

THE INFLUENCES OF HYGIENE ATTRIBUTES TOWARD CUSTOMERS FEAR OF COVID-19 AT THAI RESTAURANT IN KOTA BHARU, KELANTAN.

By

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FYP FHPK

LIST OF SYMBOLS AND ABBERVIATIONS

Abbreviations

COVID-19 Corona Virus-19

SARS-CoV-2 Severe Acute Respiratory Syndrome Coronavirus 2

WHO World Health Organization

F&B Food and Beverage

MCO Movement Control Order

SOP Standard Operation Procedure

IV Independent Variables

PPKP Penolong Pegawai Kesihatan Persekitaran

DV Dependent Variable

PTSD Post-Traumatic Stress Disorder

SPSS Statistical Package for Social Science

www Web Wide Web

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ABSTRACT

In Malaysia, the impact of COVID-19 had put management in the business industry under pressure. The prolonged spread of the coronavirus had caused business in Malaysia to not grow. This study combined the characteristics of restaurant hygiene such as hygiene of customer-use, personal hygiene of staff and hygiene of workspaces. The purpose of this study was because not many studies had been conducted to investigate the perception of risk in doing business following the health crisis and consumer fear of the virus. Therefore, this study was designed to examine the influence of cleanliness on customers' fear of COVID-19 on businesses in Malaysia. This study would use a questionnaire as a method to collect data and it would be analyzed using SPSS. This study was believed to give good insight to academics and practitioners in preparing them for the post-corona field for the new normal after the limited life experience during the unprecedented epidemic.

Keyword: Fear of COVID-19

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ABSTRAK

Di Malaysia, kesan COVID-19 telah meletakkan pengurusan dalam industri perniagaan di bawah tekanan. Penyebaran virus coronavirus yang berpanjangan telah menyebabkan perniagaan di Malaysia tidak berkembang. Perniagaan bukan bersemuka adalah paradigma baharu yang diamalkan untuk meminimumkan risiko yang dilihat oleh individu. Bagaimanapun, perniagaan bukan bersemuka atau dikenali sebagai "jualan dalam talian" menyebabkan kejatuhan ekonomi negara pada masa yang sama keadaan pelancong dalam dan luar negara menjadi lebih rendah. Selain itu, tidak banyak kajian dilakukan dalam menyiasat persepsi risiko dalam menjalankan perniagaan dalam talian berikutan krisis kesihatan dan ketakutan pengguna terhadap virus. Oleh itu, kajian ini direka untuk mengkaji pengaruh sifat kebersihan terhadap ketakutan pelanggan terhadap COVID-19 ke atas perniagaan di Malaysia. Kajian ini akan menggunakan soal selidik sebagai kaedah untuk mengumpul data. Data yang dikumpul daripada soal selidik akan dianalisis menggunakan SPSS. Kajian ini dipercayai dapat memberi gambaran yang baik kepada ahli akademik dan pengamal dalam menyediakan mereka untuk pasca medan korona untuk normal baharu selepas pengalaman hidup terhad semasa wabak yang belum pernah berlaku sebelum ini.

Kata Kunci: Takut terhadap COVID-19

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CHAPTER 1

INTRODUCTION

1.1 BACKGROUND OF THE STUDY

The COVID-19 pandemic was initially identified in mid-December 2019, with the first case reported in Wuhan, China. (Wang et. al., 2020 & Yuki et al., 2020)). An infectious disease called COVID-19 is brought on by the SARS-CoV-2 virus (Shereen et. al., 2020). This virus can cause infections such as cough, fever, cold, lung infection and shortness of breath that can cause death (Boyraz et al., 2020). Anyone infected with COVID-19 can spread it to others, even if the infected person has no symptoms (Katella, 2022). This outbreak of COVID-19 can be classified as a pandemic because this epidemic has spread massively and rapidly throughout the world (Cucinotta & Vanelli, 2020). Since it is spreading so quickly, the World Health Organisation (WHO) has declared this coronavirus a global health emergency (BERNAMA, 2020).

COVID-19 is a highly contagious and pathogenic viral infection produced by the severe acute respiratory SARS-CoV-2 virus, which caused a global pandemic and a significant loss of human life globally (Sheree et al., 2020). This pandemic is challenging core assumptions about the nature of human life in societies all around the world (Setterster, 2020). COVID-19 is extremely dangerous because it is hot and visible to the naked eye. If someone is not cautious enough, it can enter their respiratory system quietly and infiltrate their lungs (Irwing et. al.). The most severe COVID-19 symptoms are dry cough, fatigue, and fever (Wang et. al., 2020).

Infectious disease pandemics like SARS-CoV-2 and COVID-19 force social norms to alter and create incredibly difficult difficulties for public health (Long E., et al., 2022). The COVID-19-causing virus, SARS-COV-2, enters the body through the eyes, nose or mouth after being transferred from hands to faces through airborne droplets (Cleveland Clinic, 2020). The most typical signs of COVID-19 are a dry cough, exhaustion and fever (WHO).

The restaurant industry has been significantly impacted by the recent global COVID-19 pandemic (Dube et al., 2020; Gossling et al., 2020). This industry's high vulnerability to the outbreak has been universally recognised as a result of the worry that it creates in customers about social exception (Gossling et al., 2020). Restaurant owners feel it is vital to provide measures for client safety and security to encourage repeat business since customers' regular visits to restaurants may be threatened by potential exposure to COVID-19 dangers (Debe et al., 2020). However, if customer worries regarding the potential of COVID-19 grow, major changes in customer behavioral intentions are predicted. Because it directly affects restaurant operations, customer retention is important for restaurant success (Yan et al., 2015). In this context, it is necessary to investigate the variables that affect repeat restaurant customer intentions in context of the developing situation due to COVID-19.

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1.2 PROBLEM STATEMENT

The COVID-19 pandemic has a direct impact on public health such as shortness of breath, coughing, and at worst can result in death (Paul & Chowdhury 2020a). As of 12 December 2022, COVID-19 has resulted in 36,763 deaths in Malaysia (Sinar Harian, 2022). Restaurants are one of the industries dealing with various issues related to COVID-19 and there is no denying that the COVID-19 pandemic is affecting almost all F&B businesses. This situation causes many people to be afraid to visit restaurants, resulting in many restaurant owners having to close their businesses. According to Awani (2021), it is estimated that almost 3000 restaurant operators and eateries throughout Kelantan are faced with the closure of business premises due to the implementation of Movement Control Order 2.0 (MCO 2.0). As a result of the closure of business sectors such as food premises, many entrepreneurs are forced to close their businesses. This causes them to lose their source of income.

Unhygiene customer-use can make customers afraid to visit the restaurant. Customers are worried about whether the facilities or equipment provided are in a clean condition or not. This is because the COVID-19 virus can easily spread even if it is only through contact. According to (Delea et al., 2020; Yu et al., 2021b), customer interaction can be direct or indirect. Meeting and shaking hands are direct interactions, whereas indirect interactions, such as frequent space utilisation in restaurants, increase the risk of infection.. Therefore, because this Thai restaurant is not bound by any SOP, this restaurant operator does not care about cleanliness and allows customers to use unsanitized facilities. Customer interaction with facilities can promote the spread of the Covid-19 epidemic, according to (Park et al., 2019).

Moreover, the COVID-19 virus can also spread through personal hygiene of staff. This is because, they are among the groups that communicate a lot with customers. The spread of the Covid-19 epidemic between staff and customers, whether directly or indirectly, has the potential to increase viral infections, according to (Boyraz et al., 2020). The way workers do not follow SOP such as not wearing a face mask and wearing dirty clothes can be one of the factors to spread viral infections. According to Utusan Malaysia (2020), a restaurant worker was fined for not wearing a face mask. Not to forget, employees do not perform regular health check-ups especially when they experience symptoms such as cough, fever and cold, which are likely to be affected by the COVID-19 virus. When they are unwell at work, this will give fear to customers to visit the restaurant. This is because, customers are worried if they can get infected.

In addition, the problem of contagion of COVID-19 can also occur when hygiene at the workplace is not clean. It is well known that the COVID-19 virus can spread through the air. According to Jamaludin, when the environment is not clean, the restaurant staff become uncomfortable and afraid to go to work because they are worried if they get infected with this virus. This situation not only creates fear in employees but it also creates fear in customers to visit the restaurant. According to Ghazali (2021), customers are afraid to leave the house because infection cases are still high recently. In fact, restaurant owners who do not focus on cleanliness and employee safety may not care about sanitizing the workplace environment.

In fact, even after the dissolution of the MCO, customers are still afraid to go to restaurants because the COVID-19 virus is still spreading everywhere (Ahmad, 2021). So in order to prevent this virus from continuing to spread, all restaurants still need to

implement the SOP that has been set by the Ministry of Health. To fill in this gap, we responded to the call of Yu et al. (2021) by creating and putting to the test a restaurant hygiene attributes theoretical model. Based on previous research done by Siddiqi et al. (2022), the researcher investigates the role of hygiene attributes such as cleanliness of customer-use, personal hygiene of staff and hygiene of workspaces will create fear of COVID-19 and psychological stress of customers. Researchers also used perceived weakness of the relationship between hygiene attributes and fear of COVID-19. Finally, in the context of the COVID-19 pandemic, the findings have much impact for the food and beverage industry.

1.3 SCOPE OF STUDY

The primary focus of the study is on how restaurant hygienic factors affect customers' anxiety of COVID-19. The researcher also investigated the connection between variables like workplace hygiene, staff personal hygiene, and customer-use hygiene. The respondents are made up of people of diverse sexes and ethnicities, including Malay, Chinese, and Indian or people of other target population races. The goal of this study is to pinpoint the aspects of restaurant hygiene that contribute to customers' concern of COVID-19.

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1.4 RESEARCH OBJECTIVE

The objectives of the study in the research attempted to:

- i) To examine the relationship between hygiene of customer use and customers' fear of COVID-19 toward Thai restaurant in Kota Bharu, Kelantan.
- ii) To examine the relationship between personal hygiene of staff and customers' fear of COVID-19 toward Thai restaurant in Kota Bharu, Kelantan.
- iii) To examine the relationship between hygiene of workspaces and customers' fear of COVID-19 toward Thai restaurant in Kota Bharu, Kelantan.

1.5 RESEARCH QUESTION

The questions of the study in the research attempted to:

- i) What is relationship between hygiene of customers use and customers' fear of COVID-19 toward Thai restaurant in Kota Bharu, Kelantan?
- ii) What is relationship between personal hygiene of staff and customers' fear of COVID-19 toward Thai restaurant in Kota Bharu, Kelantan?
- iii) What is relationship between hygiene of workspaces and customers' fear of COVID-19 toward Thai restaurant in Kota Bharu, Kelantan?

1.6 SIGNIFICANCE OF STUDY

This study will provide information on restaurant hygiene concerns where everyone wants to make it a reference material about something that has never been known before and will rise in the future. This study will also discuss the impact of residents and also as customers who emphasize cleanliness, especially in the face of post-covid-19.

1.6.1 TO THE RESEARCHER

In this research article, it helps researchers to find out how the quality of environmental cleanliness and service influences customers and customers to revisit the restaurant. Additionally, this research enables researchers to identify favorable features that also have a good impact on restaurant management and customer satisfaction with the hygiene of the restaurants during the COVID-19 outbreak. The title of this study may provide future scholars with an idea.

1.6.2 TO THE FUTURE CUSTOMER

Future customers may benefit through the research topic because the research provides guidance to fully understand the relationship between hygiene that needs to be taken care of especially in running a business such as food which is also where it should be acted to all restaurant owners about hygiene that has been made.

