspects. Fulfilling needs (both physical and non-physical) can also be said to be an effort to maintain life. Therefore, sometimes we find people who do not pay attention to normative aspects and the principle of comprehensive benefit in consuming what they need. Sometimes, they do not even pay attention to things that are harmful to themselves to maintain their life needs, even though it is ironic and illogical.

In Islam, the fulfillment of logical needs must consider the principle of Maslahah, because among the goals of consumption in Islam is the balance between Maslahah and Utility.¹ Maslahah can be interpreted as bringing goodness in worldly and ukhrawi dimensions (material and spiritual), and sharia compliance (halal), so that all aspects do not lead to harm either individually or collectively.² This principle of Maslahah must be the foundation in the consumption of any needs, including in terms of treatment. If we do not pay attention to the Maslahah aspect, then the treatment that is attempted sometimes does not bring healing but instead brings harm, for example, the treated disease does not heal or if it is more fatal, it brings additional new diseases.

Among the interesting treatments that have been believed to be good for generations is consuming Madura herbal medicine. Because with Madura herbal medicine, in addition to being believed to be effective, it also does not cause side effects. In Madura, women have been introduced to

¹ Manilet, Aisa. *Kedudukan Maslahah Dan Utility Dalam Konsumsi (Maslahah Versus Utility)*, tahlkim , vol. 11, no. 1,2015

² Ilyas, Rahmat. *Konsep Mashlahah dalam Konsumsi Ditinjau dari Perspektif Ekonomi Islam* . Jurnal perspektif ekonomi darussalam, Vol ,1, No.1,2015,h 9-24.

herbal medicine by their parents since they were teenagers, usually beginning with a girl who just had her first period. They consume herbal medicine until they are adults,³ and in addition to many benefits such as maintaining beauty and slimness of the body, Madurese herbal medicine is also used by married women to maintain harmony in their homes. This is the local wisdom on the island of Madura.

In addition to women, many Madurese men also consume herbal medicine to maintain stamina and endurance, as well as to strengthen immunity considering the heavy activities carried out by most Madurese men. Along with the development of the era and the openness of information, the process of introducing Madurese herbal medicine to other regions outside of Madura Island has become known to people outside of Madura Island. Until now, Madura has been synonymous with herbal medicine for household harmony.

Based on a brief description of the two things above, that Madura herbal medicine are already well-known for treatment and effective, but the fact is that many of them are not certified halal, which raises questions about their Maslahah. So, as a lecturer and researcher I want to study the consumer perceptions related to Maslahah in this Madurese herbal medicine product. Our study is entitled Comparative Analysis of Consumer Perceptions of the Maslahah of Halal-labeled and Nonhalal-labeled Madura Herbal Medicine (Study on Consumers of Madurese Herbal Medicine in Kwanyar and Modung Districts, Bangkalan Regency).

³ Media, K. *Mengenal Jamu Ramuan Madura* Halaman all - Kompas.com. (2022) diakses pada 11 Mei 2023, dari <https://surabaya.kompas.com/read/2022/04/13/060600078/mengenal-jamu-ramuan-madura?page=all>

B. CONSUMER PERCEPTION, HALAL, AND MASLAHAH OF MADURA HERBAL MEDICINE

According to Fadila and Lestari, perception is the process of selecting, organizing and interpreting input information, and sensations received through sight, feeling, hearing, smell, and touch to produce meaning. This means that perception consists of various aspects; (1) Selection, (2) Organization, and (3) Interpretation.⁴ Therefore, a person in interpreting or perceiving an object goes through these three stages.

Meanwhile, the consumer is the subject of the word consumption. In the Big Indonesian Dictionary (KBBI), consumption is the use of manufactured goods (clothing materials, food, etc.).⁵ In other words, the definition of consumption is the act of spending or reducing the utility of an object either directly or indirectly to fulfill our needs as humans.

If the words perception and consumer are combined, the meaning of consumer perception as stated by Simarmata is the interpretation of consumer expectations of a product or service.⁶ What consumers perceive is sometimes following reality, and sometimes not. From these perceptions, consumers make interpretations to make purchasing decisions. Before making a purchase decision, consumers will consider many things, such as product quality and other important things.

