**FAST-FOOD CONSUMPTION AMONG CHILDREN ACCORDING TO *SYARI'AH* PERSPECTIVE**

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***ABSTRACT:*** Fast-food consumption among children is becoming increasingly worrying as it is associated with unhealthy nutrition and its long-term health effects. This concern is due to signs of obesity among children and numerous other harmful diseases linked to low-nutrition, high-fat, and salt diets. According to Li et al. (2020), children aged 12 to 15 years in Malaysia consume fast food twice a week on average. Different factors influence fast-food intake. These include a rise in advertising, the growing number of fast-food restaurants, and shifting current lifestyles, particularly food selection. Accordingly, this study focuses on fast-food consumption from the *Syari'ah* point of view. This research adopts the library research, analysed selected documents, and summarised the *Syari'ah* rulings on fast-food consumption among children. The results show that *Syari'ah* ruling on fast-food consumption relies on habits of intake, fast-food sources and the side-effects on children, whether they are permissible (*mubah*), abominable (*makruh*) or prohibited (*haram*).

***KEYWORDS:*** *Syari'ah guidelines; Western food; Consumer; Eating behaviour; Halal haram*

**1. INTRODUCTION**

The growth and development of children in terms of their food consumption should be monitored. A healthy diet based on *Halal* guidelines, consisting of nutritional ingredients, plays a significant role in the normal physical development of children, (Lever, 2020). Various types of food are essential for the supply of energy for children's growth. Healthy eating is necessary for the development of children as they are experiencing the formation of bones, muscles, teeth and blood during this stage which require sufficient nutrients for average body weight, (Chong et al., 2016). Children are at risk if they do not consume a healthy and balanced diet, (Mohseni & Aryankhesal, 2020). Hence, parents need to play an active role in ensuring that the children take well-balanced meals in their daily diet

According to Caleyachetty et al. (2018) low and middle-income countries with a high prevalence of undernutrition (stunting or slimming) are already faced with overnutrition (overweight or obesity) as an additional burden. This is now referred to as the 'double burden of malnutrition'. Ashakiran & Deephi (2012) revealed the adverse effects of fast-food intake among children. Many issues will arise in the future due to eating disorders, (Nik Nairan et al., 2015). These involve cardiovascular problems, depression, hyperactivity, and most notably, obesity. Being overweight and obese puts an individual at significant risk of developing NCDs (non-communicable diseases) such as cardiovascular and kidney disorders, diabetes, malignancies and conditions like obstructive sleep apnoea and osteoarthritis, adverse psychosocial effects and reduced educational performance, (Peltzer et al., 2014; Alagappan et al., 2015; Alagappan et al., 2019). According to the World Health Organization-WHO (2020), childhood obesity is one of the most critical challenges to global health in the 21st century. This is a worldwide issue that affects many low-and middle-income countries, especially in urban settings. This finding illustrates that the obesity problem will affect the population if people keep on eating fast food.

Several variables affect fast-food intake. This is apparent from studies were undertaken by Grier et al. (2007), Garber & Lustig (2011), Totu et al. (2013) and Tim, Beevi & Yeap (2014). These reports also clarified several of the critical causes that have led to fast-food intake. Advertising power, fast-food promotion, innovative branding and pleasant foods are among the reasons. The proximity of fast-food restaurants often leads to increased fast-food consumption among children, (Currie et al., 2010). Thesefactors influence fast-food consumption in children while disregarding the adverse effects in the future. Davis & Carpenter (2009) also eluded that the proximity of fast-food outlets to schools has led to obesity among children. Currie et al. (2010) also linked the position and accessibility of fast-food outlets that have attracted children, thus causing obesity. In the meantime, Das (2015) and Bundhun (2018) stressed that the amount of fast-food intake among children was affected by advertising and the widespread sale of food within the school compound.

Therefore, it is also essential to educate children about nutrition and healthy-*halal* foods early to develop their eating habits. In addition, they can be part of physical exercise and a balanced lifestyle as a foundation for the reduction of obesity. Islam instructs Muslims to cultivate and eat healthy food by adopting the *Syari'ah*-guided *halal* diet. It is assumed that consuming nutritious and safe food will protect the body and mind from diseases and protect consumers from the adverse effects of bad eating habits.

**1.1 Consumption of Food by Children**

Food is a fundamental need for human beings. Although consumers are steadily demanding higher quality food, there are still significant issues with imbalanced diets and health problems, such as obesity. The shift in eating habits among Malaysians is often affected by external factors rather than by an individual's internal elements. The constant change in food trends and culture influences the eating patterns of Malaysian society, (Mohammad Aizat et al., 2018). Malaysians' fast food intake has become common at all levels of society among children, teens, adults, and the elderly. They are experiencing a nutritional transition in the form of a dramatic shift in food-consumption patterns of the traditional diet of their respective countries to a Westernized diet, (Li et al., 2020).

The availability of various fast-food products has prompted Malaysians to adjust their conventional and traditional eating habits. Among the reasons are the family, the surroundings, the influence of western food culture and the introduction to global food cultures due to the assimilation of a multi-racial community. Other factors like population income, the transformation of modern lifestyle, and the community's desire to try different menus have affected the transition pattern of eating habits among Malaysians.

Changes in dietary habits also influenced children to consume fast food regularly. Children often consume fast food at stalls, grocery shops or fast-food restaurants. Fast foods, such as chips, fried chicken and burgers, are commonly available at different locations, such as school canteens and stalls. Many types of fast food are conveniently found in urban areas and have become a part of the dietary intake for children. Research by Ming et al. (2006) on school children in Kuala Lumpur revealed that Western fast food was trending among children and adolescents. The findings showed that about 60 to 70 percent of children consume fast food every week. Besides, the South East Asian Nutrition Surveys (SEANUTS) study of the eating habits of Malaysian children on 2797 children aged 2 to 12 years found that one-tenth of children consumed fast food every week and was more predominant among children living in urban and high-income families, (Chong et al., 2016).

