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THE FACTORS INFLUENCING GENDER DIFFERENCES IN PURCHASING
DECISION OF HEALTHY FOOD AMONG UTeM STAFFS

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The thesis is submitted in partial fulfillment of the requirements for the award of
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DECLARATION OF ORIGINAL WORK

“I hereby declare that the work I am submitting for assessment contains no section copied in whole or in part from any other source unless explicitly identified in quotation marks and with detailed, complete, and accurate referencing.”

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DEDICATION

I dedicate this research to my beloved father and mother, Mr. Wong Thin and Madam Lau Youk Kin and to my lovely family.

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ABSTRACT

Nowadays, the continuous rising of the rate of obesity brings the negative effects for health. Not only that, the economy of our country is not ideal because of depreciation of Ringgit Malaysia. These phenomena also lead to the influencing consumers in decision-making about purchasing the healthy food. This research aims to identify the factors that influence consumers in purchasing decision of healthy food. This research is conducted among the staffs of Universiti Teknikal Malaysia Melaka (UTeM). Data is collected through the distribution of questionnaires to 265 respondents. The data analysis in the research is using SPSS version 20. The sampling design is chosen a probability sampling method and the multiple linear regression analysis also used to verify and to prove the research hypotheses as there are three independent variables involved in this study, that are knowledge, risk perceived and price. The data obtained have represented variations in the forms of diagrams, charts, and tables. Meanwhile, knowledge and risk perceived show positive relation in gender's purchasing decision except price. In addition, the conclusion of this study provides a few recommendations for the future researcher.

ABSTRAK

Pada masa kini, peningkatan berterusan kadar obesiti membawa kesan negatif untuk kesihatan. Bukan itu sahaja, ekonomi negara kita tidak ideal kerana kejatuhan nilai Ringgit Malaysia. Fenomena ini juga membawa kepada pengguna mempengaruhi dalam membuat keputusan untuk membeli makanan yang sihat. Kajian ini bertujuan untuk mengenal pasti faktor-faktor yang mempengaruhi pengguna dalam pembelian keputusan makanan yang sihat. Kajian ini dijalankan di kalangan kakitangan Universiti Teknikal Malaysia Melaka (UTeM). Data dikumpul melalui pengedaran soal selidik kepada 265 responden. Analisis data dalam penyelidikan menggunakan SPSS versi 20. Reka bentuk pensampelan dipilih kaedah persampelan kebarangkalian dan analisis regresi linear juga digunakan untuk mengesahkan dan membuktikan hipotesis penyelidikan kerana ada tiga pembolehubah yang terlibat dalam kajian ini, iaitu pengetahuan, persepsi risiko dan harga. Data yang diperolehi telah mewakili berbeza-beza dalam bentuk gambar rajah, carta dan jadual. Sementara itu, pengetahuan dan persepsi risiko menunjukkan hubungan positif dalam keputusan pembelian antara jantina kecuali harga. Di samping itu, kesimpulan kajian ini memberikan beberapa cadangan untuk penyelidik masa depan.

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LIST OF ABBREVIATIONS

DV	Dependent Variable
IV	Independent Variable
SPSS	Statistical Package for Social Science
UTeM	Universiti Teknikal Malaysia Melaka
WHO	World Health Organization

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CHAPTER 1

INTRODUCTION

This introductory chapter is separated into a few subdivisions. Firstly, a brief background of the study will be presented in the next section. Section 1.2 explained the definition of gender, while a brief concept of healthy food will be elaborated in section 1.3. The concept of purchasing decision will be introduced briefly in the following section. Thereafter, the problem discussion will be provided in Section 1.5, which in turn will lead to the objectives and questions of the research in the next two sections. Finally, the following section is described the scope, limitations, and significance of the study. Lastly, a summary of chapter 1 is explained in the section 1.12.