1.6.3 TO THE HEALTH OF USERS

This research paper is important to customer health and insight to the food and beverage industry where customers can learn about the cleanliness and quality of workers during the covid-19 outbreak.

1.7 DEFINITION OF TERMS

KEY	DEFINITION	SOURCES
TERMS		
Hygiene	Modern definitions of hygiene include cleaning and,	Jumaa
	more specifically, any action that minimizes or lowers	(2004)
	the presence of dangerous infectious agents.	
Psychological	The word "psychological discomfort" refers to the	<u>Viertiö</u> et
distress	symptoms of stress, anxiety, and depression. High	al., (2021)
	levels of psychological stress are an indication of poor	
70	mental health since they can cause common mental	
1	disorders like depression and anxiety disorders.	

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Fear of	Fear of COVID-19 is more associated with anxiety and	Tzur Bitan
COVID-19	emotional stress, but at a lower level than depression.	et al.,
		(2020)
	The COVID-19 outbreak also has effects on other	
\	people, including the closure of businesses, schools,	Ornell et
	and public spaces, adjustments to work schedules, and	al., (2020)
	isolation, which can result in emotions of helplessness.	
Customer	Customer behavior is the study of how groups,	Nawal
behavior	individuals and organizations purchase, choose, utilize,	(2022)
	and discard products, concepts, services or experiences	
	to meet their needs and desires.	

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1.8 SUMMARY

In this chapter, researchers investigated restaurant hygienic characteristics and customers' fear of COVID-19. In terms of the study's background, it has been explained regarding the problem itself. In summary, customers have found it challenging to eat out due of the widespread COVID-19 outbreak. Hygiene standards need to be developed in order to protect guests and restaurant employees from infection. Numerous COVID-19-related topics were addressed in the literature study, however restaurant cleanliness during the COVID-19 epidemic was not one of them. Therefore, it was imperative to look into how perceived restaurant sanitary attributes affected patron behaviour. The current study examined the effects of customer-use, personal hygiene of staff and hygiene of workplaces According to our findings, customers' anxiety of COVID-19 was heightened by how hygienic they thought it was, causing psychological distress and urging them to engage in preventative behavior. Furthermore, this study discovered that perceived weakness affects the relationship between hygiene attributes and customers' fear of COVID-19.

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CHAPTER 2

LITERATURE REVIEW

2.1 INTRODUCTION

A review of the relevant literature is presented in this chapter. The study establishes a deeper understanding of how restaurant sanitation affects customers' anxiety of COVID-19. We selected a Thai restaurant in Kelantan as the study's subject for this research.

2.1.1 THAI RESTAURANTS IN KOTA BHARU, KELANTAN.

Thai restaurants are quite popular in Malaysia because this Thai cuisine is rich in various flavors that complement the dishes such as balanced sour, sweet and spicy flavors (Putri, 2021). As Kelantan is just a land border away from Thailand, many food here are being influenced by the Thai culture as many Thai came over to live here (Xunsheng, 2022). Due to its variety of flavors, it has successfully captured the hearts of many food lovers in Malaysia (Bunmak, 2013). Thai cuisine that is popular and synonymous with Malaysians is tomyam, somtam and pad kra phao. The appetizing aroma of cooking with the absorption of spices is a must in the preparation of Thai food (Putri, 2021).

According to Itawrah, Thai cuisine is recognized for its four regional cuisines, which are those of four regional nations, namely the North, North East, Central, and South. Each of these cuisines shares ingredients with nearby nations

like Burma, Loas (North), Cambodia, and Vietnam (East), as well as Malaysia (South). Additionally, there is Thai Royal Cuisine, which has roots in the royal cuisine of Ayutthaya. The cuisine of the flat area of Central Thailand has been greatly influenced by its delicateness, cooking methods, and utilization of ingredients (Grimsrud, 2019).

According to Cinda (2012), one of the local minority groups with Malaysian citizenship status is the Siam people of Kelantan. Othman et al. (2009) claim that there are increasingly more Thai restaurants popping up not only in major cities and small towns, but also in rural areas in Malaysia. It is impossible to determine the Siamese community's early history in Kelantan because there is no reliable historical record of their arrival there. The Tumpat district is home to the vast majority of Kelantan's Siamese population, with the remaining spread throughout the state in Pasir Mas, Bachok, Machang, and Pasir Puteh (Cinda, 2012).

The Siamese food culture in Thailand has a significant influence on the traditional cuisine of the Siamese in Kelantan. This is shown by the fact that the majority of the Siamese cuisine consumed in Kelantan is the same as that consumed in Thailand. To preserve the identity of the Siamese population of Kelantan, the majority of traditional meals that have been assimilated from the cultures of the Malay and Siamese communities are likewise titled in the Thai language (Cinda, 2012).

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2.2 INDEPENDENT VARIABLES

The independent variable (IV) is the cause. Its value is unaffected by the other study variables (Bandhari, 2022). The dependent variable's changes are predicted or explained by the independent variable. From their name, researchers can infer their role in statistical analysis. This definition of independence refers to a variable's independence from other model variables. The cause of an independent variable's change isn't examined by researchers (Frost, 2022).

2.2.1 HYGIENE OF CUSTOMER-USE

According to Munguti (2022), the term "hygiene" is derived from the Greek word "hygieinos," which meaning healthy or everything connected to health and cleanliness. Generally, the term hygiene is used to indicate 'the act of maintaining personal hygiene and environmental conditions, especially to avoid disease or the spread of infectious disease outbreaks. Many infectious infections, including the COVID-19 virus, can be avoided by maintaining good hygiene. It is essential for achieving greater health and well-being. The World Health Organisation (WHO) defines hygiene as the conditions and practises that support maintaining health and preventing the spread of disease.

According to Kenton (2021), a customer is an individual or business that buys goods or services from a business or company. Customers are important because they drive the country's income. The business cannot continue to thrive and grow without them. All businesses compete with other companies to attract

customers, either by lowering prices to expand their customer base, by aggressively advertising their products, by developing unique products or and experiences that customers love.

According to Basir and Husain (2021), since the emergence of this COVID-19 pandemic, many countries affected by this virus have experienced a health crisis that inhibits the economic, development, and social activities of the community in all sectors. What's more, when the government established the implementation of the Movement Control Order (MCO), it has become a severe issue to food safety control processes where enforcement operations have been reduced, limited inspection of food premises, mobilization of enforcement officers as well as limited physical promotional activities that are largely limited under MCO regulations. In Malaysia, the inspection procedure of food premises is subject to the Food Act 1963, which authorizes an officer, the Assistant Environmental Health Officer (PPKP), to enter food premises to assess and ensure the level of cleanliness and safety of food provided to customers. Food companies or restaurants bear a lot of risk because they are among the human groups that need to be in constant contact with customers directly or indirectly. In fact, other spaces such as toilets, prayer hall and lobbies if not properly sanitized, will definitely create doubts in the minds of users or customers (Park et al., 2019).

This causes, customers have become sensitive to the level of cleanliness and safety of food and the environment of restaurants because the probability of viral infection can spread so quickly if there is no screening of customers entering the restaurant. Customers doubt whether the employees in the restaurant really

maintain cleanliness in the restaurant environment or not. For example, is the environment in this restaurant always sanitized, wiped or cleaned every day. Cleanliness, according to Barber and Scarcelli (2010), is a key sign of a restaurant's physical environment. According to studies (Chen and Eyoun, 2021; Duong, 2021; Sandin et al., 2021) customers perceive unsanitary conditions of the physical environment as the primary forerunner of customers' fear of major illness infection.

2.2.2 PERSONAL HYGIENE OF STAFF

According to Munguti (2022), personal hygiene involves cleanliness of the body and clothes, healthy eating, proper living habits, exercise and rest. Good personal hygiene means keeping all parts of the physical body clean and healthy. It is an important part of mental health and maintaining physical. Ford mentioned that personal hygiene is a personal care routine to ensure that one's whole body is clean, fresh, and healthy. One of the most effective ways to protect against infectious diseases is to have good personal hygiene such as frequent hand washing, showering, and using protection such as wearing gloves. For people with poor personal hygiene, this may leave a person exposed to germs and viruses (Ames, 2020). Personal hygiene has been found to help reduce the spread of viruses, such as utilizing masks and hand sanitizer when handling highly contagious disorders like COVID-19 (Leung et al., 2020).

In service-related businesses like restaurants, hotels, and airlines, direct or indirect customer-employee interaction is unavoidable in enclosed environments

(Yu et al., 2021a). It is more likely to contract and spread infectious infections when interacting with customers and contacting their things (Zhang et al., 2020). Nowadays, customers place great emphasis on cleanliness after the outbreak of COVID-19. customers who visit a restaurant will have a feeling of misgivings about the cleanliness done by the employees to take care of the restaurant area. Furthermore, food safety issues in food service businesses are connected to five main factors: inadequate food preparation, tainted utensils, unsafe food supplies, improper storage temperatures, and poor personal hygiene (FDA, 2017). This suggests that employees in restaurants with poor personal hygiene are more likely to instil fear in customers about COVID-19. Customers who come will wonder in themselves whether the workers around them are spared from the COVID-19 epidemic. after the spread of the COVID-19 epidemic, every restaurant that operates should play a role in maintaining cleanliness, especially among employees to ensure that customers who will visit the restaurant will not feel vulnerable to infection.

Recently, scholars have used the appearance of employees' hands, heads, and uniforms to make accurate claims about their personalities. (Yu et al., 2021b). The cleanliness of the workers will be considered by the restaurant authorities to ensure that they are awake from being infected by the COVID-19 virus which will have various effects on the restaurant and will also affect the reputation of the restaurant. Personal hygiene is always expressed in terms of the cleanliness of workers' hands and clothes because it guarantees protection from diseases and infectious diseases (Awan et al., 2020 and Laato et al., 2020).

The vulnerability of COVID-19 infection is increased in the current situation by poor staff hygiene, hand washing without soap, and alcohol-based hand sanitizers (Montgomery et al., 2021). As a result, all personnel will receive a briefing on the importance of maintaining proper hygiene, including usage guidelines, social distance when interacting with customers, and other related topics. The risk of contamination is increased by workers' ignorance of food allergens, food temperature, and hand- and clothing-hygiene practises, which causes customer anxiety and psychological stress (Barber and Scarcelli, 2010). Staff receive less training on the value of maintaining food temperature control to keep food in good condition. The restaurant must make an effort to train all staff members on how to properly regulate the temperature of the food so that it cannot be readily contaminated. There are many options available, such as employing food temperature reading equipment and other methods.

Customers weigh dishware cleanliness, employee personal hygiene, and dish temperature as key factors when calculating their fear of foodborne infection (Leach et al., 2001). Restaurant visitors will evaluate every way of hygiene care performed by the employees and make an evaluation of the matter. According to Duong (2021), cleanliness in restaurants contributes significantly to customer satisfaction compared to unsanitary conditions that build customer fear and anxiousness. Therefore, in the context of COVID-19. As a conclusion, the hygiene care that is not taken by the restaurant workers will create fear in the customers to try in the restaurant because the customers instill the feeling that the infection of the

COVID-19 epidemic will be easily infected if the cleanliness is not taken care of by the workers.

2.2.3 HYGIENE OF WORKSPACES

The level of customer tolerance for the cleanliness of customer use and the staff's personal hygiene has already been proved to be unimportant. A spotless restaurant workspace serves as a cue for customers to assess and a foundation for assessing the quality of the establishment, which is a large picture indicator of the customer's judgment of food quality. Morris (2020) gives evidence to support the claim that the cleanliness of the workplace is a sign of the hygiene requirements that every employer must follow to guarantee that the restaurant offers a healthy and safe work environment that the general public may visit without a doubt.