Children need healthy food with high nutritional values to stimulate their physical development and energy production. Traditionally, mothers prepared meals for breakfast, lunch, and dinner, (Totu & Halena, 2015). Nowadays, the women's lifestyle has shifted from full-time homemakers to working women. This indicates that household activities, such as cooking meals and family dinners, are not entirely managed by the mother, and dining out is a choice, (Lubna & Handayani, 2019).

From children's eating patterns, it can be assumed that they are more inclined to consume fast food than a traditional meal. This topic is a trigger to many parties, particularly to parents, as it involves the welfare of their children. Fast food is generally unhealthy and has several adverse effects. Specific care has to be given to children to ensure that their emotional and physical growth is optimum. The National Morbidity and Health Survey found that overweight commonality increased from 16.6% in 1996 and 29.1% in 2006 to 29.4% in 2011. Meanwhile, obesity cases also increased from 4.4% in 1996 and 14.0% in 2006 and outstandingly to 15.1% in 2011, (Lai, 2012). Research conducted in 2006 involving 7,749 children between the ages of 7 and 12 found that overweight children, including obese children, were at an overall of 19.9%, (Balkish et al., 2013).

There are undeniably other adverse effects, such as cardiovascular disease, depression and hyperactivity. Obesity, though, is the most troublesome concern arising from the eating of fast food, especially for those residing in urban cities without daily exercise and in poor living conditions, (Egger & Dixon, 2014; Ahmed et al., 2019; Yoon et al., 2020). Fast food typically includes high cholesterol, high sugar, sodium, calories, and sometimes a high-fat content. For example, fried chicken, pizza, tacos, ice cream and carbonated beverages are the favourites among children nowadays. Once the effects of obesity show in children, it will lead to various adverse complications such as cardiovascular disease, diabetes, hypertension, cancer, respiratory disorders, nerve damage and asthma, (Alagappan et al., 2019).

Every individual need excellent and nutritious food as a daily dietary intake. As a Muslim, the primary objective of food selection should be following *Syari'ah* guidelines. There are concerns as to whether these fast-food items are acceptable for consumption. It is crucial to determine its *halal* (permissibility) and *haram* (prohibition) status since not all fast foods comply with *Syari'ah* rulings. Similarly, the consumption pattern must be considered too; otherwise, it could lead a Muslim to consume food that is harmful to their health despite being *halal*.

**1.2 The Concept of Fast-food**

Previous researchers have explained numerous definitions of fast food. Most fast foods involve brand names and popular food products, (Duffey, 2007) sold in franchise restaurants, (Totu & Sendera, 2015). Fast food can be referred to as a go-to for customers to purchase food through self-service or takeaway, (Pereira et al., 2005). These food items are usually distributed in cafes, restaurants, and food stores that offer fast food. In comparison, fast food saves time since it can be cooked quickly and easily, (Nagvanshi, 2015). The distinction of fast food from other forms of food is in terms of the preparation time. Any restaurant or stall selling food prepared quickly could be selling fast food, (Khan et al., 2013). It also applies to quick food cooking, ordered through self-service from fast-food restaurants with pre-cooked ingredients, and prepared for a meal such as burgers, fries and pizzas, (AlFaris et al., 2015). In addition, fast food is simple to cook, easy to access, low-priced, favoured by the community, and low in micronutrients and fibre.

In general, fast food and junk food are often used interchangeably. Some junk foods can be categorised as fast-foods, but not all fast-foods can be classified as junk foods, (Kaushik et al., 2011). It refers to the way of serving, which is instant and convenient for consumption. The distinction between the two is the nutrition content. Some junk foods are not healthy and contain large amounts of sugar and fat, (Sharma, 2013).

Moreover, it is low in nutrients, (Das, 2015). Consequently, junk food cannot supply the body with adequate nutrients to sustain good health due to a shortage of micronutrients such as vitamins, minerals, amino acids, and fibre required, (Ashakiran & Deepthi, 2012). Junk food is just empty calories due to the lack of good nutrients but is presented to look tempting, (Mohd Azlan & Noraziah, 2012). It can be summarised that the difference between fast food and junk food is that fast food is defined in the way it is prepared. Meanwhile, for junk food, its emphasis is on the nutrient amount. Any food which is served instantly can be categorised as fast food. On the other hand, junk food refers to any food containing low-calorie, high salt and low-nutrient amount.

Based on the discussion mentioned above, fast food is prepared and processed instantly with minimal time and easily accessed by the consumer, (Abdulmumeen et al., 2012). This implies that any food which fits this description can be classified as fast food. Fast food does not only refer to western food but also the traditional food of a specific community.

**1.3 The Characteristics of Fast-Food**

Fast food is very common because of its pleasant taste, although it lacks nutrition and has several side effects. Previous studies have shown that, though the consumer still prefers fast food, it causes health problems resulting in many diseases, (Johnson et al., 2012). Among the features of fast food are as follows.:

*1.3.1 Contains Large Amount of Calorie*

Calories refer to the energy value in the food. Each food contains different amounts of calories. The number of calories in the food depends on the amount of carbohydrate, protein in it. Everyone requires calories to generate energy, and due to the inability of the body to burn those calories, they are stored as fat. Eventually, this condition triggers several diseases. Thus, consuming fast food frequently increases the calories in the body and accelerates obesity, (Rosenheck, 2008). Besides, there are available data to indicate a substantial rise in children who eat fast food daily, (Heidal et al., 2012).

The calorific intake rates between children and adults are dissimilar. Besides, daily activities will determine the amount of calories needed. For example, girls between the ages of 9-13 require 1400 to 1600 calories, while boys between the ages of 9-13 need 1600 to 2000 calories. But if children are involved actively in many physical activities, they need between 1800 to 2200 calories for the girls and 2000 to 2600 for the boys, (U.S. Department of Agriculture, 2010). Excessive calorie consumption every day leaves a long-term effect on the body, particularly if calories that are not burned are turned into fat and become harmful to the body. Notably, eating fast food is perceived to be the second contributing factor of increased calories among children between the ages of 2 to 18 at 13 percent, (Poti & Popkin, 2011). Excessive calorie intake can be overcome if accurate information on the calories in the food is provided, (Zigmont & Bulmer, 2015). The easiest way to burn fat is by performing daily physical activities, such as fitness exercises, sports and brisk walking.

