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# **Editors**

Aifa Rozaini Mohd Radzol, PhD

Ataul Karim Patwary, PhD

Nurul Aziah Binti Ahmad

Nik Alif Amri Bin Nik Hashim, PhD

# Tourists' Awareness among Malaysian Towards COVID-19 Pandemic in Langkawi

# Nik Marziyatul Alia Mat, Muhammad Rafiuddin Zamil, Nashuha Misman, Norhasliza Abdul Rabi &\*Siti Salina Saidin

Faculty of Hospitality, Tourism and Wellness, Universiti Malaysia Kelantan Corresponding email: salina.s@umk.edu.my

#### **ABSTRACT**

COVID-19 has been declared in Malaysia, and all tourism operations have been halted. On the other hand, domestic tourist efforts have been underway since 2021, but with a new unusual approach. Malaysian tourists must be informed of all government-imposed laws and regulations in order to avoid being infected with the virus. Malaysians who visited Langkawi after the epidemic is the target group and respondents in this study. As a result, the goal of the study was to look at the relationship between tourist knowledge, attitude, and behaviour in relation to COVID-19 awareness in Langkawi. This study included 205 participants and was conducted via social media platforms such as Instagram, Facebook, WhatsApp, and Telegram.

Keywords: COVID-19, tourist, awareness, Langkawi

# **INTRODUCTION**

According to Euromonitor International, a worldwide market research firm located in London, Malaysia retained its position as one of the world's top ten tourist destinations in 2018,. As a result, the success has piqued the interest of Malaysia's Minister of Tourism, Arts, and Culture, among others, who believe that the announcement has significantly influenced the country's economy. They also work together to enhance their scores at a greater global scale. Throughout 2018, Saudi Arabia's tourist sector garnered multiple international accolades, including the BrandLaureate Best Brand Award 2017-2018 for National Brand Excellence. Bandar Di-Raja Muar-The Cleanest Tourism City in ASEAN, with the top grade for Islamic Economy Ecosystems for the past five years.

According to (WHO) He et al. (2020), Coronavirus Illness 2019 (COVID-19) caused by Severe Acute Respiratory Syndrome (SARS) -CoV-2 is the first coronavirus disease classified as a pandemic by the World Health Organization to date. The pandemic started in China, and Malaysia and adjacent Southeast Asian nations like Thailand and Singapore were the first to report this COVID-19 case. It is also known as the COVID-19 Virus. It is a continuing, infectious, and challenging to treat worldwide influenza pandemic that has been dubbed the world's deadliest post-World War II pandemic. According to Baldwin and Mauro (2020); Huynh (2020); Ruiz-Estrada Park and Lee (2020); and Wilder-Smith (2005), it has conquered the outbreaks of SARS in 2003 and Middle Eastern respiratory disease (MERS) in 2012.

The World Travel and Tourism Council (WTTC) (2020) then declared on April 14, 2020, that the COVID-19 virus had spread to over 20 nations, infecting an estimated 1.98 million individuals and causing 126,753 fatalities globally. This tourist business has resulted in SARS infections and is primarily recognized as a vector of the COVID-19 virus's global expansion. According to Arezki and Nguyen (2020); Novellia et al. (2018); Stezhko et al. (2020); Yanga et al. (2020), it resulted in substantial financial losses in the business and led all nations to operate creating closures and tight travel restrictions to control viral transmission (2020). The emergence of the COVID-19 illness in Malaysia has resulted in significant behavioural changes among the population. All Malaysians panicked and purchased commodities to enforce the curfew during the time. People gathered there as well, and there was a massive epidemic.

Following that, unprecedented public health efforts occurred. It was established to reduce COVID-19 socially controlled jails to military-enforced lockups, which have caused significant disruptions in global travel, economics, education, and daily life for billions of people worldwide. Conservative estimates indicate that the global tourist industry would lose at least 75 million jobs in the near term by 2020, with a loss of tourism GDP contribution of up to the US \$ 2. It also has a negative impact on the country and its citizens. Furthermore, every other business, including the tourist sector, cannot be handled efficiently, and many are stuck, resulting in negative consequences such as suicide. There are several cures for this COVID-19 infection, such as spacing 1 meter apart, using hand sanitiser at all times, and more, to decrease this pandemic contagion. To this day, the authorities are coordinating their efforts to return the people and the nation's economy to a more positive and secure state.