Customers believe that the degree of cleanliness of the workspace is vital in lowering the likelihood of the virus infection from spreading further in the wake of the COVID-19 epidemic. Customers will harbor reservations about a workspace that is not perfectly cleaned, per (Park et al., 2019). Customers get reluctant to use the workspace when they are aware that the employees are not cleaning it thoroughly as a result of this circumstance. Restaurant surfaces that are often touched are more prone to become contaminated through contact and transmit illness outbreaks. This claim is supported by (Addo et al., 2020).

According to Hung et al. (2018), a restaurant's workstation that isn't hygienic can contribute to the spread of infectious diseases and raise customer

anxiety. In order to stop this pandemic from spreading and draw customers to the restaurant, the work environment must be kept clean. When regular cleaning and sanitation are performed to stop the spread of epidemics in every location made available to customers, the cleanliness of the workplace may be maintained.

2.3 DEPENDENT VARIABLE

The effect is the dependent variable (DV). Its value is impacted by changes to the independent variable (Pritha Bandhari, 2022). The dependent variable is what you want the model to explain or predict. The value of this variable depends on other variables. As a result, you are learning. According to Jim Frost (2022) it is also known as a left-hand variable, outcome variable, and response variable.

2.3.1 CUSTOMERS' FEAR OF COVID-19

Customer behaviour during COVID-19 is affected by fear, anxiety, lockdown, stocking, panic buying, stress due to loss of control, loss of personal freedom, hygiene measures, spending patterns, routine changes, and earning capacity (Kavya Satish et al., 2021). Fear is a very strong emotion in a person which is often triggered by a perceived threat and it can make a person feel afraid, anxious or panic (Paul Jenkins, 2022). According to Fritscher (2022), fear is also said to be a symptom of several conditions such as mental health problems including social anxiety, phobias, panic disorder, and post-traumatic stress disorder (PTSD).

Schimmenti (2020) believes that fear is a basic emotion that arises in reaction to a perceived threat. The psychological organisation of the three concerns related to the COVID-19 pandemic revolves around four interconnected dialectical domains, dread of the body is the first type of dread, followed by fear of significant people or fear of important people, fear of not knowing or fear of knowing, fear of taking action or fear of inaction, and fear of key people. However, it depends on the interpersonal, cognitive, and behavioural aspects of fear. The four fear categories identified during the COVID-19 epidemic reflect important psychological perspectives on reality.

At the beginning of the 2020 COVID-19 pandemic, it has led to an 80% reduction in the Food and Beverage (F&B) sector's open rate for several markets such as restaurants, cafes and eateries in Europe. The COVID-19 pandemic that has invaded the world has affected customer habits and people's choices (Ozbek and Yildirim, 2020). Customers become afraid to go to restaurants because they are worried that there will be a difference in restaurant priorities before and after the COVID-19 pandemic, especially from the aspects of safety and cleanliness. For example, changes in terms of food quality, restaurant environment cleanliness and service quality. This causes customers or customers to prefer to cook their own food at home because they believe it is safer to eat compared to eating bought outside.

The COVID-19 pandemic has a direct influence on the domestic business environment, including the food and beverage industry, construction and manufacturing, tourism, and agricultural, and service industries. (Hin et al., 2020). COVID-19 makes the world community in a state of panic and anxiety to go out

and do activities outside the home (Han, 2022). Furthermore, after the occurrence of this COVID-19, society has become accustomed to the practice of new norms so that this virus of COVID-19 can be contained.

The COVID-19 pandemic has not only caused problems of fear, social, physical, psychological and economic conditions, but it can also be observed globally as a combination of the role of changes in normal life that can cause people to experience higher levels of mental health problems, including fear of infection, stress, uncertainty, anxiety disorders, suicide, sleep problems and mood disorders (Quadros et al., 2021).

Therefore, this study can help researchers to identify the factors and effects that can cause customer fear of COVID-19. There are many factors that can cause fear to customers, but researchers only focus on three factors only, namely hygiene of customer-use, personal hygiene of staff and hygiene of workspaces.

2.4 STUDY SETTING

Due to the COVID-19 pandemic's negative effects on customer health and business operations Covid-19 is feared in Thai restaurants. Restaurant Diving Study (2020), for instance, demonstrates the perception of customer concern related to the unhygienic nature of restaurants, for instance, touching door handles (78% reported risk), utilising restaurant and service areas contact, for instance, 74% showed a probability to contract the disease (Beckett, 2020). In this area, almost 500,000 people have lost their financial stability because of the COVID-19 pandemic, and 110,000 eateries (17%) in the United States have

permanently closed (National Restaurant Association, 2020). Considering to the unhygienic nature of traditional restaurants and food chains (relative to the COVID-19 pandemic), it is necessary to identify them and examine them in order to present a scientific justification for alleviating business challenges (Yu et al., 2021a, 2021b, 2021a).

Companies around the world have been affected by Covid-19 as it has caused changes in business and customer behaviour (Donthu, & Gustafsson, 2020). Restaurants in Kota Bharu have been introduced with stricter food safety care to ensure the health and welfare of the people and their customers since the beginning of the Movement Control Order, also known as the MCO, which was declared by the Prime Minister when the COVID-19 epidemic began to spread. This restaurant has taken an initiative to reduce the spread of infection between customers and employees by introducing an online ordering and payment system known as 'online', restaurants increase their efforts during challenging times, especially for online sales services that have just been carried out during the COVID-19 epidemic. Due to the dependence that customers have on essential items like food, the restaurant management has implemented many measures to safeguard the safety of its customers. Key resources can be used by restaurant management to satisfy customer needs (Singh, Kumar, Panchal, & Tiwari, 2020). Seetharaman (2020) emphasizes that although the material commodities required by nature have been unwillingly permitted to be produced, they are nevertheless essential to human daily life.

The researcher has chosen a Thai Restaurant in the Kota Bharu area to conduct research. This is because, Kota Bharu is the most populated city in Kelantan including students' study at a higher education institution. Numerous variables influence this, such as the rise in single-person homes, the proportion of families with two wage earners, the

demand for companionship, diet fads, and health problems (Kalmar, 2001). In Kota Bharu, the Thai restaurant is one of the famous restaurants and is the focus of customers, especially among tourists, because this restaurant is one of the restaurants that often attracts customers with a variety of menus and strategic management methods during the spread of the COVID-19 epidemic. The availability or lack of real ingredients in Thai cooking. Some ethnic recipes are impossible to prepare when certain ingredients, such as herbs and spices are missing (Friedland, 2002).

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2.5 CONCEPTUAL FRAMEWORK

The framework has to identify the restaurant hygiene attributes and customers' fear of COVID-19 as the independent variables (IV) such as hygiene customer use, personal hygiene of staff, hygiene of workspaces and customers' fear of COVID-19 as the dependent variable (DV). The framework is used to study the direct effects of the relationship between hygiene of customer use, personal hygiene of staff and hygiene of workspaces.

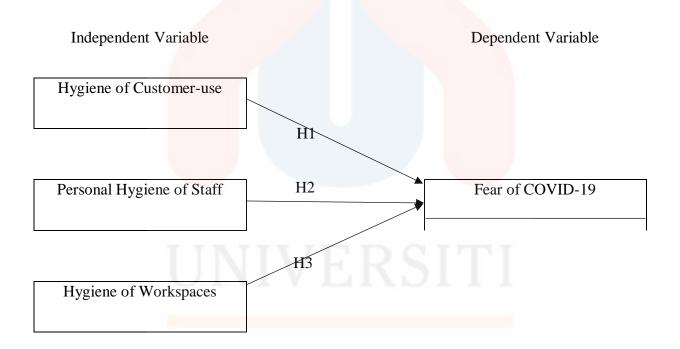


Figure 2.1 : Conceptual Framework Source : Adopted from Siddiqi et. al., (2022)

A conceptual framework is a graphic illustration of the relationships you see between variables, or the characteristics or properties you want to explore (Swaen adnd George, 2022). Based on Figure 2.1 above, the researcher wants to determine the relationship between the independent variable and the dependent variable. The independent variables for this title are hygiene of customer-use, personal hygiene of staff and hygiene of workspaces. Meanwhile, the dependent variable is the customer's fear of COVID-19.

2.6 HYPOTHESIS

2.6.1 HYGIENE OF CUSTOMER USE AND CUSTOMER FEAR OF COVID-19

Customers usually think that interacting with staff, and eating in restaurants is risk-free and safe (Choi et al., 2010). However, it has recently been observed (Delea et al., 2020; Yu et al., 2021b) that customers meet, either directly (such as a service encounter or shaking hands) or indirectly (such as using a room in a restaurant), tends to increase the risk of infection. Transmission of infection will occur through contact when customers use the provided space such as sinks, toilets, and food cutlery without being properly cleaned (Choi et al., 2010). Surfaces that are not properly cleaned may contain the COVID-19 virus, making customers afraid to use the facility.

In addition, restaurant hygiene practices that do not comply with SOP will cause customers to fear visiting the restaurant. Customers' doubts about the compliance of restaurant owners in curbing the spread of this virus whether it is implemented or not. For example, does the owner of the restaurant always sanitize the room and customer use. According to Peng and Chen (2021), disinfection practices in restaurants, hygiene issues and inflexibility regarding SOPs related to

COVID-19 can worsen the situation. People may hesitate to use public spaces and utilities that have hygiene problems for fear of the spread of COVID-19.

Based on previous studies, Siddiqi et al., (2022) assumed that customers are more concerned about the cleanliness of the space when they eat in an indoor or outdoor space, and feel afraid if they experience an unclean space. In the current scenario, customers' interactions with unsanitary spaces in restaurants lead to their fear of COVID-19 infection. Therefore, this study recommends the following:

H1: There is the relationship between hygiene of customer-use and fear of COVID-19.

2.6.2 PERSONAL HYGIENE OF STAFF AND FEAR OF COVID-19

The personal hygiene of restaurant staff is a determinant of the increase in the infection of COVID-19 and makes customers tend to be afraid of COVID-19. Good personal hygiene expressed in terms of clean clothes and clean hands of workers can guarantee protection from infectious diseases such as COVID-19 (Awan et al., 2020; Laato et al., 2020). Employees can be the cause of the spread of the COVID-19 epidemic when the employee does not comply with the SOP that has been set such as wearing a face mask and maintaining a distance of 1 meter when serving customers. Workers may be more susceptible to infection and spread infectious diseases because of the way they interact with customers and handle customer items (Zhang et al., 2020).

In addition, workers who do not focus on health and hygiene may take this virus for granted. Even though the worker had a fever, he still came to work without doing a health check. In the current context, the lack of understanding of these employees about health and personal hygiene creates fear in customers (Barber and Scarcelli, 2010). Customers will visit restaurants that have a high level of cleanliness compared to restaurants that do not care about cleanliness. Duong (2021) pointed out that personal hygiene of restaurant staff significantly increases customer satisfaction, in contrast to unsanitary conditions that make customers feel fearful and anxious. Therefore, it is reasonable to conclude that, in the context of COVID-19, the poor personal hygiene of restaurant staff causes customers to fear the spread of disease.

Based on a study conducted by Siddiqi et al., (2022), Restaurant staff's poor personal hygiene elevates customers' anxiety of illness transmission. As a result, we conclude that:

H2: There is the relationship between personal hygiene of staff and fear of COVID-

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2.6.3 HYGIENE OF WORKSPACES AND FEAR OF COVID-19

Many studies have shown that unclean restaurant spaces can make customers afraid to visit the restaurant. According to Park et al., (2019) dirty eating places with a lot of germs can be the cause of infection and transmission of COVID-19. The cleanliness of the restaurant space is not clean enough to attract the attention of customers because customers are afraid to visit the restaurant. Gu and Ryan (2008) claimed that the restaurant's reputation depends on the level of cleanliness of the dining room but infrequent hygiene inspections may cause people to worry about the outbreak of COVID-19.