*1.3.2 Less Healthy Dietary Practice*

Nutrition is a significant factor that should be taken into consideration when choosing food. Fast food is not ideal to be consumed regularly as it has a low nutritional value, (Palos Lucio et al., 2020). Children who consume fast food usually take in large amounts of calories, saturated fat, sodium and sugar compared to children who do not eat fast food, (Powell & Nguyen, 2013). When fast food is eaten on an ongoing basis, it affects the consumers' physical fitness. Children who consume fast food often have weaker tendencies to eat fruits and vegetables on a healthy diet, (Sebastian et al., 2009). Moreover, an unhealthy diet can lead to psychiatric conditions through systemic inflammation, oxidative stress, and reduced plasticity of the brain, (Heidari et al., 2019; Jacob et al., 2020). Choosing healthy food will help to prevent the occurrence of illnesses in the future.

*1.3.3 Containing Nutritional Additive*

Fast foods also contain chemical-based ingredients such as glutamate as a taste enhancer and tartrazine as a food colouring. Food additives are used to preserve freshness and taste, (Ashakiran & Deephi, 2012). Food additives refer to the ingredients added into the food and used to produce, process, treat, pack, transport, or store food. These food additives have been used for centuries to preserve the food, namely using vinegar (pickling), salting, and preserving sugar with sulphur dioxide, (Abdulmumeen et al., 2012). The importance of food additives is to prolong the shelf life of the food and prevent spoilage caused by microorganisms. Although food additives are an essential component of food protection, there are specific side effects that may impact consumers in the future.

*1.3.4 Excessive Fat*

Fast-food consumption implies higher net gross energy intake and lower diet efficiency, (Powell & Nguyen, 2013). In general, fast food includes unnecessary fat and insoluble organic ingredients. Fat supplies energy to the individual and excessive consumption may lead to various diseases, especially obesity. Fat can be classified into two types: saturated fat and unsaturated fat. Scientific experiments were performed on 74 samples of fast-food menus in 34 countries bought at KFC and McDonald's restaurants from 2005 to 2006. The results revealed that most of the menus contained fat in varying amounts from 41 g to 65 g for McDonald's products and 42 g to 74 g for KFC products, (Stender et al., 2007).

**1.4 Factors of Fast-Food Consumption by Children**

There are several factors of fast-food consumption among children. This could be due to the influence of parents, advertisement and marketing, accessibility, pleasant taste and family backgrounds.

*1.4.1 Parents*

Parents are the closest people to their children. They play a vital role in the growth of their children and educating them from infancy to adulthood. Parents often play an essential role in choosing the right food for their children, considering many factors such as pleasant taste, healthy food etc., (Benton, 2004). Parents' attitudes can influence their children in making the right food choices. Nowadays, most parents are busy and less capable of providing meals for their families. Therefore, children tend to eat outside food, (Kim & Ahn, 2020). This has influenced their children's dietary patterns. In addition, parents who regularly consume fast food do influence the fast-food intake of their children, (Boutelle et al., 2007). On the other hand, parent modelling of healthy meals and good eating habits could contribute to the healthy food served in the home, especially for obese children, (Watts et al., 2018). Children decide on the kinds of food, the place and, finally, the children are influenced by the dietary routine of their parents, (Grier et al., 2007).

*1.4.2 Advertisement and Marketing*

Advertisements and fast-food brand marketing have affected children's fast-food intake, (Dixon et al., 2007; Smith et al., 2019). Various marketing strategies have been employed to cater to children, (Truman & Elliott, 2019). Previous studies found that children prefer branded and famous fast food to non-branded fast food despite the same taste or shape, (Tim et al., 2014). The marketing strategy is also aimed at the parents, which subsequently influences the consumption of fast food and accelerating cases of obesity among children, (Story et al., 2002). Television is the most effective form of advertising as children often spend time watching television, (Ng et al., 2015; Pinto et al., 2020). However, nowadays, social media have become a powerful advertising and marketing medium targeted at children, (Potvin Kent et al., 2019). Thus, it influences children's consumption of fast food, which has led to the rise in obesity cases, (Totu et al., 2013).

*1.4.3 Accessibility*

Another factor influencing fast-food consumption is accessibility that is convenient access to the fast-food outlets as it is located near home and school, (Virtanen et al., 2015; Cheong et al., 2019). This happens to people who reside in the cities since restaurants and stalls almost everywhere offer fast food. This is different for those who live far removed from fast-food premises, (Elbel et al., 2020). A study in California found that residing around fast-food outlets contributes to the obesity problem among children compared to those who live far away, (Davis & Carpanter, 2009). In addition, studies have shown that living near fast-food restaurants encourages fast-food consumption, (Currie et al*.*, 2010; Matsuzaki et al., 2020). Those who live at a distance of at least 500 metres from fast-food restaurants are more likely to be affected by obesity than those who live a farther distance, (Bodicoat et al*.*, 2015).

*1.4.4 Pleasant Taste*

The pleasant taste is another aspect that influences fast-food intake among children, (Effertz et al., 2019). They prefer food that suits their taste buds better, (Rojekar et al., 2019). Studies conducted have shown that taste rather than parental control is a critical consideration for children to prefer a men, (Elbel et al., 2011). Foods such as fried chicken, pizza and burgers are more attractive to children when consuming fast food.