The purposes of this research study are:

- i. To examine the relationship between tourist attitude and their awareness towards COVID-19 in Malaysia.
- ii. To evaluate the relationship between tourist knowledge and their awareness towards COVID-19 in Malaysia.
- iii. To determine the relationship between tourist behaviour and their awareness towards COVID-19 in Malaysia.

# Significance of the Study

Based on this research, we can help the community understand the most significant impact of visitors' attention to COVID-19 now and avoid the issue of accelerating instances. This connected study can allow visitors and the community to take a more active role in educating tourists about the hazards of the COVID-19 outbreak as a preventative and management tool. Tourists and the community may be made aware of the need to adhere to Standard Operating Procedures (SOPs) as a critical message to encourage growth and optimal physical activity for tourists and the community.

According to the study, in this scenario, a notice of Standard Operating Procedures (SOPs) is insufficient since visitors and the community must focus on becoming acclimated to following the Standards Operating Procedures (SOPs) supplied and attentive to government instructions from time to time. This research will encourage visitors and the community to adjust to the ministry of tourism's instructions and will assess the efficacy of tourists and thus the community to follow or fit the party's Standard Operating Procedures (SOP). Those present may also be sensitive to the negative consequences of the COVID-19 epidemic on tourism and the community. With the knowledge gathered from this report, they are also prepared to monitor visitors' health and lifestyle, as well as the community, as they participate in tourism activities. Outside tourists may benefit indirectly as a result of this.

Furthermore, prospective researchers may use this analysis to investigate further the dangers of the COVID-19 epidemic affecting tourists and the community if they do not follow the quality Operating Procedures (SOPs). It will help to preventor reduc the matter of lacking awareness regarding the care of ordinary Standard Operating Procedures (SOPs). This study aims to learn more about the impact of a lack of understanding of standard operating procedures (SOP) on visitors and the community.

#### LITERATURE REVIEW

The study sought to ascertain the level of knowledge about Covid-19 among Malaysian visitors. As a result, the tourist industry is critical to reviving the country in the midst of the COVID-19 pandemic. However, the general public and visitors should be advised that COVID-19 is extremely dangerous and can result in death. As a result, the community and tourists should be aware of how to address this issue.

Tourist and community awareness of COVID-19 in Malaysia can potentially have a good and beneficial influence on the tourism sector. This investigation will link them all to majors. Tourism attitudes, knowledge, behaviour, and awareness of COVID-19 in Langkawi, Malaysia, as well as the link between independent variables (IV) and dependent variables (DV), Tourist Knowledge, Tourist Attitude, and Tourist Behavior.

# **Tourist Knowledge**

Tourist awareness of the COVID-19 sickness has grown as the disease spreads in Malaysia, and gained the people's interest. COVID-19 is an illness that has disrupted regular living and forced individuals to accept the new normal. There are several things that people should aware of regarding this new sickness, such as its variation, which is becoming more potent by the day.

People are naturally interested, and because we live in a technological age, they like to fuel their curiosity by researching the ailment. They begin to study publications and conduct research on COVID-19 to have a better understanding of it. This demonstrates how tourist awareness of knowledge has grown and how vital it is for them to acquire new things. Tourists have also expanded their travel knowledge by reading and watchingthe news and researching safe and sanitary travel as their new habits.

Tourists also do a lot of research and have a lot of open discussions on social media about the disease and how to prevent it by getting immunisations. Tourists' understanding of vaccinations has aided the government immunisationsimmunizations much more quickly and efficiently. COVID-19 knowledge, attitudes, and practises (KAP) are vital in identifying a society's readiness to accept physical, emotional, and behavioural changes enforced by health authorities (Sarkam et al., 2020). This demonstrates the importance of visitor knowledge in helping Malaysia combat sickness and begin a new life with new standards, particularly in tourism activities.

