



UNIVERSITI PUTRA MALAYSIA

***TOURISTS' THREAT APPRAISAL, COPING APPRAISAL AND
PROTECTION INTENTION IN USING FOOD SAFETY CUES IN THE
CHOICE OF MALAYSIAN RESTAURANTS***

MEHRI YASAMI

FEP 2018 13



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By

MEHRI YASAMI

**Thesis Submitted to the School of Graduate Studies, Universiti Putra Malaysia,
in Fulfillment of the Requirements for the Degree of Doctor of Philosophy**

July 2018

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DEDICATION

I'd dedicate this thesis to:

My beloved husband, Ali Reza, for his unfailing love and support.



Abstract of thesis presented to the Senate of Universiti Putra Malaysia in fulfilment
of the requirement for the degree of Doctor of Philosophy

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July 2018

Chairman : Associate Professor Yuhanis Abdul Aziz, PhD
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Gaps exist in research on the ways in which international tourists can be motivated to use food safety cues in the choice of destination local restaurant in order to reduce the risk of contracting a foodborne illness. The primary purpose of the present study was to assess the utility of the Protection Motivation Theory (PMT) in predicting international tourists' protection intentions concerning the threat of restaurant-associated foodborne illnesses in Malaysia. It employed a cross-sectional design with 431 Malaysia international first-time travelers as the respondents. The Covariance-Based Structural Equation Modeling was employed for data analysis. Before testing the actual hypotheses, confirmatory factor analysis was conducted to assess the reliability and construct validity of the measurement model. Path analysis indicated that the subcomponents of the coping appraisal, namely perceived self-efficacy and perceived response efficacy, positively and significantly predicted international tourists' intentions to use food safety cues in the choice of Malaysian local restaurants. Among the threat appraisal subcomponents, the perceived vulnerability positively and significantly influenced protection intention while perceived severity did not predict protection intention. The positive significant influence of threat appraisal on coping appraisal was identified. Furthermore, coping appraisal fully mediated the relationship between threat appraisal and protection intention. The subjective norm only moderated the relationship between perceived vulnerability and protection intention. The outcomes of the comparative tests of hypothesis indicated that there were significant differences in international tourists' protection intentions when they were classified by gender, trip plan, and nationality. Results of the study can be used to design communication resources developed to enhance international tourists' intentions to use food safety cues in the choice of destination local restaurants. Educational and communication resources should emphasize self-efficacy, response efficacy, and vulnerability perception.

Abstrak tesis yang dikemukakan kepada Senat Universiti Putra Malaysia sebagai memenuhi keperluan untuk ijazah Doktor Falsafah

**ANCAMAN PENILAIAN PELANCONG, PENILAIAN YANG DITANGANI
DAN NIAT PERLINDUNGAN UNTUK MENGGUNAKAN ISYARAT
KESELAMATAN MAKANAN DI RESTORAN PILIHAN DI MALAYSIA**

Oleh

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Terdapat jurang dalam penyelidikan mengenai cara pelancong antarabangsa dapat dimotivasi untuk menggunakan isyarat keselamatan makanan dalam memilih restoran tempatan bertujuan untuk mengurangkan risiko dijangkiti penyakit bawaan makanan. Tujuan utama kajian ini adalah menilai penggunaan Teori Motivasi Perlindungan (PMT) dalam meramalkan niat perlindungan pelancong antarabangsa mengenai ancaman penyakit makanan yang berkaitan dengan makanan di Malaysia. Ia menggunakan cara rentas ke atas 431 pelancong pertama kali ke Malaysia sebagai responden. Model Modelan Persamaan Struktur Kovarians digunakan untuk menganalisis data. Sebelum menguji hipotesis, analisis faktor pengesahan telah dijalankan untuk menilai kebolehpercayaan dan kesahihan model pengukuran. Analisis Laluan menunjukkan bahawa subkomponen dari penilaian yang dihadapi iaitu keberkesanan diri dan keberkesanan tindakbalas yang dirasakan telah secara positifnya dan dengan ketara meramalkan niat pelancong antarabangsa untuk menggunakan petunjuk keselamatan makanan dalam pilihan restoran tempatan Malaysia. Di antara penilaian ancaman subkomponen, tanggapan kelemahan yang dirasakan telah secara positif dan ketara mempengaruhi niat perlindungan sebaliknya tanggapan keparahan tidak meramalkan niat perlindungan. Pengaruh penting penilaian ancaman keatas penilaian yang ditangani telah dikenalpasti. Selanjutnya, penilaian yang ditangani sepenuhnya mengantara hubungan antara penilaian ancaman dan niat perlindungan. Norma subjektif hanya mensesderhanakan hubungan antara tanggapan kelemahan dan keinginan perlindungan. Hasil ujian perbandingan hipotesis menunjukkan bahawa terdapat perbezaan yang signifikan dalam niat perlindungan pelancong antarabangsa apabila mereka diklasifikasikan berdasarkan jantina, rancangan perjalanan, dan kewarganegaraan. Keputusan kajian boleh digunakan untuk merancang sumber komunikasi yang dibangunkan untuk meningkatkan minat pelancong antarabangsa untuk menggunakan petunjuk

keselamatan makanan dalam pilihan restoran tempatan didestinasikan. Sumber-sumber pendidikan dan komunikasi harus menekankan keberkesanan diri, keberkesanan respons, dan tanggapan kelemahan.