*1.4.5 Family Background*

Additionally, the family background is also a driving factor in influencing fast-food consumption among children. Research conducted in Turkey showed that family size, number of family members, family income, family employment and family education background influenced fast-food consumption. It is not just about family socio-economic backgrounds; consumer attitudes towards prices, health and the priority given to children's needs also play essential roles in determining the amount of fast food consumed, (Akbay et al., 2007). The research by Fang Tan et al. (2020) showed that the poor cognitive level of adopters in the behaviours of Western fast food led children to consume Western fast food more often. Children from high family incomes, respectable parents, the high educational standard of parents and family living standards had a higher frequency of consuming Western fast food.

**1.5 *Syari'ah* Perspective on Fast-Food Consumption**

In essence, Islam has established a universal concept and the *Syari'ah* rulings as guidance regarding food consumption. Allah the Almighty permits any beneficial food for human beings and forbids harmful things. Any issues related to *halal* and haram food must be taken seriously by Muslims as it is closely linked to faith and prevents haram sources from coursing through the veins.

The variety of food products that have emerged nowadays has led many Muslims to doubt their consumption. The selection of food should be lawful according to *Syari'ah* rulings to avoid consuming prohibited food. This is in line with Allah's saying:

*"O mankind, eat from whatever is on earth [that is] lawful and good and do not follow the footsteps of Satan. Indeed, he is to you a clear enemy."* (*Al-Baqarah*, 2:168)

Similarly, the hadith narrated by Imam Muslim emphasised the consumption of *halal* food in daily life.

*"What makes lawful by Allah SWT is lawful, and what makes forbidden by Allah SWT is unlawful, and what makes silent by Allah SWT (in terms of halal and haram) is permitted. Hence, accept the power of Allah SWT, because Allah SWT will never forget anything (without explanation)"* (Narrated by *al-Darquṭni*, 2:137)

The hadith clearly mentions the relationship between faith and piety, which cannot be achieved if anyone is involved in prohibited activities or consumption of prohibited food. In considering the *Syari'ah* rulings related to fast-food consumption, the primary reference should be adopted from the al-Quran, al-Sunnah and general principles to determine the *Syari'ah* guidelines on fast-food consumption. *Syari'ah* rulings on fast-food consumption are explained as follows:

*1.5.1 Permissible (Mubah)*

*Mubah* refers to an act that is permitted and lawful; there is no reward for performing nor any punishment for neglecting it. Fast foods can be consumed if the ingredients are *halal*, pure and free from doubtful sources. Likewise, the food must be prepared at a hygienic place and free from any prohibited elements. Furthermore, *Syari'ah* rulings are determined based on the effects of consumption. If there are no side effects, then consumers are permitted to consume it in their daily life. This is in line with the commandment of Allah the Almighty (SWT) for Man to gain the benefits from all lawful food. Allah the Almighty (SWT) says:

*"It is He who created for you all of that which is on the earth. Then He directed Himself to the heaven, [His being above all creation], and made them seven heavens, and He is Knowing of all things..."* (*Al-Baqarah*, 2:29)

Similarly, Allah the Almighty (SWT) allows human beings to eat good and nutritious food as He says:

*"They ask you, [O Muhammad], what has been made lawful for them. Say, Lawful for you are [all] good foods."* (*Al-Maidah*, 5:4)

Furthermore, there is another evidence (*dalil*) that highlights that Allah permits consuming every good thing. Likewise, if the food is of good quality, it is permissible to take the benefits and consume it as a dietary routine. Allah the Almighty (SWT) says:

"...*and makes lawful for them the good things*..." (*Al-A'raf*, 7:157)

This demonstrates that everything is permissible for human consumption unless there is evidence to prohibit it. It is compatible with the hadith of Prophet Muhammad (please be upon him-PBUH):

ما أحل الله في كتابه فهو حلال وما حرم فهو حرام وما سكت عنه فهو عافية فاقبلوا من الله عافيته فإن الله لم يكن نسيا

Meaning:

*"What makes lawful by Allah SWT is lawful, and what makes forbidden by Allah SWT is unlawful, and what makes silent by Allah SWT (in terms of halal and haram) is permitted. Hence, accept the power of Allah SWT, because Allah SWT will never forget anything (without explanation)".* (Narrated by *al-Darquṭni*, 2:137)

This hadith signifies that Allah the Almighty (SWT) decides on the lawful, unlawful and permissibility. There is also a general rule that is used to define the concept of *Syari'ah* ruling regarding food. It is advised that all products be eaten as long as there is no evidence (*dalil*) to forbid their use based on the Islamic legal maxim:

الأصل في الأشياء الإباحة حتى يدل الدليل على التحريم

Meaning:

"The original ruling for everything (that is beneficial) is permissible (mubah) until there is evidence of its prohibition." (*Al-Suyuti*, 1983)

The consumption of fast food is permissible if it is not harmful and is derived from lawful sources. These *Syari'ah* rulings apply to all fast-food products as long as they are compatible with *halal* principles. However, consuming fast food without exercising control may lead to several illnesses such as cardiovascular disease or diabetes. Hence, the ruling may change into *makruh* or haram.

*1.5.2 Abominable (Makruh)*

*Makruh* refers to an act that is discouraged, although not legally forbidden. Muslims are advised to avoid *makruh* actions because the continued and insistent commission of such acts will lead to sin. In fast-food consumption, it involves foods that do not pose a clear risk but do not have good nutritional value. If the harmful effects of the fast-food are evident to the consumers due to long-term consumption, then the *hukm* (Islamic rulings) changes to *makruh*. Hence, consumers need to limit their fast-food intake to maintain their health. This is in line with the commandment of Allah to Muslims that they should abstain from following in the footsteps of Satan. Allah the Almighty (SWT) says:

*"O mankind, eat from whatever is on earth [that is] lawful and good and do not follow the footsteps of Satan. Indeed, he is to you a clear enemy*.*"* (*Al-Baqarah*, 2:168)

This Quranic verse describes the prohibition of Allah the Almighty (SWT) from following Satan's footsteps (evil). Besides, human beings must eat all the lawful food and cultivate all proper sustenance bestowed on this earth. Allah the Almighty (SWT) commands Muslims to always be grateful for His blessings by sustaining human beings with a good livelihood. This symbolises a sign of piety and faith towards Allah the Almighty (SWT):