#### **Tourist Attitude**

Tourist sentiments have shifted since the pandemic began in Malaysia in 2020, when individuals are prohibited from travelling domestically or internationally. As previously demonstrated, tourist attitudes have a considerable impact on visitors' degree of knowledge of COVID-19. Tourists have begun to adjust to the norms and regulations of travel when they have prepared themselves to obey the restrictions that the authorities have created.

Tourist attitudes toward government laws and regulations have shifted after the government proclaimed that people are participating in tourist activities once again. Tourist attitudes such as adjusting to and understanding the regulations established by authorities in tourist activities while endemic are examples of such attitudes. After a year of not travelling, visitors' knowledge of travelling safely and following norms has grown, as they have formed a common understanding among themselves in order to travel during this period.

Tourists' attitude toward all the restrictions and regulations demonstrates that their knowledge of the sickness has risen as they can obey all of the guidelines. It is commendable that they are able to obey all of the laws while also enjoying and having fun when travelling with their loved ones. Meanwhile, attempting to develop a realistic approach for the travel and tourism industry's recovery from the COVID-19 pandemic catastrophe is founded on minimising perceived health, as well as tracking psychological and social risk and its influence on visitor behaviour (Matiza, 2020). That is why it is critical to educate and raise awareness among tourists about the new travel regulations.

## **Tourist Behaviour**

Tourists' behaviour toward endemic people in Malaysia has enhanced their awareness after the government permitted individuals to travel domestically following a two-day lockdown. An individual's impression of a condition is determined by their interpretation of experience, which influences how they react to societal and personal reactions (Sarkam, et al., 2020).

After one year of lockdown, Malaysia Prime Minister Dato' Sri Ismail Sabri Bin Yaakob said that tourist activities in Malaysia could resume under Standard Operating Procedure (SOP). Tourists are more mindful of SOP compliance since they consistently wear masks and use hand sanitiser, making it a must-have item when travelling. This demonstrates that tourists are more aware of COVID-19 and are prepared to follow the SOP for visiting Malaysia.

Tourists are also aware of the significance of scanning MySejahtera before entering establishments or travelling anywhere. Scanning MySejahtera will assist the Malaysian Ministry of Help (MOH) in tracking and monitoring persons in order to avert any new clusters. Aside from that, tourists are all aware of the one-metre rule, which requires them to keep a one-metre gap between themselves. This demonstrates that visitors' behaviour has changed due to obeying the rules and restrictions established by the government.

# **Research Hypothesis**

A hypothesis must be testable and realistic, considering current knowledge and procedures. Furthermore, a hypothesis is a forecast or explanation of a link between two variables. It suggests that an independent and dependent variables have a systematic relationship. As a result, the study has proposed:

**H**<sub>1</sub>: There is a relationship between tourist knowledge and tourist awareness towards COVID-19 in Langkawi.

**H**<sub>2</sub>: There is a relationship between tourist attitude and tourist awareness towards COVID-19 in Langkawi.

**H**<sub>3</sub>: There is a relationship between tourist behaviour and tourist awareness of COVID-19 in Langkawi.

#### **Research Framework**

Figure 1 below shows the research framework used for this study.

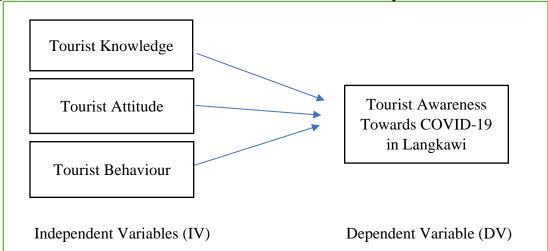


Figure 1: Research Framework

#### **METHODOLOGY**

#### **Research Design**

The quantitative method was applied in this study, with 205 respondents from both rural and urban areas receiving questionnaires. The Malaysian people that visited Langkawi after the pandemic was the target groups for this study. Tourism activity has changed due to the COVID-19 virus outbreak, which has recently affected the entire country.