According to WHO (2020b), has increased awareness about restaurant hygiene but most restaurant owners do not follow the SOP that has been set such as sanitizing all spaces and equipment that have been used. Restaurant owners only clean the kitchen area when there is an outbreak of disease (Sifuentes et al., 2014). As a result, it can be concluded that customers may be concerned about the spread of the COVID-19 virus in the restaurant due to the less clean workspace environment. The justification presented above leads us to the conclusion that visitors are afraid of COVID-19 when they observe an unsanitary work environment.

Based on previous studies, Siddiqi et al., (2022) concluded that insufficient hygiene and sanitation conditions in the restaurant space tend to cause customers' fear of disease transmission. Siddiqi et al., (2022) argue that customers in food and beverage restaurants are afraid of COVID-19 when they see unsanitary conditions

in the restaurant's work space as the cause of infectious diseases. Consequently, this is what we believe:

H3: There is the relationship between hygiene of workspace and fear of COVID-

2.7 SUMMARY

This chapter's emphasis is on hygiene of customer-use, personal hygiene of staff, and hygiene of workspaces. According to researchers, the three independent variables will significantly affect customers during to COVID-19. Then, the relationship between the cleanliness of the restaurant and the customer's fear of COVID-19 is also one of the relationships that needs to be focused more deeply in order to get a result that can be linked between the variables mentioned. Therefore, the various content that is desired or has been stated must be true and clear to ensure that the information delivered gives a positive effect.

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CHAPTER 3

METHODOLOGY

3.1 INTRODUCTION

In this chapter, the research methods will be highlighted. The target population, research design, sampling technique, sample size, and procedure, data collection, research instrument and instrument design, and data analysis are all covered in this chapter. In a nutshell, it summarizes each procedure and statistical strategy utilized to assess the study topic. Researchers will conduct a survey to gather data for the purpose of evaluating the research topic, and they will utilize analytical techniques to identify the data's pattern. The most effective approach for gathering data will be determined in this chapter. The study's hypothesis will be tested using the survey data that was gathered.

3.2 RESEARCH DESIGN

The strategy for responding to the research question can be referred to as the study design. It covers the examination of numerical data using particular statistical approaches in order to respond to questions like who, how much, where, what, how many, and how many. Science, social science, and numerous other fields all place a high priority on research design (Abutabenjeh et. al, 2018). All of the data will be collected for this study using a quantitative approach and questionnaires. Quantitative research is a systematic way to collect and analyse data from multiple sources (SIS International, 2018). Making

predictions, determining patterns and averages, testing causal theories, expanding results to larger populations, and determining patterns and averages are all possible with it (Bhandari, 2021).

The purpose of this study is to determined the influences of restaurant hygiene attributes toward customers' fear of COVID-19. The data will then be collected using questionnaires given to respondents as part of descriptive research, which may then be used to explain the data.

A study's design should make sure that the data's evidence can answer the research question. Therefore, when it comes to a particular topic or situation, descriptive research would be able to answer the questions of who, what, when, where, and how. Descriptive research is a type of study that aims to provide the most accurate account of phenomena that already exist (Atmowardoyo, 2018).

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3.3 TARGET POPULATION

	YEAR 2020 ('000)
TOTAL	458,438
BUMIPUTERA	434,917

Table 3.1: Population by Ethnic Group in Kota Bharu

CHINESE	1,679	
INDIANS	1,320	
OTHERS	1,199	

Source: Department of Survey and Mapping Malaysia (2020)

The target population of this research is customer in Kota Bharu. Department of Statistics Malaysia (2020) reported that the total population in Malaysia is estimated at 32.4 million and the total population in Kota Bharu based on Table 3.1 was 458,438 in the year 2020. The total population includes Bumiputera, Chinese, Indians and others. Ethnic Bumiputera holds the majority of the population which is as many as 434,917 based on Table 3.1 because in Kelantan it is a place that has been occupied by the local population for a long time. Local residents in Kelantan usually decide to do business around their seating area only due to the complete facilities. Therefore, it is answered why the Bumiputera population is the majority of the population in the state of Kelantan. While the total Chinese population is 1,679 Indians are 1,320 and others are 1,199. From the aspect of age eligibility to answer this questionnaire, it is relevant if the researcher targeted respondents aged 18 and above.

3.4 SAMPLE SIZE

Zamboni J. (2018) defines sample size as a technique for calculating the total number of individual samples that will be measured or observed during an experiment or survey. To close this gap, Krejcie and Morgan (1970) produced a chart for quick reference that shows the sample size for a given population (Kenpro, 2012).

Table f	or Determ	ining San	iple Size d	of a Knowi	n Populati	on			
N	S	N	S	N	S	N	S	N	S
10	10	100	80	280	162	800	260	2800	338
15	14	110	86	290	165	850	265	3000	341
20	19	120	92	300	169	900	269	3500	346
25	24	130	97	320	175	950	274	4000	351
30	28	140	103	340	181	1000	278	4500	354
35	32	150	108	360	186	1100	285	5000	357
40	36	160	113	380	191	1200	291	6000	361
45	40	170	118	400	196	1300	297	7000	364
50	44	180	123	420	201	1400	302	8000	367
55	48	190	127	440	205	1500	306	9000	368
60	52	200	132	460	210	1600	310	10000	370
65	56	210	136	480	214	1700	313	15000	375
70	59	220	140	500	217	1800	317	20000	377
75	63	230	144	550	226	1900	320	30000	379
80	66	240	148	600	234	2000	322	40000	380
85	70	250	152	650	242	2200	327	50000	381
90	73	260	155	700	248	2400	331	75000	382
95	76	270	159	750	254	2600	335	1000000	384
Note: N	is Popul	ation Size,	S is San	nple Size	. 1	Sou	rce: Krejo	cie & Morgan	, 1970

Figure 3.1 : Determining Sample Size of a Known Population Source : Adopted from Krejcie and Morgan (1970)

Figure 3.1 above shows, the sample size based on Krejcie and Morgan (1970) as a method to measure the number of respondents who will be involved in

the survey or study conducted by the researcher. From a population size of 1 million people in Kota Bharu, the researcher assumed that a maximum of 384 respondents who had been to a Thai restaurant would participate in this survey.

3.5 SAMPLING METHOD

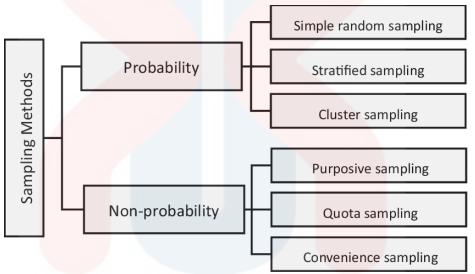


Figure 3.2 : Choice Points in Sampling Method Source : Adopted from Marko, Paul, Abdel and Sebastian (2017)

A sample is a group of individuals or subsets selected based on the population in a study (Jumrah, 2013). The intended group may consist of people, institutions, places or phenomena (Pomizi Resources.com). To make valid decisions from the researcher's results, the research needs to make decisions carefully through how to choose a sample that represents the group as a whole (McCombe, 2019).

Probability sampling and non-probability sampling are the two types of sampling.

According to Nikolopoulou (2022), probability sampling method is a sampling technique

that involves choosing a randomly selected sample, or part of the population, to study. Simple random sampling, systematic sampling, stratified sampling, and cluster sampling are the four different types of probability sampling that are available. Non-probability sampling, on the other hand, is described as a non-random way of selecting units from the population using a subjective process (Statistics Canada, 2021). Non-probability sampling is used in both quantitative and qualitative research when the number of units in the population is either unknown or impossible to know with certainty individually (Nikolopoulou, 2022). Commonly used non-probability sampling methods are purposive sampling, convenience sampling, snowball sampling and quota sampling (Jumrah, 2013).

However, for this study, researcher chose convenience sampling to conduct research. According to Jumrah (2013), this simple sampling allows anyone in the known population to be a sample without the need for any random selection process as long as the response agrees to be a study respondent. It is a sampling method that can get information easily, quickly and effectively. This simple sampling is always used in the exploratory phrase of a study or when the researcher needs a sample immediately or in the near future.

Based on the population estimate of the Department of Statistics Malaysia (in 2022), Kota Bharu has the largest population of 1,536,516 people or 89% of the 1,720,694 total population of Kelantan. Therefore, this simple sampling method is very useful in this research because the high number of the population gives us the potential to get enough respondents.

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3.6 DATA COLLECTION

According to Formplus Blog (2022), primary data is a type of data collected by researchers directly from primary sources through surveys, interviews, observation or through experiments. Primary data is usually collected from the source where the data originally came from and is considered the best type of data in research. It takes a long time to collect research data (Salsabila, 2022). According to Marican (2005), secondary data is information gathered by other researchers. In general, secondary data is data processed from existing sources (primary data) that have been published or disclosed to the public such as archives, public documents, books and journals. Secondary data helps researchers to conduct research in a short period of time (Salsabila, 2022).

For this study, the researcher uses data collection from secondary data and information is obtained from quantitative research that is through questionnaires. Quantitative data refers to any numerical data that can be used in experimental research or statistical analysis (Susanne and Roehl). A questionnaire is a research instrument that consists of a series of questions for the purpose of collecting information from respondents (McLeod, 2018). This questionnaire is divided into three sections, which is section A, B and C, and it is prepared in two languages, which is Malay and English. It was distributed to respondents who had been to a Thai restaurant in Kota Bharu, Kelantan. This survey is conducted online by using Google Forms. The information obtained from the respondents will be collected through the analysis found on the Google Form.

3.7 RESEARCH INSTRUMENT

This questionnaire was distributed to all target residents around Kota Bharu, Kelantan. The respondents involved need to answer all the questions so that the researcher can collect all the respondent's information. There are three sections in this questionnaire which the respondents have to answer, which are sections A, B and C. The researcher chose closed questions as an alternative to be given to the respondents to make it easier for them to make a choice to answer the questionnaire.

In section A, respondents are required to answer questions related to demographics such as age, gender and race and how often they visit Thai restaurants in a week. The type of scale used in this section is a nominal scale as a measurement level. The nominal scale is the simplest measurement scale and is the lowest form of measurement that can be used by researchers (Moon, 2012).

While for sections B and C, the measurement level used is an ordinal scale and an interval scale. An ordinal scale is a measure that uses labels to classify measurements into ordered classes. According to Valcheva, the interval scale refers to the classification and arrangement of measurements, but it also states that the distance between each value on the scale is the same. There are five questions contained in section B and the questions stated are related to the independent variable which is customers' fear of COVID-19. Meanwhile, for section C, it includes nine questions from the three dependent variable factors in this study, namely hygiene of customer-use, personal hygiene of staff and hygiene of workspaces. Each factor is divided into three questions.