*"And eat of what Allah has provided for you [which is] lawful and good. And fear Allah, in whom you are believers*.*"* (*Al-Maidah*, 5:88)

Similarly, there is a hadith of the Prophet Muhammad PBUH related to choosing good food in the dietary routine. This is because eating bad food has an effect on one's daily routine and his relationship with Allah the Almighty (SWT). This is in line with the hadith of Prophet Muhammad PBUH:

إن الله طيب، لا يقبل إلا طيبا، وإن الله أمر المؤمنين بما أمر به المسلمين فقال: يا أيها الرسل كلوا من الطيبات واعملوا صالحا إني بما تعلمون عليم وقال: يا أيها الذين آمنوا كلوا من طيبات ما رزقناكم ثم ذكر الرجل يطيل السفر، أشعث أغبر، يمد يديه إلى السماء: يا رب يا رب ! ومطعمه حرام، ومشربه حرام، وملسبه حرام، وغذي بالحرام، فأنى يستجاب لذلك

Meaning:

*"Verily Allah the Exalted is pure (tayyib). He does not accept but that which is pure. Allah commands the believers with what He commanded the Messengers. Allah the Almighty has said: "O you Messengers! Eat of the good things and act righteously". And Allah the Almighty also said: "O you who believe! Eat of the good things that We have provided you with. Then he (the Prophet) mentioned (the case of) the man who, having journeyed far, is dishevelled and dusty and who stretches out his hands to the sky (saying): "O Lord! O Lord!" (while) his food was unlawful, his drink was unlawful, his clothing was unlawful, and he is nourished with unlawful things, so how can he be answered?"* (Narrated by *Muslim*, 7:88)

Consuming fast food regularly over a prolonged period can be categorised as *makruh* as it leads to harm to consumers' health. Any fast food containing sugar, salt, calories and excess fat should be avoided. On the other hand, the *Syari'ah* rulings remain permissible if there are no side effects for fast food in the long term as long as it is compatible with *halal* principles.

*1.5.3 Prohibited (Haram)*

Haram refers to what is forbidden or inviolable under Islamic law. In fast-food consumption, it relates to illegal, impure food and food from doubtful sources. It also involves preparing and processing sources taken from dirty and unclean areas and using unclean materials. The effects of its consumption may cause health problems quickly and lead to various diseases if the preparation process does not comply with *Syari'ah,* such as using prohibited sources or preparing at a dirty area, or mixing with prohibited sources.

There is no harm in the act of consumption and Allah the Almighty (SWT) prohibits Muslims from being involved in an unsafe situation. Consumption is intended to protect man's life from harm which is one of the main objectives in *Maqasid al-Syari'ah*. Allah the Almighty (SWT) says:

*"And do not throw [yourselves] with your [own] hands into destruction [by refraining]"* (*Al-Baqarah*, 2:195)

There is a hadith that explains the general principle to protect life from harm. It is recognised as one of the Islamic legal maxims (method) to analyse various aspects in determining *Syari'ah* rulings. Prophet Muhammad PBUH said:

لا ضرر ولا ضرار

Meaning:

*"Harm shall not be inflicted nor reciprocated*".

(Narrated by *Ibn Majah*, hadith no. 2341)

The prohibition against consuming harmful food is to preserve the prosperity of Muslims. It complies with *Maqasid al-Syari'ah* to protect human life, (al-Zuhayli, 2009). The prohibition of eating fast food applies if the side effects affect the consumers in a short period. These problems may affect certain groups of people, particularly those suffering from diabetes, hypertension, or cardiovascular diseases, who need to control their dietary intake. Nevertheless, consumers should avoid consuming any fast-food haram through doubtful preparation processes, although there is still no evidence to confirm its harmfulness. Therefore, it is essential to disclose the correct information regarding fast-food ingredients to the public as soon as possible to prevent misinformation about the ingredients among consumers.

**2. CONCLUSION**

Today, Malaysia sees a rise in fast-food intake and numerous burdens of over-nutrition and malnutrition among children. Children's nutrient intake and overall health can be affected by where and what they eat. This leads to an energy-dense, nutrient-poor, low fibre and micronutrient, and high in refined grains, sodium, and sugar diet. Therefore, fast food consumption should be avoided if it is proven to be harmful to consumers. But, if there are no side effects, consumers can enjoy eating and benefit from it as this is permissible according to the *Syari'ah* ruling. Meanwhile, it is prohibited to consume fast food known to be harmful within a short time or eating food derived from prohibited sources. The diversity of these rulings represents the versatility of the *Syari'ah*, which does not stipulate the same ruling in each case. This is how the implementation of a ruling corresponds to the different views parallel with a specific situation and circumstance.

Table 1: The Islamic ruling on fast-food intake based on source and side-effect.

|  |  |  |  |
| --- | --- | --- | --- |
| Fast-food consumption | Sources | Side-effect | Islamic Ruling |
| Halal-healthy & high nutrition | No risk | Permissible |
| Halal-less healthy & low nutrition | Low risk | Detestable |
| Halal/Haram-unhealthy | High risk | Prohibited |

