

An Analysis of the Consumer Behavior of Rumah Sehat Thibbun Nabawi A Study in Pekanbaru City and Batam City

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Abstract

This study aims to determine and analyze the influence of culture, reference group, and belief on consumer purchasing decisions in the treatment of Rumah Sehat Thibbun Nabawi. This is a survey research. The population in this study was Rumah Sehat consumers in Pekanbaru city and Batam city using an accidental sampling technique. The number of samples was 96 respondents. This means that from each consumer, 96 samples were taken from Pekanbaru city and 96 from Batam city. The data were collected by using a questionnaire. The results of this study indicated that the alternative therapies (Rumah Sehat) in Pekanbaru city with culture and beliefs influence the purchasing decisions of Rumah Sehat consumers while the reference group does not influence the purchasing decisions of Rumah Sehat consumers. The culture, reference group, and belief influence the purchasing decisions of Rumah Sehat consumers in Batam city. Overall, there is a significant comparison between Rumah Sehat in Pekanbaru City and the consumers of Rumah Sehat in Batam city toward the consumer purchasing decisions in doing therapies in Thibbun Nabawi.

Keywords: Culture; Reference Group; Beliefs; Purchasing Decisions

Abstrak

Penelitian ini bertujuan untuk mengetahui dan menganalisis pengaruh budaya, kelompok acuan, dan keyakinan terhadap keputusan pembelian konsumen dalam pengobatan thibbun nabawi di rumah sehat. Penelitian ini merupakan penelitian survey. Populasi dalam penelitian ini adalah konsumen rumah sehat yang ada di kota Pekanbaru dan kota Batam dengan menggunakan teknik sampling accidental sampling. Jumlah sampel sebesar 96 responden. Artinya dari masing-masing konsumen diambil sampel 96 dari kota Pekanbaru dan 96 dari kota Batam. Pengambilan data dengan menggunakan kuesioner. Hasil penelitian ini menunjukkan bahwa pengobatan alternatif (Rumah Sehat) kota Pekanbaru dengan budaya dan keyakinan berpengaruh terhadap keputusan pembelian konsumen rumah sehat sedangkan kelompok acuan tidak berpengaruh terhadap keputusan pembelian konsumen rumah sehat. Pada rumah sehat kota Batam dengan budaya, kelompok acuan, dan keyakinan berpengaruh terhadap keputusan pembelian konsumen rumah sehat. Secara keseluruhan terdapat perbandingan yang signifikan antara rumah sehat kota Pekanbaru dan konsumen rumah sehat kota Batam terhadap keputusan pembelian konsumen dalam melakukan pengobatan thibbun nabawi.

Kata Kunci: Budaya; Kelompok Acuan; Keyakinan; Keputusan Pembelian

Introduction

Health is a blessing given by Allah SWT. It is a gift in the every human life as a sign of Allah's love for his people. Every human being must have felt pain. If humans are sick, in their daily activities they will experience many unpleasant situations. The more tasks done, the more hope of healthy pleasures needed. Currently, there are many views

of a Muslim about health problems. They consider that health is very important. They assume that any activity carried out, both in worship and in work, requires a fit condition. Like the Messenger of Allah, Rasulullah SAW, he took care of his health in every activity he did. It is known that he very rarely got sick even though he did a lot of activities such as preaching, worshiping, and even getting directly involved in war.

He is the best example for Muslims. It is implemented in all of our lives, including in health, medical treatment and treating the sick. In its development, the treatment carried out in the style of the Prophet Muhammad was called *Thibbun Nabawi* which until now is very well known in the wider community. Treatment using *Thibbun Nabawi* is widely used by the community for herbal treatment whose source comes from the hadith of the Prophet Muhammad SAW (Rahim, 2016). *Thibbun nabawi* is widely expressed in the Koran and As-Sunnah related to medical science such as prevention (disease) or treatment. Treatment with this method will not harm the human body and has no negative impact when using herbal medicines or in practice.

This treatment is widely used to treat all forms of disease because the *Thibbun Nabawi* treatment treats all sources of disease and the problems, while treatment using the latest technology and the use of hospital medicine-style drugs can only treat the symptoms (Rahim, 2016). Rahim (2016), the treatment recommended by the Prophet Muhammad SAW is categorized into two therapies physical therapy and non-physical therapy Non-physical therapy includes improving the mind and convincing the disease, getting closer to Allah, ruqiyah syar'iyah. On the other hand, physical therapy includes consuming herbs, cupping, a healthy diet, chiropractic. Ruqiyah therapy is not only referred to as non-physical therapy but also referred to as physical therapy because ruqiyah can be used in treatment coming from what can be seen physically. By the Thibbun Nabawi phenomenon, many consumers choose this treatment because for them modern medicine no longer gives satisfactory results.