Sections	Variables	Item	Authors
A	Demographic Profile	4	Siddiqi et al., (2022)
В	Fear of COVID-19	5	Chen & Eyoun (2021)
С	Hygiene of Customer-use	3	Sung et al., (2021)
	Personal Hygiene of Staff	3	Sung et al., (2021)
J	Hygiene of Workspaces	3	Sung et al., (2021)

Table 3.2: Overview of Research Instrument

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3.7.1 RESEARCH INSTRUMENT DESIGN

Likert scale ratings are structured to provide measurable response options as they facilitate data analysis. A Likert scale is a common rating format for surveys. The Likert scale is a psychometric scale that has various categories from which respondents choose to express their opinions, attitudes, or feelings about an issue (Nemoto and Beglar, 2014). For this questionnaire, the researcher has decided to use a 6 likert scale so as to get more accurate answers from the respondents. Respondents will have more alternatives with the 6-point scale. There is no option that is neutral because the scale has even points (Mahmutovic J., 2020). Respondents also have a variety of more specific answers about their feelings towards a product or service. With a six-point scale, participants are encouraged to give the issue more thought before deciding whether to answer favourably or negatively. The six-point scale helps to explain the fact that our impressions are rarely unbiased (Thompson C., 2018).

The reliable value generally showed that the Likert scale with six points had a higher reliability by Cronbach's Alpha Coefficient than the scale with five points (Chomeya R., 2010). Additionally, groups that are simpler to comprehend and discuss can result from the response scale having an even number of elements. This refers to the successful, uncertain, and unprofitable category in the majority of organisations. For instance, a combination of "agree" or "strongly agree" responses is advantageous (Thompson C., 2018).

Strongly Disagree	Disagree	Slightly Disagree	Slightly Agree	Agree	Strongly Agree
1	2	3	4	5	6

Figure 3.3 : Likert's Scale Six Point Source : Adopted from Jaysonn (2020)

3.8 PILOT TEST

De Vaus advises against taking risks and instead conducting pilot testing (1993: 54). It is critical to carry out a pilot study because one of the benefits is that it may provide an early warning that the primary research project may fail, where the research protocol may not be followed, or the suggested methodologies and instruments are too complicated or inappropriate. A pilot study can also be a pre-trial test of a research instrument, according to Baker (1994: 182-3). Furthermore, Saunders et al. (2007) noted that 10 responders are required at a least to run a pilot test. To verify the validity of the questionnaire used in this study, a pilot study was carried out with 30 randomly chosen respondents among customers who frequent Thai restaurants in Kota Bharu.

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3.9 DATA ANALYSIS

The Statistical Package for Social Science (SPSS) is the programme utilised in this study to analyse the data. With the use of descriptive analysis and correlation, the relationship between independent and dependent variables can be explained using the software SPSS. The data gathered from respondents in Kota Bharu can be processed by SPSS to produce informative data. The software quickly handles massive datasets and aids in doing intricate statistical analysis for scholars. As a result, the reliability analysis is helpful for the researcher and aids in the data analysis process. Reliability analysis, descriptive analysis, and Pearson's correlation coefficient are the three types of data analysis.

3.9.1 RELIABILITY ANALYSIS

Table 3.3: Cronbach's Alpha Coefficient Range

Cronbach's Alpha Range	Level of Reliability
$\alpha > 0.9$	Excellent
$\alpha > 0.8$	Good
$\alpha > 0.7$	Acceptable

$\alpha > 0.6$	Questionable
α > 0.5	Poor
α > 0.4	Unacceptable

Sources: Adopted from George & Mallery (2016)

Reliability analysis allows researchers to look at the properties of the measuring scale and its constituent parts. The degree to which evaluation tools give consistent and reliable outcomes is tested by reliability. The consistency of a measurement is referred to as reliability in statistics. Cronbach's alpha measures internal consistency, or how closely related a set of things are to one another. It is thought to be a scale dependability indicator. According to George & Mallery (2016), a value of 0.4 or less is regarded as undesirable, whereas a value of 0.9 or above is seen as a reliable outcome. An item's internal consistency reliability increases as its value gets closer to 1. The graph above illustrates the general guideline for Cronbach's Alpha Coefficient Range.

3.9.2 DESCRIPTIVE ANALYSIS

Descriptive analysis is a method for discovering trends and relationships in data, both new and old. The data is analysed and represented using median, mean and mode values that can be applied to all levels of measurement. The interquartile

range and standard deviation, meanwhile, can reveal how respondents react to the questionnaire's items. As a result, it is utilised to discover and analyse the variables that affect customers' propensity to return to Thai Restaurants in Kota Bharu. The study's mean score and interpretation are described in Table 3.4.

Table 3.4: Interpretation for Mean Score.

Mean Score	Interpretation
1.00 – 1.82	Strongly Disagree
1.83 – 2.65	Disagree
2.66 – 3.48	Slightly Disagree
3.49 – 4.31	Slightly Agree
4.32 – 5.14	Agree
5.15 – 6.00	Strongly Agree

Source: Adopted from Jonald L. Pimentel (2019)



3.9.3 PEARSON CORRELATION COEFFICIENT

Table 3.5: Pearson's Correlation Coefficient

Correlations	Value
Perfect Positive Correlation	+1
No Correlation	0
Perfect Negative Correlation	-1

Sources: Adopted from Mukaka (2012)

The Pearson coefficient, which displays the link between two variables measured on the same interval or ratio scale, is a representation of a correlation coefficient. Pearson's coefficient measures the degree of correlation between two continuous variables. To explore the statistical relationship between two variables, correlation can be used as a strategy. The strength and importance of the association between the independent variables, namely workplace cleanliness, staff personal hygiene, and customer usage hygiene, were measured using Pearson's correlation coefficient (r). COVID-19. The correlation coefficient forms a perfect linear relationship when it is either -1 or +1. The correlation coefficient is zero if there is no linear relationship between the independent and dependent variables.

A correlation coefficient of zero indicates the lack of a linear relationship between two continuous variables, while a correlation value of -1 or +1 denotes the perfect linear relationship. As the correlation strength rises, the correlation coefficient gets closer to 1. A positive coefficient denotes a direct correlation between the variables, meaning that as one variable's value rises, the other usually follows suit. If the coefficient is negative, on the other hand, the relationship between the variables is inverse, meaning that when one variable's value increases, the value of the other variable tends to decrease. The graph above displays general requirements for the Pearson Correlation Coefficient.

3.10 SUMMARY

In short, the researcher implemented an easy random selection procedure to choose the sample size of 384 respondents from the population since the location was restricted to just Thai restaurants in Kota Bharu. The population was uncomplicated and represented the whole population of Kota Bharu. Questionnaires are created using a quantitative method, and the research will use data gathering to show how independent factors and dependent variables relate to one another. This study can be cited as evidence on the impact of Thai restaurant hygiene customers' fears of COVID-19.

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CHAPTER 4

FINDINGS AND DISCUSSION

4.1 INTRODUCTION

In this chapter, the researcher wants to study the results of the study. This data is the influence of cleanliness on customers who are afraid of Covid-19 in a Thai restaurant in Kota Bharu, Kelantan. To confirm that the items were internally consistent, the questionnaire completed a reliability test. The demographic profile, part A of the questionnaire, was analysed using frequency analysis, and the impact of hygiene on customers was investigated using descriptive analysis using mean scores and standard deviation (SD). In the meantime, Pearson's correlation was used to examine the association between independent variables such as hygiene of customer use, personal hygiene of staff and cleanliness of the work space on dependent variables such as customer fear of COVID-19.

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4.2 RESPOND RATE

A total of 384 respondents are estimated to answer the questionnaire for the study conducted by the researcher. However, only 379 completed questionnaires were collected and usable, which represents a response rate of 98.7%. Based on Frank M. (2020), the response rate of respondents who answered the questionnaire above 60% is considered strong and meets acceptable standards. The method used by the researcher to collect data

from the respondents is online and also the researcher went to several Thai restaurants in Kota Bharu to get information from the respondents.

Table 4.2 : Respond for Questionnaires

Number of questionnaires distributed	384
Questionnaires usable to be analyzed	379
Response rate	98.7%

4.3 PILOT STUDY

The reliability test of the pilot test was used to determine the validity of the variables before the researcher administered the actual questionnaire to the 30 respondents. A pilot study is a small sample, quantitative study carried out to determine whether the study can be continued or not before a larger size study or clinical trial (Polit and Hungler, 2003). By completing this pilot study, it will be possible to identify potential areas for failure in the main research project, any gaps in the research protocol, and any inadequacies or overly complex aspects of the suggested method or instrument (Teijlingen and Hundley, 2002).

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Table 4.3: Rule of Thumb of Cronbach's Alpha Coefficient Range

Cronbach's Alpha Range	Level of Reliability
Cronbach s Aipha Kange	Level of Renability
$\alpha > 0.9$	Excellent
$\alpha > 0.8$	Good
$\alpha > 0.7$	Acceptable
$\alpha > 0.6$	Questionable
$\alpha > 0.5$	Poor
$\alpha > 0.4$	Unacceptable

Sources: Adopted from George & Mallery (2006)

Table 4.3 shows a typical rule for Cronbachs' Alpha Coefficient Range. Cronbach's alpha coefficient is used to measure the internal consistency, or reliability, of a set of survey items (Jim Frost, 2022). According to George & Mallery (2006), a value of 0.4 or less is considered undesirable or unacceptable, a value of 0.7 is acceptable, while a value of 0.9 or above is seen as a reliable result. The internal consistency reliability of an item will increase as its value gets closer to 1.

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4.4 THE RELIABILITY TEST OF PILOT TEST ANALYSIS

Table 4.4: The Reliability of Pilot Test Analysis

Section	Dimension	Cronbach's Alp <mark>h</mark> a	Number of Items
Dependent Variable	Customers' fear of COVID-19	0.945	5
Independent Variable	Hygiene of customer-use Personal hygiene of staff	0.837 0.915	3
	Hygiene of workspaces	0.936	3

Table 4.4 above shows the reliability of the pilot test analysis for the dependent and independent variables. The value of Cronbach's alpha coefficient for the dependent variable which has five items which is the customer's fear of COVID-19 is 0.945. The value shows that the reliability of this dependent variable is at an excellent level and very reliable. Meanwhile, all independent variables have three items. All independent variables show reliability to be at a good and reliable level. Cronbach's alpha coefficient value for hygiene of customer-use is 0.837, personal hygiene of staff is 0.915 and hygiene of workspaces is 0.936. Because all the variables have a reliability value of more than 0.7, so this proves that the questionnaire conducted by this researcher is successful, reliable and the

respondents understand each question or statement well. Therefore, this study can be continued.

4.5 ACTUAL RELIABILITY TEST

Table 4.5: The Actual Reliability Test

Section	Dimension	Cronbach's Alpha	Number of Items
Dependent Variable	Customers' fear of COVID-19	0.919	5
Independent Variable	Hygiene of customer-use Personal hygiene of staff	0.848	3
	Hygiene of workspaces	0.861	3

N of respondents (n) = 379

When the pilot study is proven to be successful and is believed to have high reliability, so the researcher can continue the study according to the sample size based on Krejcie and Morgan (1970) where the researcher assumes that a maximum of 384 respondents who have been to a Thai restaurant will participate in this survey. However, only 379 respondents participated in the questionnaire conducted by the researcher.

Therefore, the actual reliability test of the questionnaire that can be used is 375 selected respondents.

Table 4.5 shows the reliability of the analysis for all variables that include dependent variables and independent variables. Cronbach's alpha coefficient value for customer fear of COVID-19 is 0.919. The value shows that the reliability of this dependent variable is at an excellent level. Meanwhile, all independent variables show reliability at a good level. Cronbach's alpha coefficient value for hygiene of customer-use is 0.848, personal hygiene of staff is 0.885 and hygiene of workspaces is 0.861.