1.1 Background of Study

Since the 20TH century, World Health Organization (WHO) envisioned that non-communicable diseases will be the cause of the greatest number of deaths in Southeast Asia and Western Pacific Region for the year 2020. Obesity is one of the conducting factors of non-communicable diseases. In 2008, 1.5 billion adults were discovered to be overweight and obese. In this figure, there are nearly 300 million obese women. Malaysia's obesity rate has increased over the past few years and has become one of the leading causes of morbidity and mortality in the country. (Coomarasamy, Wint, & Sukumaran, 2015)

In fact, Malaysia is the most obese country in Asia, with an obesity rate of over 45.3 per cent. It also showed that 49 per cent of women and 44 per cent of men in Malaysia were found to be obese by the findings of the British medical journal, *The Lancet*. A crack-up of the 2015 National Health and Morbidity survey also found that about 30 per cent of Malaysian adults above 18 years old were overweight with a body mass index of 25 and above and another 17.7 percent were obese with a BMI of 30 and above. This is an intense rise from the 4.4 per cent of Malaysians who classified obese 10 years ago (1996). (Mustafa, 2016)

Moreover, obesity has a far-ranging negative effect on health, such as high blood pressure, diabetes, heart disease, and even cancer. This alarming increase in obesity rate in Malaysia cannot be ignored. Therefore, consumers have become increasingly concerned the importance of health in recent decades. (Chien-Huang, Hung-Chou, & Sheng-Hsien, 2011)

The research progress of nutrition has been found that the nutrients needed for the human body's development, growth, and maintenance. The concept of a healthy balanced diet has become the main driving force of the refinement of the dietary recommendations and food guidance. (Phuah, Rezai, Mohamed, & Shamsudin, 2015)

Consumers begin to look at their diets from different angles. The food is no longer regarded as the prevention of dietary deficiency, satisfy hunger, supply nutrition, such as water, protein, vitamins, and minerals to maintain or repair the body tissue, but it has become a major component of health and wellness. Health and wellness will continue to be a major global trend for the future, because of increased interest in the relationship between diet, physical activity and health problems. (Phuah, Rezai, Mohamed, & Shamsudin, 2015)

1.2 Gender Differences

Gender is defined as a set of features which are associated with a certain biological character (male/female). These characteristics are often referred to as "masculine" or "feminine".

In accordance with World Health Organization (WHO), the word, gender, it is used to describe the characteristics, roles and responsibilities of women and men, boys and girls, which are socially constructed. Gender is related to how people are perceived and expected to think and act as women and men because of the way society is organized, not because of the biological differences. In addition, gender based differences in access to or control over resources, in power or decision making, and in roles and responsibilities, have implications for women's and men's health status. (Newman, 2016)

1.3 Healthy Food

In the traditional mode of nutrition, "healthy food" is defined as measurable food ingredients, such as calories, vitamins, and fats, and health interventions are often tailored to the individual. We began to assert that healthy food is not only by the quantity and quality of the food we eat, but it must come from the food system renewal and preservation of natural resources, promoting social justice and animal welfare, establishes community

wealth, meet the food and nutritional needs of all the people, for the future. (Kendra Klein, Sapna Thottathil, & Stacia Clinton, RD, 2014)

Besides that, the healthy food plays an important role in human nutrition. There is any food believed to be 'good', particularly if high in fiber, natural vitamins, fructose and so forth. Healthy foods may reduce cholesterol, atherosclerosis, and risk of stroke. In addition, Healthy food may help control blood sugar, prevent the progression of osteoporosis, and reduce the risk of infection and cancer. (Dictionary, 2012)

1.4 Purchasing Decision

There is a simple definition for purchasing decision, that is: decision making is a thinking process that guides consumers to identify a need to generate options and to select a specific product and brand. Some purchase decisions are secondary, like to buy toothpaste, while others are professional, like buying a house. (Purchase Decision, 2011)

Meanwhile, for a deeper explanation, purchasing decision is a series of choices made by consumers prior to purchase, that is, when consumers have decided to purchase one thing. They must consider where to buy, what brand, model, or size to buy, when to buy, how much money to spend, and what kind of payment will be used. The main purchase decision is that more effort is often put into the process.