By the Thibbun Nabawi therapies, many alternative therapies have been established for the healing and health of consumers. Consumers have the freedom to choose the treatment according to what they want and need. The decision to perform Thibbun Nabawi entirely depends on the consumers. Because basically the concept of consumer behavior is to see what consumers look like in choosing the best according to their wishes in order to provide satisfaction for themselves. This is comparable to rationality in economics which economic offenders really want the satisfaction they get in consumption can be increased. Basically, every need to achieve satisfaction is the nature of consumer behavior. Every consumer who wants to do something must really know what they want. In this process, a consumer should first find out what the product looks like and how the product is made so that it will not be wrong in making decisions.

Thus, consumers will have many choices. By these choices, they will be very easy to choose the best, so it is very easy to make decisions. Bilondatu (2017) conducted research on consumer behavior in decision making which can be influenced by several factors such as motivation, perception and trust. In this research, motivation and perception did not influence consumer decisions. However, trust influences consumer decisions. This research intends to examine the influence of motivation, perception and trust on consumer purchasing decisions. Efendi and Farida (2019), they found that consumer behavior can be seen from several factors, including motivation, perception and trust factors which influence purchasing decisions. Santoso (2017) in his research on consumer behavior concluded that consumer behavior is perceived as something pleasant because it is practical according to sources who have done it, while the factors that motivate consumers are internal factors (busy shopping, personal considerations, etc) and

also external factors (products, prices, and promotions offered by sellers). The development of the Rumah Sehat Thibbun Nabawi has recently been increasingly famous in various regions in Indonesia. There are many Rumah Sehat Thibbun Nabawi have been opened in Pekanbaru city and Batam city. Rumah Sehat Thibbun Nabawi continues to grow. There are so many consumers want to come to Rumah Sehat Thibbun Nabawi for therapies. Even some non-Muslims today do not hesitate to come and do therapies in the style of Rasulullah SAW (Thibbun Nabawi) called physical therapy such as consuming herbs (honey, black seed, olive oil, zam-zam water), cupping, healthy eating patterns. Because the therapies of Thibbun Nabawi will not harm the human body and also has no side effects in the use of herbal medicines or in the practice of medicine.

In fact, some of the consumers coming to Rumah Sehat Thibbun Nabawi not only do treatment but also seek non-physical therapy such as improving their minds and convincing their illnesses, getting closer to Allah, and ruqyah syar'iyah. Ruqyah therapy is not only referred to as non-physical therapy, but it can also be called physical therapy because sometimes ruqyah is used for therapies that can be seen physically. The reasons why consumers come to Rumah Sehat Thibbun Nabawi were also conducted. It can be seen from the Muslim and non-Muslim consumers' belief and motivation in doing the Thibbun Nabawi therapies and their perceptions toward Rumah Sehat Thibbun Nabawi. This study was conducted in Pekanbaru city and Batam city because in those area there are many people coming from many ethnic groups, both Muslim and non-Muslim.

Moreover, Batam city is a metropolitan city where the number of the population between Muslims and non-Muslims is almost similar. The purpose of this study was to determine the influence of culture, reference group, and belief toward the purchasing decisions of Rumah Sehat Thibbun Nabawi in Pekanbaru city and Batam city. The term of consumer behavior, namely the existence of two main perspectives: (1) human thoughts and actions in order to find solutions to their needs and desires and (2) fields of study or disciplines focusing on the consumption process experienced by consumers in order to fulfill their needs and desires. Consumer behavior is also an individual's activities in searching, evaluating, obtaining, consuming, and discontinuing the use of goods and services.

Consumer purchases are strongly influenced by the characteristics (1) culture, subculture, and social class, (2) Social consisting of reference group, family, and role or status, (3) Personal consisting of from age and stage of life cycle, occupation, economic condition, lifestyle, and personality or self-concept, (4) Psychology consisting of motivation, perception, belief and attitude. Usually marketers cannot control such factors, but they have to take them into account. Aiman (2016), Thibbun Nabawi refers to the actions and words (hadith) of the Prophet regarding disease, treatment and hygiene. The term Thibbun Nabawi was coined by Muslim doctors around the 13th century AD to denote medical sciences that were within the framework of faith in Allah, so that they were protected from shirk, superstition and superstition. Thibbun nabawi consists of ruqyah, cupping, consuming black seed and honey, using olive oil, using siwak or miswak, and so on.