**REFERENCES**

1. Abdulmumeen, H.A., Risikat, A.N. & Sururah, A.R. (2012). Food: Its preservatives, additives and applications, International Journal of Chemical and Biochemical Sciences, 1, 36-47.
2. Ahmed, J., Alnasir, F., Jaradat, A., Al Marabheh, A. J., & Hamadeh, R. R. (2019). Association of Overweight and Obesity with High Fast-Food Consumption by Gulf Cooperation Council Medical Students. Ecology of food and nutrition, 58(5), 495–510.
3. Akbay, C., Tiryaki G.Y. & Gul, A. (2007). Consumer characteristics influencing fast food consumption in Turkey, Food Control, 1-10.
4. Alagappan, M., Lekhraj, R. & Sharif, Z.M. (2019). Prevalence of overweight/obesity and its associated factors among secondary school students in semi urban area in Malaysia, Medical Journal of Malaysia, 74(6), 513-520.
5. Alagappan, M., Lekhraj, R., Sharif, Z.M. & Thevandran, K. (2015). Prevalence of overweight/obesity and its associated factors among secondary school students in Batang Padang District, Perak, Medical Journal of Malaysia, 70(1).
6. Al-Faris, N.A., Al-Tamimi, J.Z., Al-Jobair, M.O. & Al-Shwaiyat, N.M. (2015). Trends of fast food consumption among adolescent and young adult Saudi girls living in Riyadh, Food & Nutrition Research, 59(2), 1-10.
7. Al-Nawawi. (1999). Sharh Ṣahih Muslim, Beirut: Dar al-Khayr.
8. Al-Suyuti, Jalal al-Din. (1983). Al-Ashbah wa al-Naza’ir, Beirut: Dar al-Kutub al-‘Ilmiyyah.
9. al-Zuhayli, W. (2009). Usul al-Fiqh al-Islami. Damsyik: Dar al-Fikr.
10. Ashakiran & Deepthi. (2012). Fast Foods and their Impact on Health, Journal of Krishna Institute of Medical Sciences University, 1(2), 7-15.
11. Balkish Mahadir Naidu, Siti Zuraidah Mahmud, Rashidah Ambak, Syafinaz Mohd Sallehuddin, Hatta Abdul Mutalip, Riyanti Saari, Norhafizah Sahril and Hamizatul Akmal Abdul Hamid. (2013). Overweight among primary school-age children in Malaysia, Institute for Public Health, Ministry of Health, 22(3), 408-415.
12. Benton, D. (2004). Role of Parents in the Determination of Food Preferences of Children and the Development of Obesity, International Journal of Obesity, 28, 858-869.
13. Bodicoat, D.H., Carter, P., Comber, A., Edwardson, C., Gray, L. J., Hill, S., Webb, D., Yates, T., Davies, M. J., & Khunti, K. (2015). Is the number of fast-food outlets in the neighbourhood related to screen-detected type 2 diabetes mellitus and associated risk factors?, Public Health Nutrition, 18(9), 1698–1705.
14. [Boutelle K.N](http://www.ncbi.nlm.nih.gov/pubmed/?term=Boutelle%20KN%5BAuthor%5D&cauthor=true&cauthor_uid=17212838)., [Fulkerson J.A](http://www.ncbi.nlm.nih.gov/pubmed/?term=Fulkerson%20JA%5BAuthor%5D&cauthor=true&cauthor_uid=17212838)., [Neumark-Sztainer D](http://www.ncbi.nlm.nih.gov/pubmed/?term=Neumark-Sztainer%20D%5BAuthor%5D&cauthor=true&cauthor_uid=17212838)., [Story, M](http://www.ncbi.nlm.nih.gov/pubmed/?term=Story%20M%5BAuthor%5D&cauthor=true&cauthor_uid=17212838)., [French, S.A](http://www.ncbi.nlm.nih.gov/pubmed/?term=French%20SA%5BAuthor%5D&cauthor=true&cauthor_uid=17212838). (2007). Fast Food For Family Meals: Relationships With Parent And Adolescent Food Intake, Home Food Availability And Weight Status, [Public Health Nutr.,](http://www.ncbi.nlm.nih.gov/pubmed/17212838) 1, 16-23.
15. Bundhun, D., Rampadarath, S., Puchooa, D., & Jeewon, R. (2018). Dietary intake and lifestyle behaviours of children in Mauritius. Heliyon, 4(2), e00546.
16. Caleyachetty, R., Thomas, G., Kengne, A., Echouffo-Tcheugui, J., Schilsky, S., Khodabocus, J., & Uauy, R. (2018). The double burden of malnutrition among adolescents: analysis of data from the Global School-Based Student Health and Health Behavior in School-Aged Children surveys in 57 low- and middle-income countries. The American journal of clinical nutrition, 108 2, 414-424.
17. Cheong, K.C., Ling, C.Y., Hock, L.K., Ghazali, S.M., Huey, T.C., Ibrahim, M.K., Baharudin, A., Man, C.S., Kang, C.Y., Ahmad, N.A., & Yusoff, A.F. (2019). Association between Availability of Neighborhood Fast Food Outlets and Overweight Among 5–18 Year-Old Children in Peninsular Malaysia: A Cross-Sectional Study. International Journal of Environmental Research and Public Health, 16.
18. Chong, K.H., Wu, S.K., Noor Hafizah, Y., Bragt, M.C., Poh, B.K.; SEANUTS Malaysia Study Group. (2016). Eating Habits of Malaysian Children: Findings of the South East Asian Nutrition Surveys (SEANUTS), Asia Pac J Public Health. 28 (5 Suppl), 59S-73S.
19. Currie, J., Vigna, S.D., Moretti, E. & Pathania, V. (2010). The Effect of Fast Food Restaurants on Obesity and Weight Gain, American Economic Journal: Economic Policy 2, 32–63.
20. Das, J.C. (2015). Fast Food Consumption in Children, iMedPub Journal, 1, 1-4.
21. Davis, B. & Carpanter, C. (2009). "Proximity of Fast-Food Restaurant to Schools and Adolescent Obesity, American Journal of Public Health, 99(3), 505–510.
22. Dixon, H.G., Scully, M.L., Wakefield, M.A., White, V.M., & Crawford, D.A. (2007). The effects of television advertisements for junk food versus nutritious food on children's food attitudes and preferences. Social Science & Medicine, 65(7), 1311–1323.