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This thesis was submitted to the Senate of the Universiti Putra Malaysia and has been accepted as fulfilment of the requirement for the degree of Doctor of Philosophy. The members of the Supervisory Committee were as follows:

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LIST OF ABBREVIATIONS

AMOS	Analysis of Moment Structures
BGCD	Bureau of General Communicable Diseases
CDC	Center for Disease Control and Prevention
CFA	Confirmatory Factor Analysis
GSCA	Generalized Structured Component Analysis
GDP	Gross Domestic Product
GNI	Gross National Income
GVA	Gross Value Added
ILO	International Labour Organization
ML	Maximum Likelihood
MHAS	Malaysian Halal Showcase
MOTAC	Ministry of Tourism and Culture Malaysia
PLS	Partial Least Squares
%	Percentage
PR	Perceived Response Efficacy
PSE	Perceived Self-efficacy
PS	Perceived Severity
PV	Perceived Vulnerability
PI	Protection Intention
PMT	Protection Motivation Theory
SPSS	Statistical Package for Social Sciences
SN	Subjective Norm
SEM	Structural Equation Modeling
TPB	Theory of Planned Behavior

TRA	Theory of Reasoned Action
UNWTO	United Nations World Tourism Organization.
VET	Value Expectancy Theory
WEF	World Economic Forum
WFTA	World Food Travel Association
WHO	World Health Organization
WTTC	World Travel & Tourism Council



CHAPTER 1

INTRODUCTION

1.1 Chapter Overview

Travel-associated foodborne illness is common, but preventable. An increasing body of data from foodborne disease cases suggest that eating food at restaurants is an important source of infection which cannot be easily avoided by tourists due to the dining-out pattern of food consumption while traveling. Such vulnerability to the threat of foodborne disease calls for actions focusing on the ways in which the risk of developing foodborne diseases within the restaurant industry can be effectively communicated to travelers, alongside purposefully promoting risk reduction behaviors. However, this study uses a theory-based approach. It helps to better understand the role of cognitive appraisal processes in predicting international tourist intention to utilize food hygiene cues in choosing a local restaurant with passable level of food hygiene, hence reducing the risk of contracting foodborne disease.

This chapter commences with the background of the study, to make the area of research more clear and comprehensible. It addresses the problem at hand that needs to be solved. Then, it leads up to the research questions and objectives. Accordingly, the significance of the study and the scope of the study are specified. Eventually, the definitions of the study terms are developed in the final section.

1.2 Background of the Study

Over decades, food as a tangible local attribute of a destination, has been integrated as a tourism product in a consistent way and has become a constitutive element of the tourist's overall experience (Bessiere & Tibere, 2013; Bjork & Kauppinen-Raisanen, 2016). However, it has only recently been recognized at its own right by tourism academicians and practitioners. In particular, food tourism has become an emerging phenomenon known by different technical terms, such as culinary tourism (Long, 1998), gastronomy tourism (Hjalanger & Richards, 2002), and cuisine tourism (Hall & Mitchell, 2001). Food describes a specific segment of today's tourists who seek travel experiences dominated by the joys of taking unaccustomed cuisine. Food tourism acts as a niche that feeds a \$150 billion industry (Baran, 2013), which indicates how well destination food and beverage motivates visitors to travel many miles away from their homes. For example, in 2013 alone, 51% of U.S. tourists travelled to acquire knowledge about and take pleasure in exclusive eating experiences (Mandala Research, 2013). Furthermore, a 2016 food travel monitor report taken from the World Food Travel Association (WFTA, 2016) showed that performing a culinary activity has motivated 75% of American leisure tourists to visit a destination in 2016.

This growing interest in the region's local food does not only refer to the emergence of current mainstream tourism trend, it is also driven by the biological necessity to food that compels all tourists to dine out while traveling (Wolf, 2006) and spend almost 30% of travel expenditure on food and beverage (Mak, Lumbers, Eves, & Chang, 2012). Furthermore, food and culinary traditions offer a gateway into a variety of cultures via taste, food procurement, preparation, and entire dining environment (Henderson, 2014) that feeds tourist's hunger for experiencing differences. Finally, locally produced food products heighten destination tourism offerings and develop additional source of income for local residents (Telfer & Wall, 1996).

Therefore, it would not be surprising if destination marketing organizations are relying on locally distinctive food in selling uniqueness (Sims, 2010) and creating a number of promotional food campaigns and events to keep an unrivaled profile distinguishing them from the rest (Haven-Tang & Jones, 2006). For example, Hong Kong (Okumus, Okumus, & McKercher, 2007), Singapore (Brien, 2014), Turkey (Okumus & Cetin, 2015), Australia (Cambourne & Macionis, 2003), Malaysia ("Food Tourism," 2014), and some European countries including France, Italy, Spain, and United Kingdom (Du Rand & Heath, 2006) are promoting themselves as the centers of food and projecting positive food images that enhance the quality of tourist's overall experience and desire to return.