Methods

This study used a descriptive comparative method with a quantitative approach. A descriptive comparative method compares the same variable for different samples. A descriptive method explains a research in terms of the presence of variables and when they occur, so the present study conducted by explaining or describing past and present variables (continuing), belongs to a descriptive research (to describe). The consumer behavior was towards purchasing decisions for Rumah Sehat Thibbun Nabawi in

Pekanbaru city and in Batam city by conducting a comparative study. Comparative study is directed to find out whether between two or more than two groups have differences in the aspects or variables studied. The data used in this study was the primary data obtained from questionnaires and the questionnaires were given to the consumer behavior respondents of Rumah Sehat Thibbun Nabawi in Pekanbaru city and Batam city.

This is a survey research carried out on large and small population. The primary data were collected by using oral and written questions. This survey method required direct contact or relationship between the researcher and the research subject (respondent) to obtain the necessary data. The population in this study is the consumers of Rumah Sehat Thibbun Nabawi in Pekanbaru city and Batam city as consumer behavior towards purchasing decisions. This population was an unlimited population because the actual size of the population cannot be known, so it must use the convenience sampling technique. It was done by selecting or filtering existing questionnaires. Therefore, the required sample size was 96 respondents. Thus, the samples were 96 respondents Pekanbaru city and 96 respondents from Batam city. The sampling technique used was the accidental sampling.

Accidental sampling is a sampling determination technique based on coincidence factors such as anyone who accidentally meets and according to the characteristics determined by the researcher, that person can be used as a sample (respondent). The data analysis method used in this study was a multiple linear regression analysis. Multiple linear regression analysis was used to analyze the effect of more than one independent variable on the dependent variable. This study used a descriptive statistics. A descriptive statistics is the process of transforming research data in tabulated form so that it is easy to understand and interpret. This descriptive statistic consists of the mean, standard deviation, maximum and minimum. In this multiple linear regression analysis, apart from measuring the strength of the relationship between two or more variables, it also showed the direction of the relationship between the independent variable and the dependent variable.

This study used an alpha (error rate) of 5% so that the confidence level was 95%. The hypothesis testing can be done with a partial significance test (t-test) and the coefficient of determination. The t-test is seen if t_{count} is obtained based on the coefficient-t in the t-test. t_{table} on the degree of freedom (dk) = $n-k-1$. First, if the value of $t_{count} > t_{table}$, then the hypothesis is accepted. Then, if the significance value (P_{value}) < 0.05 , the effect is significant. Second, if the value of $t_{count} < t_{table}$, then the hypothesis cannot be accepted. Moreover, if the significance value (P_{value}) > 0.05 then the effect is not significant. The coefficient of determination (R^2) test in multiple linear regression is used to find out how big the percentage of the independent variable's contribution to the dependent variable simultaneously. This percentage shows how much the independent variable can explain the dependent variable.

The greater the coefficient of determination is the better the independent variable in explaining the dependent variable. To be able to see the difference in the results of consumer regression results from Rumah Sehat Thibbun Nabawi in Pekanbaru city and Batam city, the chow test regression model was used which was a tool to test the test for the equality of coefficients. Furthermore, the results of the calculated F will be compared with the F table, if $F_{arithmetic} > F_{table}$, then the null hypothesis can be rejected. Therefore, there were different independent variables (culture, reference group, and belief) between the consumers of Rumah Sehat Thibbun Nabawi in Pekanbaru city and in Batam city in influencing the number of purchasing decisions. If $F_{count} < F_{table}$ then the opposite happens.

Results And Discussion

1. Descriptive Taticstics

A Descriptive statistics provides an overview or description of the data, such as the mean value, standard deviation, maximum and minimum. Based on the calculation results of the 96 samples included in this study, the purchasing decisions which is the dependent variable (Y) has a mean value 26.80 with a standard deviation (SD) 5.984. This means that the number of data deviation from consumer behavior in purchasing decisions of Rumah Sehat in Pekanbaru was 5.984. These results indicated that the SD value was smaller than the average purchasing decisions. Clearly, this condition indicated a fluctuation in purchasing decisions for the Rumah Sehat consumers in Pekanbaru city from a maximum number of 35 and a minimum number of 15.