4.6 RESPONDENTS PROFILE

Table 4.6: Respondents Profile

Respondent Profile	Classification	Frequ <mark>ency</mark>	Percentage	
		n = 379		
Gender	Male	149	39.3	
	Female	230	60.7	
Age	18 – 23	135	35.6	
	24 – 29	105	27.7	
KF	30 – 35	45	11.9	
	36 – 41	30	7.7	

	42 and above	64	16.9
Races	Chinese	48	12.7
	Indian	50	13.2
	Malay	280	73.9
	Other	1	0.3
Frequency of visiting	1-2	263	69.4
Thai restaurant in a week	3 – 4	88	23.2
Week	5 – 6	17	4.5
	Everyday	11	2.9

This study has collected data from 379 respondents who answered this questionnaire. Table 4.6 has shown that there are more female respondents than male respondents, with 230 female respondents or 60.7%, while 149 male respondents or 39.3%.

Next, Table 4.6 also shows the age range of the 379 respondents who answered this questionnaire. The higher respondent age group that answer this questionnaire are respondents aged between 18 and 23 years old which is 135 people or equivalent to 35.6%. The second highest age group of respondents are respondents aged 24 to 29 years old or equivalent to 27.7%. The third highest age group of respondents is respondents aged 42 and over, which is a total of 105 people or equivalent to 16.9%, followed by respondents

aged 30 to 35 years which is a total of 45 people or equivalent to 11.9%. Meanwhile, the lowest age range of respondents who answered this questionnaire were respondents aged 36 to 41 years, of which the number of respondents was only 30 people or equal to 7.7%.

Not only that, Table 4.6 also shows the race category through data obtained from 379 respondents. Out of that number, the majority of respondents who answered this questionnaire were Malay respondents, that is 280 people (73.9%). The second highest race is Indian respondents, which is 50 people (13.2%). Meanwhile, there were 48 Chinese respondents (12.7%). However, there is also one respondent (0.3%) who is of another nationality, the data obtained shows that the respondent is of Siamese nationality.

Finally, Table 4.6 shows the frequency of 379 respondents who visit a Thai restaurant in a week. Out of that number, 263 respondents (69.4%) visit Thai restaurants only between 1 to 2 times a week, followed by 88 respondents (23.2%) who visit Thai restaurants 3 to 4 times a week. A total of 17 respondents (4.5%) who visit Thai restaurants 5 to 6 times a week. Meanwhile, only 11 respondents (2.9%) visit Thai restaurants every day in a week.

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4.7 DESCRIPTIVE ANALYSIS

Table 4.7.1 : Mean Score for Each Variables

Section	Dimension	n	Mean	SD
В	Customers' Fear of COVID-19	375	3.5062	1.1644
С	Hygiene of Customer-use	375	3.6653	1.0130
	Personal Hygiene of Staff	375	3.7370	0.9978
	Hygiene of Workspaces	375	3.6500	0.9655

Table 4.7.1 shows the mean score and standard deviation (SD) obtained from the descriptive analysis. In the questionnaire, the researcher has designed a measurement scale using 6 Likert Scales which include 1 (Strongly Disagree), 2 (Disagree), 3 (Slightly disagree), 4 (Slightly agree), 5 (Agree) and 6 (Strongly Agree).



Table 4.7.2: Descriptive Analysis for Dependent Variable, Customers' Fear of COVID-19

Statement	n	Mean	SD
I am very afraid of the spread of COVID-19 virus.	379	3.89	1.384
I fear losing my life due to COVID-19.	379	3.67	1.370
I can't sleep for fear of being infected with COVID-19.	379	2.96	1.298
When watching news or things related to COVID-19 on social media, I get anxious and nervous.	379	3.35	1.287
COVID-19 makes me uncomfortable to go out and meet people.	379	3.66	1.360

Table 4.7.2 shows a descriptive analysis of customers' fear of COVID-19. The table shows the mean response of the respondents to the variable customers' fear of COVID-19 according to the Six Likert Scale. The mean score for five (5) items in customers' fear of COVID-19 is between 2.5 to 4.0. The mean for the first item is the highest which is the fear of the spread of the COVID-19 virus which is 3.89 (SD = 1.384). The second highest mean score is the mean for the second item which is the fear of losing life due to COVID-19 which is 3.67 (SD = 1.370). The third highest mean score is the mean for the fifth item which is the discomfort of going out and meeting people due to COVID-19 is 3.66 (SD = 1.360). The second lowest mean score is the mean for the fourth

item which is feeling anxious and nervous when watching news or things related to COVID-19 on social media which is 3.35 (SD = 1.287). Finally, the mean score for the fourth item is a low mean which is inability to sleep due to fear of being infected with COVID-19 which is 2.96 (SD = 1.298).

Table 4.7.3: Descriptive Analysis for Independent Variable, Hygiene of Customer-use

Statement	n	Mean	SD
The dining room in this Thai cuisine restaurant is equipped with a special air purifier to prevent aerosol	379	3.34	1.273
infections.	1		
The owner of this Thai Restaurant always emphasizes the cleanliness of facilities in the dining room such as tables, chairs, sinks and mirrors using disinfectants.	379	3.72	1.143
Thai cuisine restaurant has a clean environment.	379	3.94	1.047

Table 4.7.3 shows a descriptive analysis of hygiene of customer-use. For this independent variable, the researcher also used a Six Likert Scale. The mean score for the three items in hygiene of customer-use is between 3.4 to 4.0. The highest mean is the mean for the third item which is "Thai restaurant has a clean environment" which is 3.94 (SD = 1.047), followed by the mean for the second item which is "The owner of this Thai Restaurant always emphasizes the cleanliness of

facilities in the dining room such as tables, chairs, sinks and mirrors using disinfectants" which is 3.72 (SD = 1.143). Meanwhile, the mean for the first item has the lowest mean which is "The dining room in this Thai cuisine restaurant is equipped with a special air purifier to prevent aerosol infections" which is 3.34 (SD = 1.273).

Table 4.7.4: Descriptive Analysis for Independent Variable, Personal Hygiene of Staff

Statement	n	Mean	SD
Thai restaurant staff always wear face masks when working.	379	3.84	1.146
Thai restaurant staff cover their mouths and noses by bending their elbows when coughing and sneezing.	379	3.61	1.070
Thai restaurant staff always wash their hands and sanitize after they do work such as delivering food to customers.	379	3.75	1.101

Table 4.7.4 shows a descriptive analysis of personal hygiene of staff. The table shows the mean response of respondents to the personal hygiene of staff variable according to the Six Likert Scale, where the mean score for these three items includes values between 3.7 to 3.9. The first item which is "Thai restaurant staff always wear face masks when working" has the highest mean of

3.84~(SD=1.146). The third item which is "Thai restaurant staff always wash their hands and sanitize after they do work such as delivering food to customers" has the second highest mean which is 3.75~(SD=1.101). Meanwhile, the second item which is "Thai restaurant staff cover their mouths and noses by bending their elbows when coughing and sneezing" has the lowest mean of 3.61~(SD=1.070).

Table 4.7.5 : Descriptive Analysis for Independent Variable, Hygiene of Workspaces

Statement	n	Mean	SD
Staff at Thai cuisine restaurants practice social distancing of 1 m with other staff at work.	379	3.32	1.130
The owner of Thai restaurant always emphasizes the cleanliness of the staff's work equipment such as knives, aprons and payment machines using disinfectants.	379	3.82	1.053
The owner of a Thai cuisine restaurant will ensure that the surface of the staff's work area such as tables, kitchen and counters are cleaned using disinfectants.	379	3.80	1.090

Table 4.7.5 shows a descriptive analysis of the hygiene of workspaces. The table shows the mean response of the respondents to the hygiene of workspaces variable using Six Likert Scales and the mean scores for the three items range from 3.2 to 3.9. Based on the data collected, the second item "The owner of Thai restaurant always emphasizes the cleanliness of the staff's work equipment such as knives, aprons and payment machines using disinfectants" has the highest mean score compared to the other items which is 3.82 (SD = 1.053), followed by the third item "The owner of a Thai cuisine restaurant will ensure that the surface of the staff's work area such as tables, kitchen and counters are cleaned using disinfectant", this item only has a slight difference in mean score with the second item which is 3.80 (SD = 1.090). The last is the first item which is "Staff at Thai cuisine restaurants practice social distancing of 1 m with other staff at work" where the mean score is only 3.32 (SD = 1.130).

4.8 PEARSON'S CORRELATION COEFFICIENT

Pearson's correlation coefficient (r) is used to measure the strength and direction of the relationship between the independent variable and the dependent variable (Turney S., 2022). The independent variables for this study are hygiene of customer-use, personal hygiene of staff and hygiene of workspaces. Zach (2019) claims that the Pearson correlation coefficient, which ranges in value from -1 to 1, is a measurement of the linear relationship between two variables X and Y. The perfect linear correlation between two variables is indicated by a value of +1, and the perfect linear correlation between two variables is indicated by a value of 0 is not present.

According to Swain S. (2016), there are several assumptions for Peaeson's correlation coefficient, which are measurement levels, related pairs and the absence of outliers. Every variable is referred to by the level of measurement. Each variable should be continuous in order to use Pearson correlation. A Spearman correlation can be performed in its place if both or one of the variables have an ordinal scale of measurement. Next, variable pairs are referred to as related pairs. Every observer or participant needs to have a set of values. Therefore, each observation utilised should have both weight and height data if the correlation is between weight and height. Furthermore, not having any outliers in any variable is referred to as the lack of outliers. By pushing the line of best fit created by the correlation too far in one direction or the other, the presence of outliers can skew correlation values.

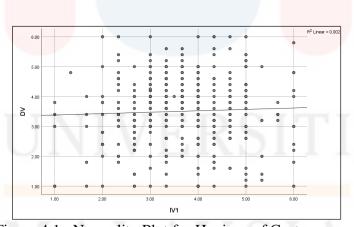


Figure 4.1: Normality Plot for Hygiene of Customer-use



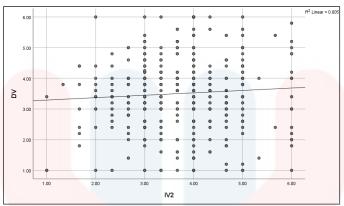


Figure 4.2: Normality Plot for Personal Hygiene of Staff

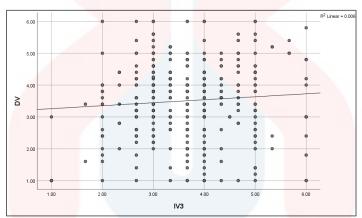


Figure 4.3: Normality Plot for Hygiene of Workspaces



Table 4.8: Correlation Cofficient (r) Value Interpretation

Correlation Coefficient (r) Value	Interpretation
± 0.8 - ± 1.0	High correlation
± 0.6 - ± 0.79	Moderately high correlation
± 0.4 - ± 0.59	Moderate correlation
± 0.2 - ± 0.39	Moderately low correlation
± 0.0 - ± 0.19	Negligible correlation

Source : Al-Samman E. (2012)

Table 4.7 shows the basic rules of correlation coefficients and the interpretation of correlations between variables. Correlation coefficient refers to as r. If the value of r is 0.0 to \pm .19, it indicates that there is a negligible relationship between the variables. This will affect the null hypothesis because the two variables have no relationship. If the r value is \pm 0.8 to \pm 1.0, it indicates a very strong positive relationship between the variables. This will affect the alternative hypothesis because the two variables have an interrelated relationship.

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4.8.1 RELATIONSHIP BETWEEN HYGIENE OF CUSTOMER-USE AND CUSTOMERS' FEAR OF COVID-19

Table 4.8.1 : Correlation Between Hygiene of Customer-use and Customers' Fear of COVID-19.