Even though local food creates a hallmark attraction affecting tourist destination choice (Cohen & Avieli, 2004; Meler & Cerovic, 2003) and is capable of becoming a driving force to evoke an undeniable sense of place (Haven-Tang & Jones, 2005) and culture (Rand, Heath, & Alberts, 2003), consuming local food may not be feasible for travelers since they have some significant apprehensions concerning destination food such as language barriers, poor hygiene standards, food provider's insufficient culinary knowledge, and religious dietary principles (Canally & Timothy, 2007; Cohen & Avieli, 2004; Moon, 2008).

Amongst these apprehensions, the growing worries and intensifying concerns towards food safety has been considered as the most important part of tourists' apprehensions in a certain destination (Henderson, 2009). In a nutshell, tourists have mixed feelings or contradictory ideas regarding consumption of the destination local food. While attracted by local cuisine and excited about gaining experience of taking unusual food (Tse & Crotts, 2005), they are concerned about safety and hygienic standards of food (MacLaurin, 2003; Torres & Skillicorn, 2004).

The plausible reason for this particular feeling of insecurity refers to tourists' unfamiliarity with the certain destination. Unfamiliarity creates a gap between tourists and destination food products. Tourists no longer know what they are eating and how those foods are prepared. Consequently, they become destabilized and perceive risk. Another reason for tourists' states of insecurity or hesitation concerning destination food safety refers to the tourists' high vulnerability to the

foodborne illness that has been regarded as a top tourist's concern in the international destination (Reichel, Fuchs, & Uriely, 2007).

Although foodborne illness cases among tourists are not figured out and accurately reported by both tourists' countries of origin and destination, the gastrointestinal infection is considered as the most common disease associated with travel (DuPont et al., 2009; Paredes-Paredes, Flores-Figueroa, & DuPont, 2011). According to the Center for Disease Control and Prevention (CDC), Traveler's Diarrhea is the most common illness affecting tourists in the developing world (Leder, 2015), particularly travelers in Asia, Africa, and Latin America (Ashley et al., 2004; Connor, 2009; Rose, Keystone, & Hackett, 2016).

The food borne illness becomes more serious in Southeast Asian countries to the extent that these countries represented the highest incidence rate in the 2015 (World Health Organization [WHO], 2015). Besides hot and humid weather sustainable for microbial growth, insanitary food handling practices by food handlers and poor environmental sanitation are reported as the key contributors to the foodborne illness in this particular region (Nee & Sani, 2011; Samapundo, Cam Thanh, Xhaferi, & Devlieghere, 2016; Soon, Singh, & Baines, 2011).

Although Malaysia shows a lower contribution to the foodborne illness compared to some other popular tourism destinations in the Southeast Asian region such as Thailand with a total of 70, 957 cases just for 8 months in 2017 (Bureau of General Communicable Diseases [BGCD], 2017), this country still has high cases of foodborne illness (Abdul-Mutalib, Syafinaz, Sakai, & Shirai, 2015; Hassan, Hashim, Johar, & Faisal, 2014; Sharifa Ezat, Netty, & Sangaran, 2013). However, Malaysia has thorough government efforts in conducting surveillance programs to increase the hygiene level of the food premises and promote food handling practices of food producers (Philip, 2015).

No matter which geographical region has high cases of foodborne disease, public food eateries, particularly restaurants, play a strong role in developing foodborne illnesses mainly caused by neglecting hygienic standards of food handling and poor environmental sanitation (Jones & Angulo, 2006). Although food contamination can occur at any point of the food supply chain, foodborne illness outbreaks and non-outbreak cases have been frequently associated with dining at restaurants (DeWaal & Glassman, 2013; Gould, Walsh, & Vieira, 2013). Such an association easily places tourists in a high risk of developing food poisoning since travelling compels them to dine out.

Therefore, while local food sold by destination food service establishments is appreciated for its novel flavor and unique way of offering cultural experience, health problems caused by consumption of contaminated food serving at these food sets can easily ruin the travelers' overall experiences (Yiamjanya & Wongleedee,

2013) and leads to possible damages to the destination image. However, it is not just the health losses caused by foodborne illness on the tourist and destination image that is of concern. A flow-on effect of the threats relevant to food safety refers to the impacts that they have on the tourist's perception of risk and the way in which he/she deals with it.

Therefore, it is essential to study a series of the cognitive perceptual processes that tourists employ to protect themselves from food-related health threats. Such understanding helps destination marketers to promote risk-reduction strategies that mostly protect the tourist's health and simultaneously increase tourist consumption of local destination food.

1.3 Problem Statement

Although food contamination can happen at each part of the food supply chain, there exists strong evidence concerning the leading roles of restaurants in developing foodborne diseases (Jones & Angulo, 2006; DeWaal & Glassman, 2013; Center for Disease Control and Prevention [CDC], 2013; Gormley, Rawal, & Little, 2012; Hutchinson, 2015; Lee & Middleton, 2003; Medus, Smith, Bender, Besser, & Hedberg, 2006; Ngoc, 2016; Pti, 2015; Poulter, 2009; Saeed, 2015; Saeed & Hamidi, 2010; Torso et al., 2015; Vonow, 2016).

The scenario of restaurant-associated foodborne disease, commonly called food poisoning, becomes much worse when it comes to the travelling context due to the unavoidable dining-out pattern of the tourist's consumption of food. Tourists very often contract foodborne illness by dining at destination restaurants, particularly in areas with standards of sanitation lower than those to which the tourists' immune systems are accustomed (Wongleedee, 2013).