As for the definition of halal, halal in Arabic is defined as "permitted" or "permissible".⁷ Halal has an opposite word, namely "haram" which means the opposite of halal. In the Big Indonesian Dictionary, the word "halal" has 3 meanings; first, not violating the sharia, second, legal in

⁴ Fadila., dkk. Jurnal Ilmiah SIMANTEK ISSN. 2550-0414 Vol. 4 No. 2 Mei 2020

⁵ KBBI

⁶ Simarmata, H. M., dkk. Manajemen Perilaku Konsumen dan Loyalitas. Yayasan Kita Menulis. 2021

⁷ Rohmah, Skripsi "*PENGARUH ...*" 14

obtaining and making it, and third, permission. Meanwhile, the term halal is broadly defined as all actions, deeds, and others that are allowed that do not violate Islamic law.

According to Mahwiya, the halal label is a label that provides information to consumers about a product that has halal certification from the Halal Product Guarantee Organizing Agency (BPJPH) appointed by the Government, so that the product has a good nutritional content so that the product is safe for consumption. Food products that do not have a halal label on the packaging are still considered not to have approval from LPPOM-MUI, so the product is still in doubt about its halalness and will make Muslim consumers hesitate to make purchasing decisions on these products.

The terminological meaning of Maslahah is everything beneficial to humans, which can be achieved by humans by obtaining it or by avoiding it.⁸ In addition, mashlahah is defined as all forms of goodness with worldly and ukhrawi dimensions, material and spiritual as well as individual and collective, and must fulfill three elements; sharia compliance (halal), useful, and bringing goodness (thoyib) in all aspects as a whole that does not cause harm.⁹

Thus, consumption of a product that has not been labeled halal by Muslim consumers is a consumption activity whose mashlahah is doubtful, because the maslahah of a product is not only seen from the utility value of the product but also from the compliance with the sharia contained in the product.

⁸ Fauzia, Ika Yunia & Abdul Kadir Riyadi. Prinsip Dasar Ekonomi Islam; Perspektif Maqashid al-Syari'ah, Jakarta: Kencana Prenada, 2014.

⁹ Sholihin, Ahmad Ifham. Buku Pintar Ekonomi Syariah, Jakarta, PT. Gramedia Pustaka Utama, 2010.

In this theoretical study, the terms Halal and Maslahah are discussed about Madurese herbal medicine, which is an alternative treatment and is believed to be effective, as well as being local Madurese wisdom. Although there are many modern medicines, Madurese herbal medicine is still very popular in rural and urban areas.¹⁰ As a traditional medicine, Madurese herbal medicine is believed from generation to generation to treat diseases and maintain a healthy body. In Madura, women have been introduced to herbal medicine by their parents since they were teenagers, usually beginning with a girl who just had her first period. They consume herbal medicine until they are adults,¹¹ and in addition to many benefits such as maintaining beauty and slimness of the body, Madurese herbal medicine is also used by married women to maintain harmony in their homes. This is the local wisdom of the island of Madura.

In addition to women, many Madurese men also consume herbal medicine to maintain stamina and endurance, as well as to strengthen immunity considering the heavy activities carried out by most Madurese men. Along with the development of the era and the openness of information, the process of introducing Madurese herbal medicine to other regions outside of Madura Island has become known to people outside of Madura Island. Until now, Madura has been synonymous with herbal medicine for household harmony.

Of the many Madurese herbal medicines on the market, some have passed halal certification and are halal-labeled, but some have not.

¹⁰ Elfahmi, Woerdenbag, H. J., & Kayser, O. (2014). Jamu: Indonesian traditional herbal medicine towards rational phytopharmacological use. In Journal of Herbal Medicine. <https://doi.org/10.1016/j.hermed.2014.01.002>

¹¹ Media, K. *Mengenal Jamu Ramuan Madura* Halaman all - Kompas.com. (2022) diakses pada 11 Mei 2023, dari <https://surabaya.kompas.com/read/2022/04/13/060600078/mengenal-jamu-ramuan-madura?page=all>

Likewise, some consumers are selective about this issue, but others ignore it. However, several research results stated that the halal label influences purchasing decisions. For example, in the research conducted by Rachma Rizqina Mardhotillah, the halal label influences purchasing decisions for skincare products.¹²

C. METHODOLOGY

Research on consumer perceptions of the Maslahah principle toward Madurese herbal medicine between those labeled halal and those not labeled halal was conducted with a comparative quantitative method approach. The quantitative method is one of the scientific research methods whose data are numerical (numbers) and processed by statistical methods.¹³ According to Sugiyono, comparative research is part of research that compares the existence of one or more variables in two or more different samples.¹⁴ Based on Sugiyono's theory, our research is one type of comparative research, which is intended to analyze differences in consumer perceptions about Maslahah between Madurese herbal medicine that has a halal label and Madurese herbal medicine that does not have a halal label.