Correlations

		Customers' Fear		
		of COVID-19	Customer-use	
Customers' Fear of COVID-	Pearson Correlation	1	.041	
19	Sig. (2-tailed)		.427	
	N	379	379	
Hygiene of Customer-use	Pearson Correlation	.041	1	
	Sig. (2-tailed)	.427		
	N	379	379	

H1: There is no significant relationship between hygiene of customer-use and customers' fear of COVID-19.

Table 4.8.1 shows a positive (r) value of 0.041 which shows that the relationship between hygiene of customer-use and customers' fear of COVID-19 is at a positive level of correlation that can be ignored. Therefore, hygiene of customer-use has a correlation relationship that can be ignored in determining customers' fear of COVID-19 at a Thai restaurant in Kota Bharu, Kelantan. Meanwhile, the significant level (p) for this variable is 0.427 which is more than 0.10. In conclusion, hypothesis H1 states that there is no

relationship between hygiene of customer-use and customers' fear of COVID-19 is considered insignificant and it is considered a null hypothesis.

4.8.2 RELATIONSHIP BETWEEN PERSONAL HYGIENE OF STAFF AND CUSTOMERS' FEAR OF COVID-19

Table 4.8.2: Correlation Between Personal Hygiene of Staff and Customers' Fear of COVID-19.

Correlations

		Customers' Fear	Personal
		of COVID-19	Hygiene of Staff
Customers' Fear of COVID-	Pearson Correlation	1	.067
19	Sig. (2-tailed)		.191
	N	379	379
Personal Hygiene of Staff	Pearson Correlation	.067	1
	Sig. (2-tailed)	.191	
UN	N	379	379

H2: There is no significant relationship between personal hygiene of staff and customers' fear of COVID-19.

Table 4.8.2 shows a positive value of 0.067 which shows that the relationship between personal hygiene of staff and customers' fear of COVID-19 is at a positive level of correlation that can be ignored. Therefore, personal hygiene of staff has a negligible

correlation in determining the customer's fear of COVID-19 at a Thai restaurant in Kota Bharu, Kelantan. Meanwhile, the significant level of this variable is 0.191 which is more than 0.10. In conclusion, hypothesis H2 states that there is no relationship between personal hygiene of staff and customers' fear of COVID-19 is considered insignificant and it is considered a null hypothesis.

4.8.3 RELATIONSHIP BETWEEN HYGIENE OF WORKSPACES AND CUSTOMERS' FEAR OF COVID-19

Table 4.8.3: Correlation Between Hygiene of Workspaces and Customers' Fear of COVID-19.

Correlations

		Customers' Fear	Hygiene of
		of COVID-19	Workspaces
Customers' Fear of COVID-	Pearson Correlation	1	.077
19	Sig. (2-tailed)	SII	.132
	N	379	379
Hygiene of Workspaces	Pearson Correlation	.077	1
	Sig. (2-tailed)	.132	1
1417	N	379	379

H3: There is no significant relationship between hygiene of workspaces and customers' fear of COVID-19.

Table 4.8.3 shows a positive value of 0.077 which shows that the relationship between hygiene of workspaces and customers' fear of COVID-19 is at a positive level of correlation that can be ignored. Therefore, the hygiene of workspaces has a negligible correlation in determining the customer's fear of COVID-19 at a Thai restaurant in Kota Bharu, Kelantan. Meanwhile, the significant level of this variable is 0.132 which is more than 0.10. In conclusion, hypothesis H3 states that there is no relationship between hygiene of workspaces and customers' fear of COVID-19 is considered insignificant and it is considered a null hypothesis.

4.9 **SUMMARY**

To gather information from respondents and get their responses, the researcher used methods that are quantitative like questionnaires. The relationship between consumers' fear of COVID-19 and workplace hygiene, staff personal hygiene, and customer-use hygiene has also been investigated using Pearson's correlation coefficient. The researcher has determined that the values of the Pearson correlation coefficient for hygiene of customer-use is 0.041, personal hygiene of staff is 0.067, and hygiene of workplaces is 0.077 based on the data collection that has been done. The p value for each of the independent variables is more than 0.10. The researcher concluded that the hypothesis link is not significant as a result of the data since there is no correlation between the independent variable and the dependent variable. In conclusion, there is a neglected relationship between hygiene of customer-use, personal hygiene of staff, hygiene of workspaces against customers' fear of COVID-19.

CHAPTER 5

CONCLUSION

5.1 INTRODUCTION

Based on the research findings described in Chapter 4 earlier, this chapter presents those findings. In light of the previous chapter's findings, this chapter examines the study's goals and hypotheses. Implications, restrictions, and suggestions for further research are also provided in this chapter, which serves as the report's final one. The chapter for this investigation is finally summarised in the general conclusion.

5.2 RECAPITULATION OF THE FINDINGS

5.2.1 HYGIENE OF CUSTOMER-USE

RO1: To examine the relationship between hygiene of customer use and customers' fear of COVID-19 toward Thai restaurant in Kota Bharu, Kelantan.

RQ1: What is relationship between hygiene of customer use and customers' fear of COVID-19 toward Thai restaurant in Kota Bharu, Kelantan?

H1: There is no significant relationship between hygiene of customer-use and customers' fear of COVID-19 toward Thai restaurant in Kota Bharu, Kelantan.

Based on the Pearson correlation coefficient in Figure 4.6.1 in Chapter 4, it has been shown that the r value for hygiene of customer-use is 0.041 which shows a negligible relationship with customers' fear of COVID-19 towards Thai restaurants in Kota Bharu, Kelantan. However, due to the v value being more than 0.10 which is 0.427, so the relationship between hygiene of customer-use and customers' fear of COVID-19 is not significant and the effect of the null hypothesis study.

In this case, it may happen because customers think that interacting with the staff, and eating at the restaurant is risk-free and safe (Choi et al., 2010). Since the outbreak of the COVID-19 virus, many industries have focused on cleanliness, especially the environment of the dining room and the food equipment provided to customers. Customers are convinced that all food industries take the initiative to change old food equipment to new ones. But if they don't change it, maybe the food handlers put a lot of emphasis on always sanitizing their equipment every day.

5.2.2 PERSONAL HYGIENE OF STAFF

RO2: To examine the relationship between personal hygiene of staff and customers' fear of COVID-19 toward Thai restaurant in Kota Bharu, Kelantan.

RQ2: What is relationship between personal hygiene of staff and customers' fear of COVID-19 toward Thai restaurant in Kota Bharu, Kelantan?

H1: There is no significant relationship between hygiene of workspaces and customers' fear of COVID-19 toward Thai restaurant in Kota Bharu, Kelantan.

Based on the Pearson correlation coefficient in Table 4.6.2, it has been shown that the r value for personal hygiene of staff is 0.067 which shows a negligible relationship with customers' fear of COVID-19 towards Thai restaurants in Kota Bharu, Kelantan. However, due to the v value being more than 0.10 which is 0.132, so the relationship between personal hygiene of staff and customers' fear of COVID-19 is not significant and the effect of the null hypothesis study.

Interaction between employees and customers, whether direct or indirect, cannot be prevented in closed spaces in service industries such as restaurants, hotels and airlines (Yu et al., 2021a). The interaction between talking to customers and handling their belongings increases the risk of acquiring and spreading infectious diseases (Zhang et al., 2020). In this regard, respondents may consider this COVID-19 to be not so serious, not to mention that the Malaysian government has introduced a vaccine to prevent the virus from getting worse. Furthermore, vaccination is the main requirement for food operators and their jobs to continue their business. Apart from the injection of the COVID-19 vaccine, individuals involved in the food and beverage industry must also take the typhoid injection.

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5.2.3 HYGIENE OF WORKSPACES

RO3: To examine the relationship between hygiene of workspaces and customers' fear of COVID-19 toward Thai restaurant in Kota Bharu, Kelantan.

RQ3: What is relationship between hygiene of workspaces and customers' fear of COVID-19 toward Thai restaurant in Kota Bharu, Kelantan?

H1: There is no significant relationship between hygiene of workspaces and customers' fear of COVID-19 toward Thai restaurant in Kota Bharu, Kelantan.

Based on the Pearson correlation coefficient in Table 4.6.3, it has been shown that the value of r value for the cleanliness of the work space is 0.077 which shows a negligible relationship to the customer's fear of COVID-19 towards the Thai restaurant in Kota Bharu, Kelantan. Nevertheless, due to the value of v more than 0.10 which is 0.191, so the relationship between the cleanliness of the work space and the customer's fear of COVID-19 is not significant and the effect of the null hypothesis study.

According to Hung et al. (2018), since the outbreak of COVID-19, most of the food and beverage industry has suffered huge losses as a result of the temporary closure of premises. This has caused many food industries to suffer losses as a result of no customers visiting the restaurant. Therefore, as a measure to improve their economy, controlling food places great emphasis on hygiene from all aspects of the restaurant. Customers are confident that food operators have the initiative to prevent this epidemic from spreading and attract customers to the restaurant, the work environment must always be clean. When cleaning and sanitizing occurs to

prevent the spread of disease in each location provided to customers, the cleanliness of the workplace may be maintained.

5.3 IMPLICATION OF THE STUDY

This study was conducted to examine restaurant hygiene factors and customers' fear of COVID-19 at Thai Restaurant in Kota Bharu. The dependent variable in this study, customers' fear of COVID-19, and the independent variable, such as hygiene of customer-use, personal hygiene of staff, and hygiene of workspaces, will all be examine throughout this study. Due to the COVID-19, this virus has created fear for customers at Thai Restaurants in Kota Bharu. Researchers, restaurant owners, and potential Thai Restaurant customers are all indirectly impacted by this.

First off, this research study provides new researchers who want to do research on this topic or who want to continue this research all the important details about restaurant hygiene, including hygiene of customer-use, personal hygiene of staff, and hygiene of workspace in influencing customers' fear of COVID-19. Researchers will use this data to investigate what influences customers' fear of COVID-19 at Thai restaurant in Kota Bharu. Furthermore, fresh researchers might continue this study by focusing on a number of critical problems that earlier researchers on customers' fear of COVID-19 have not yet explored. This situation can assist other researchers who want to do a similar study in more effectively identifying and obtaining research findings on this research issue. In addition, if the

researcher can do research based on this study article, the researcher may use it as a reference for literature reviews in future research.

Second, the restaurant owner will suffer losses as a result of the COVID-19 pandemic keeping customers away from the establishment, which is another negative aspect of this study. Customers will decide on a restaurant based on what level of cleanliness it is. Owners of Thai restaurants suffer losses when customers decide not to eat there because of the unsatisfactory level of cleanliness provided due to their fear of COVID-19. Through the level of restaurant cleanliness, such as hygiene of customer-use, personal hygiene of staff, and hygiene of workspaces, Thai restaurant managers can determine customers' fear of COVID-19. Therefore, restaurant owners need to improve the level of cleanliness of this restaurant, especially in areas that are always used by customers such as the dining room, prayer room, food equipment, kitchen, and not only that, the personal hygiene of employees needs to be emphasized again to convince customers that Thai restaurants have less risk of infection this COVID-19 virus.

Lastly, the analysis made possible by this discovery could be advantageous to potential customers at Thai restaurants in Kota Bharu by, for example, providing important information about restaurant cleanliness factors that could lessen customers' fear of COVID-19 while visiting the restaurant. When a Thai restaurant is sufficiently clean, this study allows customers to visit without worrying about contracting a virus. As a result, the researcher's findings can help potential new customers of Thai restaurants by easing their fears about going there because of the level of cleanliness that has been demonstrated in this study.

5.4 LIMITATION OF THE STUDY

The researcher faced some kind of difficulties and limitations while conducting this study, which will be highlighted for use in other researches. The limitations of the current study provide suggestions for further research in those areas.