A set of questionnaires was also issued to the populace in order to collect data from Malaysian citizens who visited following the outbreak. Sections A, B, and C are the three sections of the questionnaire created by the researcher. The demographic information regarding Malaysian citizens' demographics, such as gender, age, locality, and primary sources of knowledge about COVID-19, was requested in Section A of the questionnaire. The questions in Sections B and C focused further on the independent and dependent variables in the survey, which were (i) Tourist Knowledge, (ii) Tourist Attitude, (iii) Tourist Behaviour, and (iv) Tourist Awareness Of COVID-19 in Langkawi.

#### **Data Collection**

Questionnaires were used to obtain information. The Google form tool was used to disseminate the questionnaires in this study. The Google form link was shared across all social media platforms, including Instagram, Facebook, WhatsApp, and Telegram. It was quite practical in terms of minimising costs and saving time during this pandemic.

# Sampling

The convenience sampling method employed in this study was the snowball sampling approach. Because questionnaires were produced and distributed online or uploaded to social media pages to acquire information from respondents, the study used this strategy. The questionnaire was provided to Malaysian nationals who visited Langkawi after the pandemic broke out in the country.

$$s = \frac{x^2 N p (1 - P)}{d^2 (N - 1) + x^2 p (1 - p)}$$

s= Sample size required

n= sample size

N= population size

e = the degree of accuracy expressed as percentage (0.05)

x = 2 = chi-square of degree of freedom 1 and confidence (3.841)

p = proportion of population (if unknown, 0.5).

## **Data Analysis**

Frequency analysis, descriptive analysis, reliability test, and Pearson correlation analysis were the four types of data analysis used in this study. SPSS version 22 was used to analyse the data collected.

#### **FINDINGS**

# **Result of Frequency Analysis**

Table 1 below shows the results of the frequency analysis

Table 1: Frequency Analysis

Characteristics	Frequency	Percentage
Gender		
Male	82	40.0
Female	12	60.0
Age		
18-27	124	60.5
28-37	53	25.9
38-47	18	8.8

48-56	10	4.9
Locality		
Rural	98	47.8
Urban	107	52.2
Main Source of Knowledge about COVID-19		
MOH	65	31.7
Social Media	99	48.3
TV/Radio/Newspaper	24	11.7
WHO	17	8.3

Table 1 reveals the gender of the respondents. Male respondents accounted for 82 (40.0%) of the total, while female respondents accounted for 123 (60.0%) among the 205 participants in this study.

The total number of respondents by age was shown in Table 1, 205 participants aged 18 to 27 (124 responses), 28 to 37 (53 responses), 38 to 47 (18 responses), and 48 to 56 (18 responses) completed the survey (10 respondents). Table 1 shows that respondents aged 18-27 had the highest percentage of responses (60.5 percent), followed by respondents aged 28-37 (25.9%), 38-47 (8.8%), and 48-56 (8.8%). (4.9 percent).

The questionnaire was completed by 205 people, including Rural 18 (98 responses), and Urban (107 respondents). Figure 4.3 shows that Urban respondents have a more significant percentage of respondents (52.2 percent) than Rural (47.8 percent).

The questionnaire was completed by 205 people according to the Main Sources of Knowledge About COVID-19 including in MOH (65 responses), social media (99 respondents), TV/Radio/Newspaper (24 respondents), and WHO (17 respondents). The table above shows that respondents according to Main Sources of Knowledge About COVID-19 on social media had the most significant percentage of respondents (48.3 percent), followed by respondents in MOH (31.7 percent), TV/Radio/Newspaper (11.7 percent), and WHO respondents (8.3 percent).