This research was carried out in Kwanyar and Modung districts, Bangkalan, Madura. The selection of the two research locations with almost the same geographical location has the aim of representing the perceptions of coastal communities in Bangkalan Regency, which consists of the inland and periphery. The number of consumers of Madurese herbal medicine in

¹² Rachma Rizqina Mardhotillah, dkk.. Accounting and Management journal vol 6. No.1 Juli 2022

¹³ Sugiyono. *Metode Penelitian Bisnis: Pendekatan Kuantitatif Kualitatif dan R&D.* (Bandung: Elfabeta cetakan ke16 2012), 46.

¹⁴ Sugiyono. *Metode Penelitian Bisnis: Pendekatan Kuantitatif Kualitatif dan R&D.*, 230

the two districts is unknown, so the determination of the number of samples in this study uses Lemeshow's theory, which is a formulation to determine the number of samples taken from an unknown population, as follows:¹⁵

$$n = \frac{Z^2 p(1 - p)}{d^2}$$

Based on Lemeshow's formulation, the results of the required sample calculation are:

$$n = \frac{1,960^2 0,5(1 - 0,5)}{0,1^2} = 96,04$$

Then, the result of 96.04 is rounded up to 96 respondents.

In terms of determining who will be used as respondents from a total of 96 people, this study uses a random sampling approach with accidental sampling techniques.¹⁶ The collection of primary and secondary data using a questionnaire with a Likert scale, and documentation.

The data analysis process includes testing the questionnaire instrument and the results of the questionnaire through a series of validity tests, reliability tests, normality tests, and a sample t-test analysis or the Z test. If $t_{count} \geq t_{table}$, then H0 is accepted, which means that there is no difference in consumer perceptions of Maslahah for both Madurese herbal medicine products (both halal-labeled and nonhalal-labeled). Conversely, if $t_{count} < t_{table}$, then H0 is rejected, which means that there is a difference in consumer perception of Maslahah for both Madurese herbal medicine products (both halal-labeled and nonhalal-labeled).

D. DISCUSSION OF RESEARCH RESULT

¹⁵ Ibit., 72.

¹⁶ Sugiyono. *Metode Penelitian Bisnis: Pendekatan Kuantitatif Kualitatif dan R&D*, 117.

The results of the instrument test through the validity and reliability of each tabulated data of the questionnaire results from respondents' perceptions of the maslahah of halal-labeled herbal medicine can be seen in the following SPSS test results:

Table 1.
Correlations

	X1	X2	X3	X4	X5	X6	X7	Total
X1	Pearson Correlation	1	.028	.099	.180	.369*	.260	.294
	Sig. (2-tailed)		.788	.339	.630	.000	.560	.364
	N	96	96	96	96	96	96	96
X2	Pearson Correlation	.228	1	.534**	.462*	.404*	.324**	.273**
	Sig. (2-tailed)	.788		.000	.000	.000	.001	.007
	N	96	96	96	96	96	96	96
X3	Pearson Correlation	.199	.534**	1	.389*	.303*	.211*	.366**
	Sig. (2-tailed)	.339	.000		.000	.003	.039	.000
	N	96	96	96	96	96	96	96
X4	Pearson Correlation	.250	.462**	.389**	1	.264*	.189	.375**
	Sig. (2-tailed)	.630	.000	.000		.009	.148	.000
	N	96	96	96	96	96	96	96
X5	Pearson Correlation	.369**	.404**	.303**	.264*	1	.195	.358**
	Sig. (2-tailed)	.000	.000	.003	.009		.356	.000
	N	96	96	96	96	96	96	96
X6	Pearson Correlation	.260	.324**	.211*	.179	.195	1	.198
	Sig. (2-tailed)	.560	.001	.039	.148	.356		.053
	N	96	96	96	96	96	96	96
X7	Pearson Correlation	.194	.273**	.366**	.375*	.358*	.198	1
	Sig. (2-tailed)	.364	.007	.000	.000	.000	.053	
	N	96	96	96	96	96	96	96
Total Pearson Correlation		.185	.848**	.709**	.628*	.553*	.455**	.621**
								1

Sig. (2-tailed)	.158	.000	.000	.000	.000	.000	.000	.000
N	96	96	96	96	96	96	96	96

**. Correlation is significant at the 0.01 level (2-tailed).

*. Correlation is significant at the 0.05 level (2-tailed).