Even though the majority of foodborne illness cases among tourists go unreported, or might not even be systematically investigated, developing a foodborne illness while travelling, also known as the "Traveler's Diarrhea", is the most common travel-associated disease (Hagmann et al., 2014; Paredes-Paredes, Flores-Figueroa, & DuPont, 2011). According to CDC, "Traveler's Diarrhea" is most frequently affecting tourists in the developing world (Leder, 2015). At a rough guess, 30% to 70% of tourists (CDC, 2013; Heather, 2015) experience traveler's diarrhea, particularly tourists in Southeast Asia, Africa, and Latin America (Ashley et al., 2004; Barrett & Brown, 2016; Connor, 2009; Rose, Keystone, & Hackett, 2016). The chance of developing Traveler's Diarrhea may increase in Southeast Asian countries since this region represented the highest incidence rate of foodborne illness in 2015 (World Health Organization [WHO], 2015).

Regardless of geographic distribution and expansion of the Traveler's Diarrhea, eating food at destination local restaurants is presumably the largest contributor to the development of travel-induced diarrhea due to the restaurants' poor hygienic practices (Centre for Disease Control and Prevention [CDC], 2013; Connor, 2009; Gautret & Parola, 2017). The precise proportion of the foodborne illnesses that result from eating food at destination local restaurants is unknown but dozens of travel news provides evidences to back up the fact that tourists are usually struck down by food poisoning caused by consumption of contaminated food serving at destination restaurants (Feeds, 2017; Hutchinson, 2015; Latip, Balkis, Mohd, & Anwa, 2012; Lapin, 2018; Lennon, 2016; Lennon, 2017; Ngoc, 2016; Noble, 2014; Pti, 2015; Poulter, 2009; Vonow, 2016). Although there is a wide range of food safety risk factors contributing to food poisoning in restaurants, such as inappropriate cold holding temperatures of food, insufficient cooking, dirty or contaminated utensils and equipment, poor health and hygiene of staff, and cross-contamination of food (Gormley, Rawal, & Little, 2012; Todd, Greig, Bartleson, & Michaels, 2007), most of these risk factors take on the food service operator's perspective.

From the consumer perspective, the contributing risk factors to the foodborne illness are usually limited to the tangible food hygiene practices of restaurants, such as cleanliness of the physical environment, equipment, and staff (Jones, 2002). It is mostly because the key hygiene aspects influencing safety operation of restaurants are not always observable by consumers (Henson et al., 2006).

However, the consumers' perceptions of observable safety indicators of restaurants such as cleanliness attributes relevant to staff, premise environment, and equipment not only help them to make a judgment about the level of food safety at a particular restaurant, these attributes are also thought to act as decision making variables in the choice of restaurant (Park, 2014). In simple words, consumers evaluate the safety of food on the basis of tangible food safety cues, including visual hygiene indicators or cleanliness attributes of restaurants and external sources of information to choose where to eat (Adam, Hiamey, & Afenyo, 2014; Barber & Scarceli, 2010; Choi, Miao, Almanza, & Nelson 2013; Danelon & Salay, 2012; Fatimah, Boo, Sambasivan, & Salleh, 2011; Henson et al., 2006; Lee, Niode, Simonne, & Bruhn, 2012; Park, Almanza, Miao, Sydnor, & Jang, 2016; Park, 2014; Seo, Almanza, Miao, & Behnke, 2015; Wong et al., 2015).

Following the literature, tourist's reliance on such hygiene cues in assessing safety level of food and resulting impact on restaurant selection is not unexpected. Tourists, like any other consumer, do subjective judgment of the risks associated with dining at a particular restaurant based on specific visual and information cues in order to select a restaurant with a passable level of food hygiene to reduce the risk of foodborne disease. In simple words, tourists engage in a preventive measure by patronizing at food service establishments that are judged to present satisfactory levels of the food hygiene and safety.

To date, minimal empirical work has been carried out on the international travelers' perceived risk of contracting foodborne illness as a serious threat associated with patronizing at destination restaurants and their intentions to adopt food safety cues in the choice of restaurant. In the light of such an exploration, this study also addresses the four other theoretical and contextual gaps in the tourism literature.

Travel risk studies suffer from inconsistent conceptualization and measurement of risk perception (Korstanje, 2011; Williams & Balaz, 2015) and also the lack of theoretical underpinning (Schroeder, Pennington-Gray, Korstanje, & Skoll, 2016). While risk perception is characterized as a multidimensional cognitive construct by different theories of health behavior (Lenenthal, 1970; Rosenetok, 1974; Rogers 1975, 1983; Schwarzer, 2008), it has been mainly treated as a one-dimensional construct in the travel risk studies (Chew & Jahari, 2014; Law, 2006; Seabra, Dolnicar, Abrantes, Kastenholz, 2013; Sharifpour, Walters, & Ritchie, 2014; Pennington-Gray, Schroeder, & Kaplanidou, 2011).

Furthermore, tourism studies mostly focus on the impact of perceived risk on the tourists' decision-making, although there are other risk-related constructs such as perceived efficacy (Floyd, Prentice-Dunn, & Rogers, 2000) in the academic disciplines of health behavior (Lenenthal, 1970; Maddux & Rogers 1983; Rosenetok, 1974; Rogers 1975, 1983; Rosenetok, 1974; Schwarzer, 2008) and psychology (Bandura, 1977) that have been neglected by travel risk studies.