Thus, it can be concluded that there is a large positive range or there are many Rumah Sehat consumers in Pekanbaru city receiving a purchasing decision through the Thibbun Nabawi therapies seen from the aspects of culture, reference group, and belief. The standard deviation value which was smaller than the mean indicated that the data showed a low deviation. It means that the data is normally distributed. Meanwhile, the results of the calculation of the minimum, maximum, mean and standard deviation (δ) of the Rumah Sehat consumers in Batam city, from the 96 samples included in this study, the purchasing decisions were obtained. It was the dependent variable (Y) and the mean value was 29.26 with a standard deviation (SD) 5.248.

This means that the number of the data deviation from consumer behavior in the purchasing decisions of Rumah Sehat in Batam city was 5.248. These results indicated that the SD value was smaller than the mean of purchasing decisions. This condition indicated a fluctuation in purchasing decisions for the Rumah Sehat consumers in Batam city from a maximum number of 35 and a minimum number of 16. Thus, it can be concluded that there is a large positive range or there are many Rumah Sehat consumers in Batam city receiving a purchasing decision through the Thibbun Nabawi therapies seen from the aspects of culture, reference group, and belief. The standard deviation value which was smaller than the mean indicated that the data showed a low deviation. It means that the data is normally distributed.

2. Multiple Linear Regression Hypothesis Testing

For the preparation of the regression equation, the values from column B can be used, namely Unstandardized Coefficients column from the calculation of the Regression Coefficients. For the Rumah Sehat consumers in Pekanbaru city, column B obtained a constant price 34,235. This indicated that the consumers visiting Rumah Sehat in Pekanbaru city had a decision in doing the Thibbun Nabawi therapies 34,235 even though the independent variable (free) was zero. Then, the coefficient value of the cultural variable was -0.557. Moreover, the reference group was -0.182 and the belief was 0.446. From the coefficient values above, the regression equation can be arranged as follows:

$$Y = 34,235 - 0,557X_1 - 0,182X_2 + 0,446X_3 + e$$

3. Partial Test (t-test)

By using the confidence level 95% or 5% and the dk (degree of freedom) (n-k-1) of (96-3-1 = 92), the t_{table} value was 1.9861 and compared with t_{count} . Based on the results of these calculations, it indicated that:

- a. The results of testing the first hypothesis (H1) which states that culture influenced the purchasing decisions of the Rumah Sehat consumers in Pekanbaru city. It showed that the regression coefficient value of the culture variable (X1) was -0.557 and the t_{count} was -4.436. The value of the cultural coefficient was negative. This indicated that

culture had an opposite relationship with the purchasing decisions. This implies that the declining culture of consumers doing the Thibbun Nabawi therapies in Rumah Sehat will also decrease the purchasing decisions of the Rumah Sehat consumers in Pekanbaru city. This result was proved by the calculation of the values of t_{count} and t_{table} . The value of t_{count} was $-4,436 < t_{table} 1,986$. As a result, the changes or variations in culture variable were not followed by the variations in purchasing decision variable. Nevertheless, the culture coefficient was significant at the 0.05 level of significance with a Pvalue 0.000. Based on the results of the H1 test, it can be interpreted that culture variable influences the purchasing decisions of the Rumah Sehat consumers in Pekanbaru city or in other words H1 is accepted.

- b. The results of testing the second hypothesis (H2) stated that the reference group influenced the purchasing decisions of the Rumah Sehat consumers in Pekanbaru city. It showed that the regression coefficient value of the reference group variable (X2) was -0.182 and the t_{count} was -1.245. The coefficient value of the reference group was negative. This indicated that the reference group had an opposite relationship with the purchasing decisions. This means that the lower the reference group of consumers doing the Thibbun Nabawi therapies in Rumah Sehat, the lower the purchasing decisions of Rumah Sehat consumers in Pekanbaru. This result was proved by the calculation of the values of t_{count} and t_{table} . The value of t_{count} was $-1.245 < t_{table} 1,986$. As a result, the changes or variations in the reference group variable were not followed by the variations in the purchasing decision variable. The coefficient of this reference group was also not significant at the 0.05 with a Pvalue 0.216. Based on the results of the H2 test, it can be interpreted that the reference group variable does not influence the purchasing decisions of the Rumah Sehat consumers in Pekanbaru city or in other words H2 is rejected.
- c. The results of testing the third hypothesis (H3) stated that belief influenced the purchasing decisions of Rumah Sehat consumers in Pekanbaru city. It showed that the regression coefficient value of the belief variable (X3) was 0.446 and the t_{count} was 3.499. The coefficient value of the belief variable was Positive. This indicated that belief had a direct relationship with the purchasing decisions. This means that the increased belief of consumers doing the Thibbun Nabawi therapies in Rumah Sehat, the higher the purchasing decisions of the Rumah Sehat consumers in Pekanbaru city. This result was proved by the calculation of the values of t_{count} and t_{table} . The value of t_{count} was $3,499 > t_{table} 1,986$. As a result, the changes or variations in the confidence variable were followed by the variations in the purchasing decision variable. This belief coefficient was significant at a significance level 0.05 with a Pvalue 0.001. Based on the results of the H3 test, it can be interpreted that the belief variable influences the purchasing decisions of the Rumah Sehat consumers in the Pekanbaru or in other words H3 is accepted.