Table 2. Case Processing Summary

		N	%
Cases	Valid	96	100.0
	Excluded ^a	0	.0
	Total	96	100.0

a. Listwise deletion based on all variables in the procedure.

Table 3. Reliability Statistics

Cronbach's Alpha	N of Items
.713	7

Based on the results of the correlation test from Table 1 to Table 3, each instrument on the perception of maslahah of halal-labeled products is valid. It can be seen from the total value of the Pearson correlation of the seven instruments, which is greater than the r table with a value of 0.168. Also from the reliability test, it can be seen that Cronbach's alpha value is 0.713 which is greater than 0.60, so it means the data are reliable.

Meanwhile, the results of the validity and reliability tests on each tabulation data of questionnaire results from respondents' perceptions of the maslahah of nonhalal-labeled herbal medicine can be seen in the following SPSS test results.

Table 4.
Correlations

		Y1	Y2	Y3	Y4	Y5	Y6	Y7	Total
Y1	Pearson Correlation	1	.783**	.465**	.363**	.297**	.242*	.343**	.796**
	Sig. (2-tailed)		.000	.000	.000	.003	.017	.001	.000
	N	96	96	96	96	96	96	96	96
Y2	Pearson Correlation	.783**	1	.544**	.469**	.394**	.332**	.283**	.861**
	Sig. (2-tailed)	.000		.000	.000	.000	.001	.005	.000
	N	96	96	96	96	96	96	96	96
Y3	Pearson Correlation	.465**	.544**	1	.389**	.256*	.211*	.366**	.709**
	Sig. (2-tailed)	.000	.000		.000	.012	.039	.000	.000
	N	96	96	96	96	96	96	96	96
Y4	Pearson Correlation	.363**	.469**	.389**	1	.284**	.169	.375**	.619**
	Sig. (2-tailed)	.000	.000	.000		.005	.148	.000	.000
	N	96	96	96	96	96	96	96	96
Y5	Pearson Correlation	.297**	.394**	.256*	.284**	1	.122	.315**	.541**
	Sig. (2-tailed)	.003	.000	.012	.005		.279	.002	.000
	N	96	96	96	96	96	96	96	96
Y6	Pearson Correlation	.242*	.332**	.211*	.169	.172	1	.198	.464**
	Sig. (2-tailed)	.017	.001	.039	.148	.279		.053	.000
	N	96	96	96	96	96	96	96	96
Y7	Pearson Correlation	.343**	.283**	.366**	.375**	.315**	.198	1	.609**
	Sig. (2-tailed)	.001	.005	.000	.000	.002	.053		.000
	N	96	96	96	96	96	96	96	96
Total Pearson Correlation		.796**	.861**	.709**	.619**	.541**	.464**	.609**	1
Sig. (2-tailed)		.000	.000	.000	.000	.000	.000	.000	
N		96	96	96	96	96	96	96	96

**. Correlation is significant at the 0.01 level (2-tailed).

*. Correlation is significant at the 0.05 level (2-tailed).

Table 5. Case Processing Summary

N	%
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Cases	Valid	96	100.0
	Excluded ^a	0	.0
	Total	96	100.0

a. Listwise deletion based on all variables in the procedure.

Table 6. Reliability Statistics

Cronbach's Alpha	N of Items
.790	7

Based on the results of the correlation test from Table 4 to Table 6, each instrument on the perception of maslahah of halal-labeled products is valid. It can be seen from the total value of the Pearson correlation of the seven instruments, which is greater than the r table with a value of 0.168. Also from the reliability test, it can be seen that Cronbach's alpha value is 0.790 which is greater than 0.60, so it means the data are reliable.

Meanwhile, the assumption test of the questionnaire results through the normality test on respondents' perceptions about the maslahah of halal-labeled and nonhalal-labeled herbal medicine products is as follows.