1.5 Problem Statement

Malaysians are not a healthy group. When it comes to food, it is common for Malaysian to have at least one meal outside on a regular basis because of the busy schedules. This eating out activity has become a habit even second nature to Malaysian.

Although it is not difficult to find a healthy food choices, the choice of eating out, especially the health food restaurants recently appeared, healthy foods in Malaysia are not cheap. (Thavabalan, 2016)

Because of the depreciation of Ringgit Malaysia, the high prices of food make the most of consumers leave less hope to eat right especially the consumers who are more perceived on price. The most of healthy food is imported as Malaysians also tend to favor imported fresh produce. For example, Australia's fresh and safe credentials, as well as its proximity to Malaysia, makes it an attractive choice for sourcing fruit and vegetables (Food and beverage to Malaysia, 2016), so when the depreciation emerged, the cost of these imported foods will increase. Thus, these foods will sell at a higher price by local businessmen who want to sustain the increased cost of operation.

In addition, Malaysia's consumer price inflation was below the expected rate in October for cheaper transportation and communications services to help slow down the impact of rising food prices. (JST, 2016) Although this is the solution of the government, which has offered to consumers and aims to promote them continue to purchase the healthy food without concern about the price. But the positive effect has not seen yet.

Besides that, even there are some knowledge of healthy diet habits have learned in the childhood, but that knowledge still needs to a whoop and a holler in Malaysia. For example, cost, time, and poor availability in the workplace are general issues of practical aspects of office workers. (Why we eat what we eat: the barriers to dietary and lifestyle change, 2004) So, the most consumers only follow their own idea of purchasing the foods like they only choose to buy what they want at a low price and convenience.

Due to the unhealthy eating habits, people will be obesity easily and even gain negative diseases like diabetes. As it is known to all, diabetes is one of the deadliest diseases in Malaysia. In fact, the 2015 National Health and Morbidity Survey indicated that 1.8 million of the 3.5 million diabetics in Malaysia were not even aware they were afflicted with the chronic disease. The statistics also showed that the number of diabetics

in the country has increased to 17.5 percent in 2015 from 15.2 percent in 2011 and 11.6 percent in 2006. (BERNAMA, 2016) For the people sounded the alarm by this phenomenon, so that they are aware of the risk of chronic disease. Healthy food plays an important role in prevention of diseases.

1.6 Research Objectives

Based on the research background and the research problems, three goals are put forward in this study:

- a. To identify the factors affecting gender differences in food purchasing decision at UTeM.
- b. To analyze the differences of men and women in the purchasing decision of healthy food products among UTeM staffs.

1.7 Research Questions

To achieve those research objectives, therefore the research questions for this study are:

- a. What affect gender differences in food purchasing decision at UTeM?
- b. What perceptions of male and female UTeM staffs about healthy food products?

1.8 Scope

This study dealt mainly with gender in decision making to purchase food at Melaka. It seeks to know the differences between male staffs and female staffs in the purchasing decision of healthy food products at Universiti Teknikal Malaysia Melaka (UTeM).

To conduct this study, the researcher focused on the local academic staffs in UTeM, Melaka as the subject of the study. Furthermore, the researcher chose these staffs as respondents in the set of questionnaires. Afterwards, the researcher comes up with the assessment procedures where the information gathered were analyzed and evaluated. In addition, local academic staffs included lecturers, tutor, engineer instructors and language teachers. The gathered information can obtain from them.

1.9 Limitation of Study

Although the research had reached its aims, there are some unavoidable limitations. First, because of the time constraints, this research conducted only on a small size of the population (about 200-300 respondents) who were local academic staffs at UTeM. Therefore, to generalize the results of the larger groups, the study should have involved more respondents.

Next, lack of experience of researcher. The researcher sent the questionnaires to most respondents through email, so because their busy work schedule, some respondents might ignore the questionnaire emails. Consequently, the researcher needs to know more methods for applying the questionnaires to obtain more information.

Finally, this study was lack of comparison groups. In fact, this study only focused on respondents (both men and women) who had a certain life experience and knowledge about healthy, so the information also focused on this level. Thus, to get comparable