Therefore, it is probably most critical to study the utility of a theory-based approach in the travel-related risk studies adopted from other academic disciplines which have large body of knowledge towards the risky decision-making mechanism such as health behavior and psychology disciplines (Schroeder et al., 2016). It provides a theoretical foundation to clearly conceptualize and measure risk perception. At the same time, studying other risk-related constructs makes a better comprehending of the processes that voyagers go through to make a decision when confronting travel threats.

Under such context, there is a widespread use of Protection Motivation Theory [PMT] (Rogers, 1975) as one of the most prominent theories in the field of health behaviors (Weinstein, 1993) to explain how cognitive perception of risk or threat appraisal and perceived efficacy variables or coping appraisal are thought to predict individual's protection intention once confronting with a specific health threat (Choi, Nelson, & Almanza, 2011; Chow & Mullan, 2010; Crowley et al., 2014; De Steur, Mogendi, Wesana, Makokha. & Gellynck, 2015; Henson, Cranfield, & Herath, 2010; Miao, 2014; Mogendi, De Steur, Gellynck, & Makokha, 2016; Mullan, Allom, Sainsbury, & Monds, 2016; Mullan, Wong, Kothe, & Maccann, 2013; Mullan, Wong, & O'Moore, 2010; Park, Hoover, Dodd, Huffmanthe, & Du Feng, 2011; Quick, Byrd-Bredbenner, & Corda, 2013). Threat appraisal in the PMT model refers to the probability of occurrence of a specific health threat (perceived vulnerability) and estimates of the seriousness of the harms associated with the threat (Rogers,

1975). Coping appraisal consists of perceived response efficacy or perceived effectiveness of the recommended preventive behavior and perceived self-efficacy, or the level of confidence in one's ability to follow the recommended preventive behavior (Rogers, 1983). While the PMT is comprehensive enough to be applied in any context confronting a specific threat (Floyd, Prentice-Dunn, & Rogers, 2000; Prentice-Dunn & Rogers, 1986), the scholarly PMT studies targeting food safety-related threats in the tourism context is simply rare.

Even though the PMT's coping appraisal subcomponents, particularly self-efficacy, generates the highest protection intention (Floyd et al., 2000; Milne, Sheeran, & Orbell, 2000), there is some research indicating the higher predictive ability of the response efficacy (Choi, Nelson, & Almanza, 2011; Park, Hoover, Dodd, Huffmanthe, & Du Feng, 2011) as another subcomponent of coping appraisal as well as a threat appraisal subcomponent in the coping decision-making mechanism (Chow & Mullan, 2010; Maio, 2014). Such an inconsistency in the predictive ability of the PMTs' constructs needs further investigation. Additionally, the weak predictive ability of threat appraisal on protection intention compared to coping appraisal (Floyd et al., 2000; Milne et al., 2000) and also sequential ordering of threat and coping appraisal (Ho, Davidson, & Ghea, 2005; Tanner, et al., 1991, Schwarzer, 1992, Plotnikoff & Higginbotham, 1998) have led this study to examine the mediation effect of coping appraisal on relationship between threat appraisal and protection intention.

In spite of the determinant role of social norms in predicting health-related behavioral intention (Al-Swidi, Huque, Hafeez, & Shariff, 2014; Dohnke, Weiss-Gerlach, & Spies, 2011; McEachan et al., 2016; Mullan, Wong, & Kothe, 2013; Previte, Russell-Bennett, & Parkinson, 2015; Teng & Wang, 2015), PMT has never been extended to explicitly model social norms (Munro, Lewin, Swart, & Volmink, 2007). Such an inherent limitation of the PMT (Taner, Hunt, & Eppright, 1991) creates a strong demand to borrow the well-established construct of the social norms, namely subjective norm, from the Theory of Planned Behavior (TPB) (Ajzen & Fishbein, 1970) to bring in the PMT model. Then, it assesses whether the direction and strength of protection intention links to the other PMT constructs change based on the value of subjective norm. It is important in the travel risk context, particularly when social media is an effective tool of communicating food safety-related risks and diseases (Overbey, Jaykus & Chapman, 2017; Rutsaet et al., 2014) because there is a growing popularity and trustworthiness of online word of mouth in the travel section (Gretzel & Yoo, 2008; Sparks, Perkins, & Buckley, 2013; Schroeder & Lori Pennington-Gray, 2015; Xiang & Gretzel, 2010). No study to date has examined the moderation effects of subjective norm within PMT model.

Furthermore, while different types of backgrounds and situational factors are of potential relevance to the behavioral intention as other attitudinal theories propose (Ajzen & Fishbein, 2005; Ajzen, 1991), there is nothing in the PMT to propose

which of these factors in the travel context deserves attention. It solely represents another academic gap identified by the present study.

In Malaysia, cases of alleged foodborne illnesses associated with restaurants is nothing new and such association still remains one of the major consumer issues in spite of the government's regular inspections of food premises and imposed strict penalties for serious food safety violations (Cheng, 2016; Kaur, 2016; Sharifa Ezat, Netty, & Sangaran, 2013; Soon, Singh, & Baines, 2011; Ungku Fatimah, Boo, Sambasivan, & Salleh, 2010; Yusof, 2015). The significant contribution of Malaysian restaurants and food premises to the foodborne illness may be clearer by the growing rate of restaurant closure. For example, 1,157 food premises were forced to close down due to the low standards of cleanliness and hygiene in 2015, which was more than double the number in 2014 and triple the number in 2013 (Nair, 2016).