23. Duffey, K.J., Gordon-larson, P., Jacobs, D. R., Williams, O.D., & Popkin, B.M. (2007). Differential associations of fast food and restaurant food consumption with 3-y change in body mass index: The Coronary Artery Risk Development in Young Adults Study, Am J Clin Nutr, 85(1), 201-208.
24. Effertz, T., Teichert, T., & Tsoy, M. (2019). Fast food, ads, and taste in a Russian child's mind. Psychology & Marketing, 36, 175-187.
25. Egger, G., & Dixon, J. (2014). Beyond obesity and lifestyle: a review of 21st century chronic disease determinants. BioMed research international, 2014, 731685.
26. Elbel, B., Gyamfi, J. & Kersh, R. (2011). Child and Adolescent Fast Food Choice and The Influence of Calorie Labeling: A Natural Experiment, International Journal of Obesity, 35, 493–500.
27. Elbel, B., Tamura, K., McDermott, Z. T., Wu, E., & Schwartz, A. E. (2020). Childhood Obesity and the Food Environment: A Population-Based Sample of Public School Children in New York City. Obesity (Silver Spring, Md.), 28(1), 65–72.
28. Fang Tan, Xin Zhao, Ruokun Yi, Nanxin Xu& Jiaqiong Zhang. (2020). Analysis of Influence of Family Status on Dietary Behavior of Preschool Children through Data Samples: A Case Study of Eating Frequency of Western Fast Food, J. Phys.: Conf. Ser. 1437, 012117.
29. Garber, A.K. & Lustig, R.H. (2011). Is Fast Food Addictive, Current Drug Abuse Reviews,4(3), 146-162.
30. Grier, S.A., Mensinger, J., Huang, S.H., Kumanyika, S.K. & Stettler, N. (2007). Fast-Food Marketing and Children's Fast-Food Consumption: Exploring Parents' Influences in an Ethnically Diverse Sample, Journal of Public Policy & Marketing, 26(2), 221-235
31. Heidal, K.B., Colby, S.E., Mirabella, G.T., Al-Numair, K.S., Bertrand, B. & Gross, K.H. (2012). Cost and Calorie Analysis of Fast Food Consumption in College Students, Food and Nutrition Sciences, 3, 942-946.
32. Jacob, L., Stubbs, B., Firth, J., Smith, L., Haro, J.M. & Koyanagi, A. (2020). Fast food consumption and suicide attempts among adolescents aged 12–15 years from 32 countries, Journal of Affective Disorders, 266, 63-70.
33. Johnson, S., Sahu, R. & Saxena, P. (2012). Nutritional Analysis of Junk Food, India: Centre for Science and Environment.
34. Kaushik, J.S., Narang, M. & Parakh, A. (2011). Fast Food Consumption in Children, Indian Pediatrics, 48, 97-101.
35. Khan, S., Hussain, S., & Yaqoob, F. (2013). Determinants of Customer Satisfaction in Fast Food Industry A Study of Fast Food Restaurants Peshawar Pakistan, Studia Commercialia Bratislavensia, 6(21), 56-65
36. Kim, D., & Ahn, B. I. (2020). Eating Out and Consumers' Health: Evidence on Obesity and Balanced Nutrition Intakes. International journal of environmental research and public health, 17(2), 586.
37. Lai, L.T. (2012). Front of Pack Labelling, Media Statement, Minister of Health. Retrieved from http://www.moh.gov.my/index.php/database\_stores/store\_view\_page/22/239
38. Lever J. (2020) Understanding halal food production and consumption in 'the West'. Beyond dominant narratives, in Cambio. Rivista sulle trasformazioni sociali, Vol. 9, n. 19: 89-102.
39. Li, L., Sun, N., Zhang, L., Xu, G., Liu, J., Hu, J., Zhang, Z., Lou, J., Deng, H., Shen, Z., & Han, L. (2020). Fast food consumption among young adolescents aged 12-15 years in 54 low- and middle-income countries. Global health action, 13(1), 1795438.
40. Lubna, & Handayani, D. (2019). Working women and household expenditures on food away from home in Indonesia. Pertanika Journal of Social Sciences and Humanities, 27(3), 1573-1592.
41. Matsuzaki, M., Sánchez, B. N., Acosta, M. E., Botkin, J., & Sanchez-Vaznaugh, E. V. (2020). Food environment near schools and body weight-A systematic review of associations by race/ethnicity, gender, grade, and socio-economic factors. Obesity reviews: an official journal of the International Association for the Study of Obesity, 21(4), e12997.
42. Ming, M.F., Ying, G.C. & Siti Zaleha, M.K. (2006). Eating Patterns of School Children and Adolescents in Kuala Lumpur, Ma1 J Nutr, 12(1): 1-10
43. Mohammad Aizat Jamaludin, Nur Diyana Abd Rahman, Nurulhidayah Mohd Fadzillah & Mohd Anuar Ramli. (2018). Religious and Cultural Influences on the Selection of Menu, In Md. Eaqub Ali & Nina Naquiah Ahmad Nizar (Eds.), Preparation and Processing of Religious and Cultural Foods, USA: Woodhead Publishing, 15-23.
44. Mohd Azlan Abdullah & Noraziah Ali. (2011). Eating Habits among University Students and Its Implication Towards Learning. Jurnal Personalia Pelajar, 14, 59-68.
45. Mohseni, M. and Aryankhesal, A. (2020). Developing a Model for Prevention of Malnutrition among Children under 5 years old, BMC Health Services Research, 20 (718), 1-9.
46. Nagvanshi, D. (2015). The Effect of Fast Food on the Body, Indian Journal of Research, 4(9), 7-9.
47. Ng, S. H., Kelly, B., Se, C. H., Sahathevan, S., Chinna, K., Ismail, M. N., & Karupaiah, T. (2015). Reading the mind of children in response to food advertising: a cross-sectional study of Malaysian school children's attitudes towards food and beverages advertising on television. BMC Public Health, 15, 1047.