For the Rumah Sehat consumers in Batam city, from column B a constant price was 25,095 obtained. This indicated that the consumers of the Rumah Sehat in Batam city had a decision in doing the Thibbun Nabawi therapies 25,095 even though the independent variable (free) was zero. For the coefficient value of the cultural variable is -0.400, the reference group is 0.241 and the confidence is 0.337. From the values of these coefficients, the regression equation can be arranged as follows:

$$Y = 25,095 - 0,400X1 + 0,241X2 + 0,337X3 + e$$

By using the confidence level 95% or 5% and the dk (degree of freedom) $(n-k-1)$ of $(96-3-1 = 92)$, the t_{table} value was 1.986 and compared with t_{count} . Based on the results of these calculations, it indicated that:

- a. The results of testing the fourth hypothesis (H4) stated that culture influenced the purchasing decisions of the Rumah Sehat consumers in Batam city. It showed that the regression coefficient value of the culture variable (X1) was -0.400 and the t_{count} was -3.538. The value of the cultural coefficient was negative. This indicated that culture had the opposite relationship with the purchasing decisions. This implies that the declining culture of consumers in doing the Thibbun Nabawi therapies in Rumah Sehat decreases the purchasing decisions of the Rumah Sehat consumers in Batam city. This result was proved by the calculation of the values of t_{count} and t_{table} . The value of t_{count} was $-3.538 < t_{table} 1.986$. As a result, the changes or variations in culture variable were not followed by the variations in purchasing decision variable. However, the culture coefficient was significant at the 0.05 level of significance with a Pvalue 0.001. Based on the results of the H4 test, it can be interpreted that culture variable influence the purchasing decisions of the Rumah Sehat consumers in Batam city or in other words H4 is accepted.
- b. The results of testing the fifth hypothesis (H5) stated that the reference group influenced the purchasing decisions of the Rumah Sehat consumers in Batam city. It showed that the regression coefficient value of the reference group variable (X2) was 0.241 and the t_{count} was 2.292. The coefficient value of the reference group was positive. This indicated that the reference group had a direct relationship with the purchasing decisions. This means that the increasing reference group of consumers in doing the Thibbun Nabawi therapies in Rumah Sehat also increases the purchasing decisions of the Rumah Sehat consumers in Batam city. This result was proved by the calculation of the values of t_{count} and t_{table} . The value of t_{count} was $2.292 > t_{table} 1.986$. As a result, the changes or variations in the reference group variable were followed by the variations in the purchasing decision variable. The coefficient of this reference group was significant at the 0.05 level of significance with a Pvalue 0.024. Based on the results of the H5 test, it can be interpreted that the reference group variable influences the purchasing decisions of the Rumah Sehat consumers in Batam city or in other words H5 is accepted.
- c. The results of testing the sixth hypothesis (H6) stated that belief influenced the purchasing decisions of the Rumah Sehat consumers in Batam city. It showed that the regression coefficient value of the belief variable (X3) was 0.337 and the t_{count} was 2,981. The coefficient value of belief varible was positive. This indicated that belief had a direct relationship with the purchasing decisions. This means that the increasing belief of the consumers in the Thibbun Nabawi therapies in Rumah Sehat, the higher the purchasing decisions of the Rumah Sehat consumers in Batam city. This result was proved by the calculation of the values of t_{count} and t_{table} . The value of t_{count} was $2,981 > t_{table} 1,986$. As a result, the changes or variations in the belief variable were followed by the variations in the purchasing decision variable. This coefficient of this belief was significant at a significance level 0.05 with a P Pvalue 0.004. Based on the results of the H6 test, it can be interpreted that the belief variable influences the purchasing decisions or in other words, H6 is accepted.