**Table 7.
 Perception of Maslahah of Halal-Labeled Madurese Herbal Medicine**

	Kolmogorov-Smirnov ^a			Shapiro-Wilk		
	Statistic	df	Sig.	Statistic	df	Sig.
X1	.537	96	.091	.126	96	.189
X2	.415	96	.236	.642	96	.312
X3	.487	96	.259	.505	96	.082
X4	.529	96	.173	.350	96	.316
X5	.518	96	.116	.404	96	.302
X6	.514	96	.173	.420	96	.079

X7	.482	96	.064	.518	96	.228
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a. Lilliefors Significance Correction

Table 8.
Perception of Maslahah of Nonhalal-Labeled Madurese Herbal Medicine

	Kolmogorov-Smirnov ^a			Shapiro-Wilk		
	Statistic	df	Sig.	Statistic	df	Sig.
Y1	.447	96	.213	.588	96	.351
Y2	.421	96	.224	.633	96	.084
Y3	.487	96	.170	.505	96	.335
Y4	.529	96	.208	.350	96	.147
Y5	.522	96	.230	.387	96	.096
Y6	.514	96	.162	.420	96	.291
Y7	.482	96	.075	.518	96	.159

a. Lilliefors Significance Correction

Based on the results of the Lilliefors normality test, it can be seen that each significance value of all the data above is still above 0.05, so it can be said that the data are normally distributed. Finally, the output data of the one-sample T-test to analyze and answer the research hypothesis can be seen in Table 9.

Table 9.
One-Sample Statistics

	N	Mean	Std. Deviation	Std. Error Mean
X1	96	4.98	.144	.015
X2	96	4.61	.605	.062
X3	96	4.79	.433	.044
X4	96	4.90	.307	.031
X5	96	4.86	.344	.035
X6	96	4.85	.355	.036
X7	96	4.78	.440	.045

Y1	96	4.71	.479	.049
Y2	96	4.63	.603	.062
Y3	96	4.79	.433	.044
Y4	96	4.90	.307	.031
Y5	96	4.88	.332	.034
Y6	96	4.85	.355	.036
Y7	96	4.78	.440	.045

Based on the significance value (2-tailed) in Table 10, all the values are 0.00, which is smaller than 0.05. It means that the Null Hypothesis (H0) is rejected and, instead, the Alternative Hypothesis (Ha) is accepted. Therefore, it can be concluded that the consumer perception of Maslahah of halal-labeled and nonhalal-labeled Madurese herbal medicine in Kwanyar and Modung districts is different.

As for the comparison between t_{count} and t_{table} (1.985), if $t_{count} > t_{table}$ then H0 is rejected, conversely, if $t_{count} < t_{table}$ then H0 is accepted. Meanwhile, in the results of the one sample T-test results, all $t_{count} > t_{table}$ (1.985), so the conclusion is that the null hypothesis (H0) is rejected and, instead, the alternative hypothesis (Ha) is accepted. Therefore, it can be concluded that the consumer perception of Maslahah of halal-labeled and nonhalal-labeled Madurese herbal medicine in Kwanyar and Modung districts is different.

Table 10.
Comparison between t_{count} and t_{table}

	t	df	Sig. (2-tailed)	Mean Difference	95% Confidence Interval of the Difference	
					Lower	Upper
X1	339.790	95	.000	4.979	4.95	5.01
X2	74.768	95	.000	4.615	4.49	4.74
X3	108.360	95	.000	4.792	4.70	4.88
X4	156.211	95	.000	4.896	4.83	4.96
X5	138.570	95	.000	4.865	4.79	4.93
X6	134.053	95	.000	4.854	4.78	4.93
X7	106.428	95	.000	4.781	4.69	4.87
Y1	96.229	95	.000	4.708	4.61	4.81
Y2	75.197	95	.000	4.625	4.50	4.75
Y3	108.360	95	.000	4.792	4.70	4.88
Y4	156.211	95	.000	4.896	4.83	4.96
Y5	143.674	95	.000	4.875	4.81	4.94
Y6	134.053	95	.000	4.854	4.78	4.93
Y7	106.428	95	.000	4.781	4.69	4.87

E. CONCLUSION AND SUGGESTION

Based on the results of the analysis in the discussion of the research results, it is known that there are differences in consumer perceptions of Maslahah towards Madurese herbal medicine between halal-labeled and nonhalal-labeled in Kwanyar and Modung districts, Bangkalan Regency. This is as evidenced by the results of one sample t-test.

Based on the conclusion of this study, there are several suggestions for Madurese herbal medicine producers, such as: Because consumer perceptions about maslahah of halal-labeled and nonhalal-labeled Madura herbal medicine are different, then for producers of Madura herbal medicine who do not yet have halal certification, they should immediately certify the halal status of their Madurese herbal medicine products.

The urgency of the halal label for Madurese herbal medicine products is not only to comply with the sharia law, but also to significantly improve the positive image of the product in terms of the maslahah of consumers, especially consumers of Madurese herbal medicine in the districts of Kwanyar and Modung.

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