#### **Result of Descriptive Analysis**

Table 2 below shows the result of the descriptive analysis

Table 2: Descriptive Analysis

Variable	Items	Mean	Standard
		Score	Deviation
Tourist	The main clinical symptoms of COVID-	4.4293	0.61924
Knowledge	19 are fever, fatigue, dry cough, and		
	body aches		
	Unlike the common cold, stuffy nose,	4.1122	0.81775
	runny nose, and sneezing are less		
	common in persons infected with the		
	COVID-19 virus.		
	There currently is no effective cure for	4.2000	0.75667
	COVID-19, but early symptomatic and		
	supportive treatment can help most		
	patients recover from the infection.		
Tourist	Do you agree that COVID-19 will be	4.0244	0.86568
Attitude	successfully controlled?		
	Do you have confidence that Malaysia	4.1220	0.84584
	can win the battle against the COVID-19		
	virus?		

	The government of Malaysia is handling	4.0439	0.88729
	the COVID-19 health crisis very well.		
Tourist	ourist I use a face mask when leaving home.		0.75875
Behaviour	Behaviour I wash my hands with water and soap		0.75211
	when I reach home.		
	I cover my mouth and nose while	4.2732	0.75635
	coughing and sneezing.		
	I practice a 1-metre social distance when	4.1610	0.80953
	I am outside.		
	If I feel COVID-19 symptoms, I will go	4.1463	0.82726
	directly to the nearest emergency		
	department hospital.		
Tourist	I am concerned about prevention	4.2000	0.75016
Awareness	regarding facilities during COVID-19.		
Towards	I am concerned about hygienic issues	4.1220	0.73415
COVID-19	during travelling to Langkawi.		
in Langkawi	I will visit a tourist attraction that has	4.1756	0.79112
	fewer COVID-19 cases.		

This table shows descriptive analysis results for independent and dependent variables. The independent variables that have been produced with the highest mean is tourist knowledge, which is 4.4293, followed by tourist attitude, which is 4.1220 and tourist behaviour, which is 4.3317. The mean for the dependent variable is 4.2000.

According to the table, the first independent variable consists of three items. Item 1 scored the highest mean value which was 4.4293, where the respondents agreed that the main clinical symptoms of COVID-19 are fever, fatigue, dry cough, and body aches. The lowest mean item 2, with the mean value of 4.1122, where the respondent somewhat agreed that the common cold, stuffy nose, runny nose, and sneezing are less common in persons infected with the COVID-19 virus.

Moreover, the second independent variable also consists of three items in the survey. Item 2 scored the highest mean value which was 4.1220, where the respondents agreed that they have confidence that Malaysia can win the battle against the COVID-19 virus. The lowest mean item was 1, with a mean value of 4.0244, where the respondent somewhat agreed that COVID-19 would be successfully controlled.

Furthermore, the last independent variable, tourism behaviour, consists of five items in the survey. Item 1 scored the highest mean value which was 4.3317, where the respondents agreed that they need a face mask when leaving home. The lowest mean item 5, with a mean value of 4.1463, was the respondent slightly agreed that felt COVID-19 symptoms would have gone directly to the nearest emergency department hospital.

Lastly, the descriptive analysis for dependent variables consisting of three items are also shown in the table above. The highest mean value was item 1 which was 4.2000, where respondents agreed that people were concerned about prevention regarding facilities during COVID-19. The lowest mean value was item 2, which was 4.1220, where the respondent slightly agreed that people were concerned about hygienic issues during travelling at Langkawi. For all variables, the data set from 205 respondents with the standard deviation most of the values which were lower than 1, indicated the values close to the mean.

## **Result of Reliability Analysis**

Table 3 below shows the result of the reliability analysis

Table 3: Reliability Analysis

Variable	Number of Items	Cronbach's Alpha
Tourist Knowledge	3	0.502
Tourist Attitude	3	0.782
Tourist Behaviour	5	0.837
Tourist Awareness Towards	3	0.705
COVID-19 in Langkawi		
Overall Variable	14	0.813

Table 6 shows the result of the reliability analysis for this study. According to the table, tourist knowledge has the lowest Cronbach's Alpha with 0.502, while tourist behaviour has the highest Cronbach's Alpha with 0.837. The other variable's Cronbach's Alpha is 0.782 and 0.705 for tourist attitude and tourist awareness towards COVID-19 in Langkawi respectively. The overall variable shows 0.813 for the Cronbach's Alpha of this study.