Although some cases of tourist food poisoning were recently reported in Malaysia (Latip, Balkis, Mohd, & Anwa, 2012; Murali, 2015), the published reports regarding the number of tourists affected by foodborne illness in Malaysia, like any other destination, could only be the tip of the iceberg as the majority of cases go about underreported due to the patients' preferences in not looking for medical care and diagnostic tests, maybe even not reporting their conditions to the authorities (Mead et al., 2004). Recently, the Ministry of Health Malaysia (2016) reported that the number of food poisoning cases over the past few years (2010-2015) averaged around 14,671 a year, especially reaching an alarming levels in some tourism areas such as Pulau Pinang in 2014 (incidence rate, 135.32), Selangor in 2015 (incidence rate, 58.58), and Perak in 2016 (Asrin & Ismail, 2016).

However, increased public health-consciousness, widespread media coverage of restaurant-associated foodborne disease cases (Hawkins et al., 2016; Harrison et al., 2014; Harris et al., 2014), and emergence of travel-related social media platforms such as Yelp, TripAdvisor, and Urbanspoon, that help people share their experience with restaurants, easily creates concern in the minds of tourists when travelling to tropical destinations with hot and humid weather suitable for microbial growth such as Malaysia. Accordingly, tourist's feeling of insecurity towards the threat of foodborne illness may set up a series of cognitive perceptual processes that acts as a powerful motive for protective intention in terms of adjusting restaurant choice behavior. Yet, no simple study provides a thorough understanding on such matters in Malaysia particularly for first-time visitors (tourists) whose behaviors heavily rely on external information (McKercher & Wong, 2004).

1.4 Research Questions

As the literature gaps have been identified in section 1.3, this study tends to ask five research questions as follows:

1. Do food safety-related threat appraisal (perceived vulnerability and perceived severity) as well as coping appraisal (perceived response efficacy and perceived self-efficacy) predict protection intention among international tourists in Malaysia?
2. Does food safety-related threat appraisal influence coping appraisal among international tourists in Malaysia?
3. Does coping appraisal mediate the relationship between protection intention and food safety-related threat appraisal among international tourists in Malaysia?
4. Does perceived subjective norm moderate the relationship between coping appraisal (perceived response efficacy and perceived self-efficacy) and protection intention as well as food safety-related threat appraisal (perceived vulnerability and perceived severity) and protection intention among international tourists in Malaysia?
5. Are there any significant differences in Malaysia's international tourists' protection intentions when they are classified by the sociodemographic and travel characteristics?

1.5 Research Objectives

The general objective of the present study is to assess the utility of the PMT in predicting risk-reduction behaviors concerning food safety-related threats in the tourism context. It has formulated five specific objectives. These are:

1. To determine whether food safety-related threat appraisal (perceived vulnerability and perceived severity) as well as coping appraisal (perceived response efficacy and perceived self-efficacy) predicts protection intention among international tourists in Malaysia.
2. To assess the influence of food safety-related threat appraisal on coping appraisal among international tourists in Malaysia.
3. To test the mediating role of coping appraisal on the relationship between protection intention and food safety-related threat appraisal among international tourists in Malaysia.
4. To examine the moderating role of the perceived subjective norm on the relationships between coping appraisal (perceived response efficacy and perceived self-efficacy) and protection intention as well as food safety-related threat appraisal (perceived vulnerability and perceived severity) and protection intention among international tourists in Malaysia.

5. To investigate the significant differences in Malaysia's international tourists' protection intentions according to the sociodemographic and travel characteristics.

1.6 Significance of the Study

This study makes theoretical and practical contributions. From the theoretical perspective, this study contributes to the body of knowledge in several ways.

1.6.1 Academic Significance

Increasing criticism of travel risk literature for adopting inconsistent conceptualization and measures of risk perception and also the lack of theoretical underpinning persuades this study to adopt a theory-based approach from health behavior discipline that has a vast body of knowledge relevant to risky decision-making.

This approach helps to clearly conceptualize the multidimensional construct of risk perception. It also makes a ground to study risk perception accompanied with other risk-related variables under the light of strong theoretical foundation which provides a better understanding of the role of travel-related risks in tourist's health decision-making mechanism.

However, this study adopts the Protection Motivation Theory (PMT). PMT has been widely applied in various contexts targeting individual health-related behavioral changes (Floyd et al., 2000; Milne et al., 2000) but it had never been tested to predict tourist's intention to follow preventive measures for the sake of mitigating the risks of contracting foodborne illness. Indeed, thoroughly comprehending which PMT element matters once tourists make a decision to engage in a protective behavior becomes even more valuable. Such an application easily represents the unique contribution of the current study.

Moreover, this study proposes both mediation and moderation effects that may contribute to the body of knowledge by developing PMT in general and in the travel risk literature via providing new insights towards the strength and directions of the key relationships that may complement the PMT's predictive ability of preventive measure. Full to partial support of the coping appraisal's mediating role makes the decision-making mechanism more comprehensible. It shows how the influence of threat appraisal can be transferred to protection intention via coping appraisal of the PMT.