48. Nik Nairan Abdullah, Mazlin Mohamad Mokhtar and Mohd Harriszamani Abu Bakar, Waqar Al-Kubaisy. (2015). Trend on Fast Food Consumption in Relation to Obesity among Selangor Urban Community, Procedia - Social and Behavioral Sciences, 202.
49. Palos Lucio, A. G., Sansores Martínez, D. N., Olvera Miranda, C., Quezada Méndez, L., & Tolentino-Mayo, L. (2020). Nutritional Quality of Fast Food Kids Meals and Their Contribution to the Diets of School-Aged Children. Nutrients, 12(3), 612.
50. Peltzer, K., Pengpid, S., Samuels, T. A., Özcan, N. K., Mantilla, C., Rahamefy, O. H., Wong, M. L., & Gasparishvili, A. (2014). Prevalence of overweight/obesity and its associated factors among university students from 22 countries. International Journal of Environmental Research And Public Health, 11(7), 7425–7441.
51. Pereira, M.A., Kartashov, A.I., Ebbeling, C.B., Van Horn, L., Slattery, M., Jacobs, D.R. and Ludwing, D.S. (2005). Fast-food Habits, Weight Gain, and Insulin Resistance (the CARDIA study): 15-year prospective analysis, Lancet, 365, 36-42.
52. Poti, J.M. & Popkin, B.M. (2011). Trends in Energy Intake Among U.S. Children By Eating Location And Food Source, 1977-2006, J Am Diet Assoc, 111(8), 1156–1164.
53. Potvin Kent, M, Pauzé, E, Roy, E‐A, de Billy, N, Czoli, C. (2019). Children and adolescents' exposure to food and beverage marketing in social media apps. Pediatric Obesity, 14, e12508.
54. Powell, L.M. & Nguyen B.T. (2013). Fast-food and Full-Service Restaurant Consumption Among Children And Adolescents: Effect On Energy, Beverage, And Nutrient Intake, [JAMA Pediatr, 167(1), 14–20.](http://www.ncbi.nlm.nih.gov/entrez/eutils/elink.fcgi?dbfrom=pubmed&retmode=ref&cmd=prlinks&id=23128151)
55. Rojekar NP, Sajjanar A, Chavan P, Shukla H, Bhattad D. (2019). Assessment of Knowledge, Attitude and Factors affecting consumption of fast food in 8-12 years of Children: A Cross Sectional Study. J Adv Med Dent Scie Res;7(8), 100-105.
56. Rosenheck, R. (2008). Fast food consumption and increased caloric intake: a systematic review of a trajectory towards weight gain and obesity risk. Obesity reviews: An official journal of the International Association for the Study of Obesity, 9(6), 535–547.
57. Sebastian, R.S., Wilkinson, E.C. & Goldman, J.D. (2009). U.S. Adolescents and My Pyramid: Associations between Fast-Food Consumption And Lower Likelihood Of Meeting Recommendations, J Am Diet Assoc, 109(2), 226–235.
58. Sharma, V. (2013). Adolescents Knowledge Regarding Harmful Effects of Junk food, IOSR Journal of Nursing and Health Science, 1(6), 1-4.
59. Smith, R., Kelly, B., Yeatman, H., & Boyland, E. (2019). Food Marketing Influences Children's Attitudes, Preferences and Consumption: A Systematic Critical Review. Nutrients, 11(4), 875.
60. Stender, S., Dyerberg, J. & Astrup, A. (2007). Fast Food: Unfriendly and Unhealthy, International Journal of Obesity, 31, 887–890.
61. Story, M., Neumark-Sztainer, D., & French, S. (2002). Individual and Environmental Influences on Adolescent Eating Behaviors, Journal of the American Dietetic Association, 102(3), 40-51.
62. Tim, L.S., Beevi, Z. & Yeap, R. (2014). Effects of Fast-Food Branding on Children's Taste Preferences, Southeast Asia Psychology Journal, 2, 39-56.
63. Totu, A. & Sendera H., (2015). Faktor Penentu Sikap dan Kepercayaan Kanak- kanak di Sabah Mengenai Makanan dan Pemakanan (Determination Factors of children’s traits and beliefs among children in Sabah regarding of Food and Eating Habits), Global Journal of Business and Social Science Review GJBSSR 1(2): 589.
64. Totu, A., Igau O.A. & Halik, M. (2013). T.V. Commercials and Choice of Food among Children in Sabah, Malaysia, IOSR Journal Of Humanities And Social Science, 15(6), 81-89.
65. Truman, E., Elliott, C. (2019). Identifying food marketing to teenagers: a scoping review. Int J Behav Nutr Phys Act 16,67.
66. U.S. Department of Agriculture and U.S. Department of Health and Human Services, (2010). Dietary Guidelines for Americans. Washington, DC: U.S. Government Printing Office.
67. Virtanen, M., Hanne Kivimäki, Jenni Ervasti, Tuula Oksanen, Jaana Pentti, Anne Kouvonen, Jaana I. Halonen, Mika Kivimäki, Jussi Vahtera. (2015). Fast-food outlets and grocery stores near school and adolescents’ eating habits and overweight in Finland, European Journal of Public Health, 25(4), 650–655.
68. Watts, A. W., Barr, S. I., Hanning, R. M., Lovato, C. Y., & Mâsse, L. C. (2018). The home food environment and associations with dietary intake among adolescents presenting for a lifestyle modification intervention. BMC nutrition, 4, 3.
69. World Health Organization (WHO). (2020). Childhood overweight and obesity, <https://www.who.int/dietphysicalactivity/childhood/en/>
70. Yoon, S. R., Fogleman, S. K., Kim, H., Lee, K. E., & Kim, O. Y. (2020). Breakfast Intake Effect on the Association between Fast-Food Consumption and the Risk of Obesity and Dyslipidemia in Korean Adults Aged 20-39 Years Based on the Korea National Health and Nutrition Examination Survey IV 2013-2014. Clinical nutrition research, 9(2), 107–121.
71. Zigmont, V. & Bulmer, S.M. (2015). The Impact of Caloric Information on College Student's Fast Food Purchasing Intentions, American Journal of Health Education, 46(2), 70-78.