4. Coefficient of Determination

Based on the results obtained, the value of R^2 (Adjusted R Square) of the Rumah Sehat consumers in Pekanbaru city was 0.343 or 34.3%. This showed that the percentage contribution of the influence of the independent variables (culture, reference group, and belief) toward the dependent variable (purchasing decisions) was 34.3% or the variation of the independent variables used in the model (culture, reference group, and belief) was only able to explain that was equal to 34.3% the dependent variable (purchasing

decisions). Meanwhile, the remaining 65.7% was influenced or explained by other variables that were not included in this research model. Nevertheless, the results of the calculation of the coefficient of determination (R^2) of the Rumah Sehat consumers in Batam city obtained the value of R^2 was 0.214 or 21.4%. This showed that the percentage contribution of the influence of the independent variables (culture, reference group, and belief) toward the dependent variable (purchasing decisions) was 21.4% or the variation of the independent variables used in the model (culture, reference group, and belief) was only able to explain that was equal to 21.4% dependent variable (purchasing decisions). However, the remaining 78.6% was influenced or explained by other variables that were not included in this research model.

5. Chow Test

To distinguish the regression results on the Rumah Sehat consumers in Pekanbaru city and in Batam city, then the Chow Test regression model is used with the formula:

$$F = \frac{(RSSr - RSSur)/k}{(RSSur) / (n1 + n2 - 2k)}$$

The residual value of the Rumah Sehat consumers in Pekanbaru city ($RSSur1$) was 2163,041 and the residual value of Rumah Sehat consumers in Batam city ($RSSur2$) was 1990,653. Overall, the combined residual values of Rumah Sehat consumers in Pekanbaru city and in Batam city ($RSSr$) were 2828,920. By the number of $n= 96$, and the number of parameters estimated in the restricted regression (k)=3, the calculation of the *chow test* is obtained as follows:

$$\begin{aligned} RSSur &= RSSur1 + RSSur2 \\ &= 2163,041 + 1990,653 \\ &= 4153,694 \\ F &= \frac{(RSSur - RSSr) / k}{(RSSur) / (n1 + n2 - 2k)} \\ &= \frac{(4153,694 - 2828,920) / 3}{(4153,694) / (192 - 6)} \\ &= \frac{441,591}{22,332} \\ &= 19,774 \end{aligned}$$

The F_{count} value obtained in the *chow test* calculation was 19.774 or greater than F_{table} 2.70 so that there was a difference between the influence of culture, reference group, and belief variables of the Rumah Sehat consumers in Pekanbaru city and in Batam city in doing *Thibbun Nabawi* therapies. It was proved that the culture and belief variables influence the purchasing decisions of the Rumah Sehat consumers in Pekanbaru city while the culture, reference group, and belief variables influences the purchasing decisions of the Rumah Sehat consumers in Batam city. This indicated that the Rumah Sehat consumers in Batam city in the decision in doing the *Thibbun Nabawi* therapies were better than the Rumah Sehat consumers in Pekanbaru city seen from culture, reference group, and belief factors. The *Thibbun Nabawi* therapies in Batam city were currently more developed so that the city was more dominant in doing the therapies including Muslims and non-Muslims, both physical therapy and non-physical therapy.

Conclusion

The culture and beliefs influence the purchasing decisions of the Rumah Sehat consumers in Pekanbaru city. The reference group does not influence the purchasing decisions of the Rumah Sehat consumers in Pekanbaru city in doing the *Thibbun Nabawi* therapies. The culture, reference group, and belief influence the purchasing decisions of

the Rumah Sehat consumers in Batam city. The results of the chow test showed that there were differences in consumer behavior seen from culture, reference group, and belief variables in influencing the decision in doing the Thibbun Nabawi therapies between the Rumah Sehat consumers in Pekanbaru city and in Batam city. The Rumah Sehat consumers in Batam city in the decision in doing the Thibbun Nabawi therapies were better than the Rumah Sehat consumers in Pekanbaru city in terms of culture, reference group, and belief factors. The Thibbun Nabawi therapies in Batam city were currently more developed so that the city was more dominant in doing treatment including Muslims and non-Muslims doing the Thibbun Nabawi therapies, both physical therapy and non-physical therapy.

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