Furthermore, borrowing subjective norm from the TPB and incorporating subjective norm into the PMT as a moderator probably creates proper efforts to overcome existing limitations of the theory and enhances explained variance in intention. It is supposed to change the relationships between protection intention and other PMT constructs as its value increases or decreases.

Additionally, the present study's results may identify some sociodemographic and travel characteristics that are of potential relevance to the protection intention in the travel context and do not deserve to be treated as the "background factors" in the PMT. These factors are proposed by some attitudinal theories to influence intentions indirectly by their effects on attitudes and self-efficacy (Ajzen & Fishbein, 2005; Ajzen, 1991).

The possible differences in the protection intention according to the sociodemographic and travel characteristics identify the factors that are of potential relevance to the protection intention in the travel context. It helps to figure out the extent to which these factors are deserved to be treated as the "background factors" and "situational factors" influencing intentions indirectly by their effects on perceived severity, vulnerability, response efficacy and self-efficacy.

1.6.2 Practical Significance

From the operational or practical perspective, theory-based approaches are effective tools to understand and purposefully promote risk-reduction behaviors (Michie, Johnston, Francis, Hardeman, & Eccles, 2008; Noara & Mehrotra, 2011) since they specify the key factors and relationships that intervene in the process of attitude and behavior change (Michie & Johnston, 2012). Although the deterministic conclusions cannot be drawn towards the usefulness of the thesis model in this moment as a whole in predicting an individual's behavioral intention, it would be more beneficial to address the effective evidence-based PMT constructs which can be easily used in designing future interventions (Gaston & Prapavessis, 2014).

Furthermore, this study could provide a deep insight towards threat appraisal elements which arouse protection intention. The pursuit of that particular knowledge in the marketing context assists tourism practitioners to realistically manipulate risk communications. Such the communication provides proper information that enables tourists to make informed food safety decisions.

Moreover, full to partial support of coping appraisal's mediating role, if proven, can persuade tourism policy makers and practitioners to develop more information concerning precautionary measures in their campaigns and messages to enhance protection intentions. Simply put, experimental works in which people are presented with PMT-based persuasion messages have demonstrated that manipulating coping beliefs significantly affects an individuals' intentions to engage in protective

behavior (Campis, Prentice-Dunn, & Lyman, 1989). Therefore, tourism marketers can conduct effective persuasive messages that make international tourists believe they are able to employ food safety cues. Those strategies strongly work to decrease the chance of contracting a foodborne illness.

In addition, the moderation effect of social norm, if proven, can suggest possible directions for targeting the tourist's key opinion leaders such as celebrities or social media influencers, more specifically travel-related ones who utter positive word of mouth. Using sociodemographic and travel characteristics provide a useful segmentation of tourists for future effective intervention.

The reporting of cases relating to travel-induced food poisoning, even if it is only a few cases, easily acts as a travel warning for international tourists headed to some particular destination (Flynn, 2016; Lennono, 2016; Saurine, 2011; Ryan, 2015) which in turn imposes high costs for the most tourism-dependent ones (Indar, 2014). Logically, victimization of tourists by foodborne illness during their trips to Malaysia generates negative word of mouth, which in turn adversely affects potential travelers' general impressions and tourist flow. Such an exploration helps tourism destination marketers to better communicate risk messages that mostly protect tourists against restaurant-associated foodborne diseases and enhance the tourist consumption of food at local restaurants, which is highly desirable for any tourism destination.

However, the summary of research gaps, research objectives, and significance of the study are presented in Table 1.1.

Table 1.1 : Summary of Research Gaps, Research Objectives and Significance of the Study

Research Problem (Industry)	Research Gaps (Academic)	Research Objectives	Academic and Practical Significance
<p>-According to CDC, “Traveler’s Diarrhea” is the most common travel-induced diseases, frequently affecting tourists in the developing world, particularly travelers in Asia, Africa, and Latin America.</p> <p>-There exists strong evidences concerning the leading roles of restaurants in developing foodborne illness.</p> <p>- Eating food at destination local restaurants is presumably the largest contributor to the development of travel-induced diarrhea due to the restaurants’ poor hygienic practices.</p>	<p>- Lack of inconsistent conceptualization and measurement of risk perception (Korstanje, 2011; Williams & Balaz, 2015) and also the lack of theoretical underpinning in travel risk studies (Schroeder, Pennington-Gray, Korstanje, & Skoll, 2016).</p> <p>-Inconsistent findings concerning the predictive ability of the PMT’s key points in the coping decision-making mechanism.</p> <p>-The weak predictive ability of threat appraisal on protection intention compared to coping appraisal (Floyd et al., 2000; Milne et al., 2000) also sequential ordering of threat and coping appraisal (Ho, Davidson, & Ghea, 2005; Tanner, et al., 1991, Schwarzer, 1992, Plotnikoff & Higginbotham, 1998).</p>	<p>1- To determine whether threat appraisal (perceived vulnerability and perceived severity) as well as coping appraisal (perceived response efficacy and perceived self-efficacy) predicts protection intention among international tourists in Malaysia.</p> <p>2- To assess the influence of threat appraisal on coping appraisal among international tourists in Malaysia.</p> <p>3- To test the mediating role of coping appraisal on the relationship between protection intention and threat appraisal among Malaysia international tourists.</p> <p>4- To examine the moderating role of the perceived subjective norm on the relationships</p>	<p>-It clearly conceptualizes the multidimensional construct of risk perception.</p> <p>-It provides strong theoretical foundation.</p> <p>-It applies the PMT to predict behavioral intention in confronting with specific food-related threats in the travel context.</p> <p>- Full to partial support of coping appraisal’s mediating role makes the decision-making mechanism more comprehensible.</p> <p>-Incorporating subjective norm into the PMT probably creates the proper efforts to overcome existing limitations of the theory and enhance explained variance in intention.</p> <p>- A theory-based approach is an effective tool to understand and</p>