First, the researcher's sample size for this study is limited, making it difficult to draw firm conclusions. Only those who live in Kelantan, especially in Kota Bharu, are the study's sample. Data was only gathered from people who were in Kota Bharu and went to Thai restaurants there. Because of the customers' fear of the COVID-19 and their differing perceptions of restaurant cleanliness, the findings of this study were unable to collect data from respondents from various states.

Second, the study on restaurant cleanliness was limited to the COVID-19 pandemic. Only issues connected to the COVID-19 virus in Thai restaurants are the subject of research. Most of the survey questions given to respondents were focused on issues about restaurant hygiene during the COVID-19 outbreak. As a result, this study has limitations because the researcher only uses data from a questionnaire to focus on restaurant hygiene during the COVID-19 pandemic.

Finally, the researcher experienced limitations in data collection as a result of time constraints and communication barriers with respondents while conducting fieldwork. The researcher took time to collect data from the respondents because the researcher had obstacles to communicate with the respondents at the

Thai Restaurant when some of the customers did not want to participate in answering the questionnaire. Not only that, the researcher experienced time constraints to visit the restaurant for data collection.

5.5 RECOMMENDATIONS FOR FUTURE RESEARCH

5.5.1 THEORETICAL RECOMMENDATIONS FOR FUTURE RESEARCH

Based on this research, the researcher have studied the relationship between hygiene of customers use and COVID-19 toward Thai restaurant in Kota Bharu, Kelantan. Second is the relationship between personal hygiene of staff and COVID-19 and relationship between hygiene of workspace. This study has shown that the dependent variable where customers fear of COVID-19 and independent variable is hygiene of customer use, personal hygiene of staff and hygiene of workspace have a significant or positive correlation relationship. The Pearson Correlation Value (r value) is 0.041, 0.067 and 0.077 respectively.

As for recommendations, future research can use other variables such as provide hygiene standards regarding personal and hand hygiene, glove use, maintaining work attire, appropriate hair and jewelry, and sick policy to your employees. Ensure that everyone understands and follows the rules. According to the Centres for Disease Control and Prevention (CDC), maintaining good hand hygiene in environments where food is handled is

essential for lowering the risk of contracting a foodborne illness (Green et al., 2007). Although maintaining good hand hygiene is essential for lowering the danger of an outbreak of a foodborne illness, restaurants continue to have low compliance rates with FDA hand hygiene standards (Fraser et al., 2012). In addition, future researchers can also use the hygiene of customer use as a independent variable in future studied by focusing on the same topic, which is the relationship between hygiene of customer use and COVID-19. Some food staff have stated that they do not have the time to meet these hand hygiene expectations, which makes compliance with FDA Food Code recommendations in the restaurant business problematic (Clayton et al., 2002; Green et al., 2005).

5.5.2 METHODOLOGICAL RECOMMENDATIONS FOR FUTURE RESEARCH

In this study, a quantitative technique was used to collect data from respondents. It is less complicated and requires less data collection. Questionnaires may be disseminated to targeted respondents in specific regions, making it easier for researchers to collect a large number of responses at once. Participants who have past or present experience and can thus engage in answering the questionnaire will be targeted as respondents. Quantitative approaches allow researchers to test hypotheses, assess the impacts of factors, and get bigger or randomly selected respondents. According to future researchers, this strategy can be applied in future study

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5.5.3 PRACTICAL RECOMMENDATIONS FOR FUTURE RESEARCH

This research can help the food preparation service industry such as restaurants to improve their operations and productivity. Entrepreneurs who want to be active in the food business field can use the various initiatives available to ensure that food preparation services are in order and allowing them to retain existing customers while attracting new customers to try the food in the service. Companies or entrepreneurs can grow their business by learning more about the relationship between each variable with reference to this research.

Additional improvements can be made with Develop a Restaurant Hygiene Checklist. The restaurant management should make a checklist of

the precise cleaning chores and duties that must be completed by the staff members in order to maintain sanitary standards in restaurants. The length of your restaurant's cleaning checklist will be determined by its size. For instance, the cleaning checklist in a small restaurant will be as straightforward as a list of tasks printed on one page of paper. However, a thorough list segmented by job categories with few details is required when it comes to larger restaurants. List the distinct responsibilities for various areas, such as the dishwashing area. Cleaning responsibilities may be suitable to include in a thorough list of jobs that must be completed during a shift, depending on the nature of your restaurant's operations. The duties connected to cleaning and sanitation that are completed before the end of a shift or workday are the major components of a restaurant kitchen cleaning checklist. It should be clearly mentioned so that your staff can adhere to it. Employees typically use checkboxes or other places on checklists to indicate when tasks are finished. However, a cleaning schedule should not be mistaken with a restaurant cleaning checklist. Schedules for cleaning restaurants more closely resemble precise descriptions of cleaning tasks that outline what has to be cleaned, when, and how.

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5.6 SUMMARY

The researchers briefly stated the purpose of the study depending on the subject at discussion. According to the findings, there is a connection between consumers' fear of COVID-19 and hygiene of customer-use, personal hygiene of staff, and hygiene of workspace. According to the study's findings, staff members' personal hygiene is the factor that has the most influence over customers' fear of the COVID-19 virus. In short, the study's goals, which were to determine the association between customers' fear of COVID-19 and hygiene of customer-use, personal hygiene of staff, and hygiene of workspace, have been met.

In addition, the research framework was created and supported in accordance with the literature that was read. The researchers intended to investigate how each component of the independent variables related to the dependent variables. Through the Google form, 379 respondents participated in this survey. Descriptive statistics, reliability analysis, and correlation analysis were thus supported in the SPSS programme version 26.0 that was used to gather and analyse the data. Data were gathered for this study utilising a quantitative approach. Additionally, the outcome was credible and accepted for this study.

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APPENDIX: SAMPLE OF QUESTIONNAIRES

THE INFLUENCES OF HYGIENE ATTRIBUTES TOWARD CONSUMERS' FEAR OF COVID-19 AT THAI RESTAURANT IN KOTA BHARU, KELANTAN.

Assalamualaikum and greetings our respondents, we are third year students for a Bachelor of Entrepreneurship (Hospitality) with Honors from Universiti Malaysia Kelantan (UMK). We are currently conducting a Final Year Researh Project in the field of Hospitality, which is titled The Influences of Hygiene Attributes Toward Consumers' Fear of COVID-19 at Thai Restaurant in Kota Bharu, Kelantan.

SECTION	A : DEMOGRAPHIC RESPONDENT.
1. Gender	/ Jantina :
() Male / Lelaki
() Female / Pe <mark>rempuan</mark>
2. Age / <i>U</i>	mur :
() 18 – 23
() 24 – 29
() 30 – 35
() 36 – 41
() 42 and above / dan ke atas
3. Races /	Kaum :
() Chinese / Cina
() Indian / India
() Malay / Melayu
() Other / Lain-lain :

4. Frequency of visiting Thai restaurant in a week.

Kekerapan	menauni	unai restora	n Thai dalam	seminaau.
NCNCI upuii	IIICII GUIII	uligi i Cotolu	II IIIAI AAIAII	Julillingua.

() 1-2
() 3-4
() 5-6
() Everyday / S <mark>etiap hari</mark>

SECTION B: DEPENDENT VARIABLE.

Consumers' Fear of COVID-19.

Ketakutan Pengguna Terhadap COVID-19.

	Strongly Disagree	Disagree	Slighty Disagree	Slightly Agree	Agree	Strongly Agree
I am very afraid of the spread COVID-19 virus. Saya sangat takut dengan penularan virus Covid-19.	4					
I am very afraid of the spread COVID-19 virus. Saya sangat takut dengan penularan virus Covid-19.						
I fear losing my life due to COVID- 19. Saya takut kehilangan nyawa disebabkan COVID-19.						
I can't sleep for fear of being infected with COVID-19. Saya tidak boleh tidur kerana bimbang dijangkiti COVID-19.	AI V	Ŀi	(5)	11		
When watching news or things related to COVID-19 on social media, I get anxious and nervous. Apabila menonton berita atau perkara yang berkaitan dengan COVID-19 di media sosial, saya menjadi cemas dan gementar.	A L	A	/S	IA		
Covid-19 makes me uncomfortable to go out and meet people. Covid-19 menyebabkan saya tidak selesa untuk keluar dan berjumpa dengan orang ramai.		AIN	I A	AIN		

SECTION C: INDEPENDENT VARIABLE.

a) Hygiene of Customer-use.

Kebersihan Pengg<mark>unaan Pelan</mark>ggan.

	Strongly Disagree	Disagree	Slighty Disagree	Slightly Agree	Agree	Strongly Agree
The dining room in this Thai cuisine restaurant is equipped with a special air purifier to prevent aerosol infections.						
Ruang makan dalam restoran masakan Thai ini dilengkapi dengan pembersih udara khas untuk mencegah jangkitan aerosol.						
The owner of this Thai Restaurant always emphasizes the cleanliness of facilities in the dining room such as tables, chairs, sinks and mirrors using disinfectants.						
Pemilik restoran masakan Thai ini sentiasa menitikberatkan tentang kebersihan bagi kemudahan dalam ruang makan seperti meja, kerusi, singki dan cermin menggunakan pembasmi kuman.	JIX	/F.I	RSI	ТІ		
Thai cuisine restaurant has a clean environment.						
Restoran masakan Thai mempunyai persekitaran yang bersih.	ΑI	A	YS	ΙA		

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b) Personal Hygiene of Staff.

Kebersihan Diri Kakitangan.

	Strongly Disagree	Disagree	Slighty Disagree	Slightly Agree	Agree	Strongly Agree
Thai restaurant staff always wear face masks when working. Kakitangan-kakitangan restoran Thai sentiasa memakai pelitup muka ketika melakukan kerja.						
Thai restaurant staff cover their mouths and noses by bending their elbows when coughing and sneezing. Kakitangan-kakitangan restoran masakan Thai menutup mulut dan hidung dengan membengkokkan siku ketika batuk dan bersin.						
Thai restaurant staff always wash their hands and sanitize after they do work such as delivering food to customers. Kakikatangan-kakitangan restoran masakan Thai sentiasa membasuh tangan dan sanitasi selepas mereka melakukan kerja seperti menghantar makanan ke pelanggan.	JIV	EF	RSI	TI		
M	ΔΙ	Δ	/ S	IΑ		

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c) Hygiene of Workspaces.

Kebersihan Ruang Kerja.

	Strongly Disagree	Disagree	Slighty Disagree	Slightly Agree	Agree	Strongly Agree
Staff at Thai cuisine restaurants practice social distancing of 1 m with other staff at work. Kakitangan di restoran masakan Thai mengamalkan penjarakaan sosial sejauh 1 m dengan kakitangan yang lain di tempat kerja.						
The owner of Thai restaurant always emphasizes the cleanliness of the staff's work equipment such as knives, aprons and payment machines using disinfectants. Pemilik restoran masakan Thai sentiasa menitikberatkan tentang kebersihan peralatan kerja kakitangan seperti pisau, apron dan mesin membayar menggunakan pembasmi kuman.						
The owner of a Thai cuisine restaurant will ensure that the surface of the staff's work area such as tables, kitchen and counters are cleaned using disinfectants.	IIV	EF	RSI	TI		
Pemilik restoran masakan Thai akan memastikan agar permukaan kawasan kerja kakitangan seperti meja, dapur and kaunter dibersihkan dengan menggunakan pembasmi kuman.	ΑL	A	Z S	ΙA		

Thank you for your willingness to answer this questionnaire. We promise that the data collected will only be used for our research purposes. Thank you once again.