# **Result of Pearson Correlation Analysis**

Table 4 below shows the Pearson Correlation Analysis

Table 4: Pearson Correlation Analysis

Hypothesis	P-Value	Result (Supported/Not
		Supported)
<b>H</b> <sub>1</sub> : There is a relationship between tourist	0.386	H <sub>1</sub> is supported
knowledge and tourist awareness towards		
COVID-19 in Langkawi.		
<b>H</b> <sub>2</sub> : There is a relationship between tourist	0.543	H <sub>2</sub> is supported
knowledge and tourist awareness towards		
COVID-19 in Langkawi.		
<b>H</b> <sub>3</sub> : There is a relationship between tourist	0.463	H <sub>3</sub> is supported
behaviour and tourist awareness of		
COVID-19 in Langkawi.		

The table above shows that all hypotheses are supported for this study. For hypothesis one, it indicates that the P-Value is 0.386 while in hypothesis two, P-Value is 0.543 and hypothesis three is 0.463.

#### DISCUSSION AND RECOMMENDATION

The discussion aims to answer the questions and address the hypotheses raised in the first chapter of this study. In summary, this study looked at Malaysian visitors' knowledge of COVID-19. Because Langkawi was chosen as the research location, respondents in this study were Malaysian residents. Any tourism attractions or prominent spots in Langkawi can be utilised as responses. This conclusion was made since we evaluated individual needs by studying factors. Since the epidemic, tourist behaviour and knowledge have been significant factors in the tourism business.

Throughout the study, a deeper picture of tourists' awareness may be achieved by looking at their attitudes, knowledge, and behaviours. Based on this research, we can help the community understand today's most important consequences of tourist notifications on COVID-19 and how to avoid items speeding up the case. This connected study can assist visitors and the community take an active role in providing tourists with information about the danger of a COVID-19 epidemic as a preventative and management tool. Tourists and the community may be made aware of the need to maintain Standard Operating Procedures (SOPs) as a critical message to drive growth and optimal physical activity for tourists and the community.

This research will encourage visitors and the community to adapt to the ministry of tourism's instructions and will monitor the efficacy of tourists and thus the community to follow or follow the Standard Operating Procedures (SOP) by the relevant parties. Those present may also be sensitive to the negative consequences of the COVID-19 epidemic on tourism and the community. This report provides them with knowledge. They are also equipped to monitor health and lifestyle and care for tourists and the community while participating in tourism activities. Outside tourists may benefit indirectly as a result of this.

As a result, it is proposed that future researchers enhance the data collecting for this study, particularly in terms of questionnaire distribution. Future researchers can distribute surveys face-to-face rather than over the internet. As a consequence, while giving the questionnaire to prospective respondents, the researcher was able to describe the goal of the study in detail. Furthermore, the amount to which the researcher and the respondent engage might serve to educate the respondent more clearly on the questions to be asked in the questionnaire.

#### **CONCLUSION**

Finally, this study aimed to determine the level of awareness of COVID-19 among Malaysian tourists. Tourist knowledge, tourist attitude, and tourist behaviour were chosen as independent variables to investigate their links with the dependent variable, tourist awareness of COVID-19 in Langkawi. In Langkawi, 205 respondents aged 18 and up were chosen from all states in Malaysia to assess their knowledge of COVID-19. According to Pearson's correlation analysis, tourist knowledge received a score of \*0.386, followed by tourist attitude with a score of \*0.543, and tourist behaviour with a score of \*0.463. The study's goal is to determine the link between tourist knowledge, tourist attitude, and tourist behaviour, all of which influence tourist awareness of COVID-19 in Langkawi. The research objectives have been accepted: to investigate the relationship between tourist knowledge, attitude, and behaviour that influence tourist awareness of COVID-19 in Langkawi. Meanwhile, such consequences can be expected in terms of factors influencing visitor awareness of COVID-19 in Langkawi, such as tourist knowledge, attitude, and behaviour.

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