<ul style="list-style-type: none"> - Inherent limitation of the PMT in explicitly modeling social norm (Munro, Lewin, Swart, & Volmink, 2007; Taner, Hunt, & Eppright, 1991). - There is nothing in the PMT to propose which of the backgrounds and situational factors deserve attention in the travel context. 	<p>between coping appraisal (perceived response efficacy and perceived self-efficacy) and protection intention as well as threat appraisal (perceived vulnerability and perceived severity) and protection intention among international tourists in Malaysia.</p> <p>5- To investigate the significant differences in Malaysia's international tourists' protection intentions according to the socio-demographic and travel characteristics.</p>	<p>purposefully promote risk-reduction behaviors.</p> <ul style="list-style-type: none"> - The proven mediating role of coping appraisal resonates the manipulating of coping beliefs to generate persuasive messages. - The proven moderation effect of social norm suggests possible directions for targeting the tourist's key opinion leaders. - Using sociodemographic and travel characteristics provides a useful segmentation of tourists for future effective intervention.
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1.7 Scope of the Study

The overarching aim of the study was to examine the utility of the PMT in predicting Malaysia's international tourists' intentions to use food safety cues in the choice of local restaurant, thus decreasing the risk of contracting a foodborne illness. To achieve this, a quantitative method was undertaken to measure the study variables and test proposed hypotheses.

The data collection was confined to the specific period of time from 19 April to 26 July 2017 due to the nature of the cross-sectional design of the study. 500 self-administered questionnaires were distributed among international tourists in Malaysia at Kuala Lumpur International Airport (KLIA 1 and KLIA 2) as the busiest

entry points in terms of international arrivals by mode of air. A combination of quota and purposive sampling techniques was employed for selecting respondents. In light of the World Tourism Organization's definition of tourists [UNWTO] (2015), one-day trippers and transit passengers were excluded. Based on inclusion criteria, only international first-time travelers with English language proficiency were selected to participate in this study.

The present study used the Structural Equation modelling (SEM) for analyzing the collected data. This method helps to handle the complexities of the latent constructs' interrelationships in the conceptual model (Hair, Black, Babin, & Handerson, 2010).

1.8 Definition of Key Terms

Within the scope of this research, the important key terms are as follows:

Threat Appraisal

Threat appraisal is cognitive perception of risk (Schroeder et al., 2016) identified by individual's perceived probability to the occurrence of a specific threat and perceived severity of the harm caused by the occurrence (Rogers, 1975).

Operational definition: In this study, threat appraisal refers to the international tourist's perceived vulnerability of contracting foodborne illness while dining at destination local restaurants and perceived severity of its associated health losses.

Coping Appraisal

Coping appraisal refers to an individual's perceived efficacy of a protective response and his/ her perceived ability to perform it successfully (Rogers, 1983, p. 156).

Operational definition: In this study, coping appraisal refers to the international tourist's perceived efficacy of using food safety cues in the choice of Malaysian local restaurant as the protective measure in eliminating risk of contracting food poisoning and perceived ability to perform it.

Subjective Norm

According to Ajzen and Fishbein (1970), subjective norm refers to one's perception of how significantly others behave in a particular way in response to him or her doing an action and one's motivation to adhere to significant other's expectations.

Operational definition: In this study, perceived norm is measured through subjective norm or the international tourist's perception of whether or not using food safety cues in the choice of Malaysian local restaurants will be approved by significant others.

Protection Intention

According to Roger (1975), the protection motivation triggers, sustains, and conducts behavior to keep self from harm. The protection motivation is measured by intention, which plays an intermediary role between actual behavior and cognitive perceptual evaluation of threat as well as adaptive behavior (Boer & Seydel, 1996).

Operational definition: In this study, protection intention refers to the international tourist's willingness to use food safety cues in the choice of Malaysian local restaurants as the protective response.

1.9 Chapter Summary

Overall, high possibility of tourists' exposure to food safety-related threats, particularly foodborne illness, leads them to do subjective judgments of risk. This situation generates a context in which perception of food safety risk creates tourists' loss of confidence in destination food products. Such the uncertainty and trust issues imposed by perceived risk can restrict the consumption of destination local food, but still, many tourists, like any other consumers, choose to mitigate the risk by adopting risk-reduction behaviors. However, this study investigates a series of the cognitive perceptual process that tourists go through to protect themselves against threatening danger of foodborne illness. This study contributes to the body of knowledge by extending PMT in general and in the existing body of knowledge related to tourism literature. It also provides a basis for tourism organizations to better communicate risk messages by focusing more on the ways that tourists are motivated to reduce the risk when they are going to consume destination local food.

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