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# COVID-19 in Malaysia: Knowledge, Threat Perception, Response Efficacy and Practice in Precautionary Behavior

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## ABSTRACT

**Introduction:** Susceptibility perceptions have been extensively studied but COVID-19 severity has been largely neglected. As susceptibility and severity may not co-occur, it is necessary to examine both components of disease threat.

**Objective:** To examine the knowledge, threat perception, response efficacy, and associations with intended and concurrent COVID-19 preventive measures during a period of receding cases in Malaysia.

**Methods:** An online survey of 230 respondents was conducted from 1 to Jul 15 2020 using a 50-item questionnaire to study intention for COVID-19 preventive measures. Snowball sampling technique and the 2-step factor analysis of data was done.

**Results:** Good knowledge of the disease acquired mainly from the mass media and internet rather than family and friends were reported among the respondents. Severity of COVID-19 compared to other flu-like diseases was acknowledged, but a low perception of risk and likelihood of contracting the disease was observed. Beliefs in the efficacy of public preventive measures (quarantine, physical distancing, movement restriction and screening) were high. Face mask and personal hygiene ranked as the most effective individual preventive measures. Intentions for self-quarantine and testing were strong if flu symptoms were perceived. Perceived susceptibility is moderately associated with perceived severity and efficacy of recommended preventive measures. A stronger relationship was found between perceived efficacy of preventive measures and intended and concurrent health-protective measures.

**Conclusion:** The findings suggest that perceptions of disease threat need to focus on susceptibility and severity, and perceptions of severity need to consider perceived severity for self and others.

**Key Words:** COVID-19, Malaysia, Protection Motivation Theory, Public perception, Preventive measures

## INTRODUCTION

Coronavirus Disease 2019, abbreviated as COVID-19, was initially referred to as the 2019 novel coronavirus (2019-nCoV)<sup>1</sup> and the pathogen involved is known as the Severe Acute Respiratory Syndrome Coronavirus 2 (SARS-CoV-2).<sup>2</sup> Soon after its first detection in Wuhan, China, the World Health Organization declared COVID-19 as a global pandemic in March 2020.<sup>3</sup> On Mar 18 2020, Malaysia enforced the Movement Control Order (MCO) under the Prevention and Control of Infectious Diseases Act 1988 and the Police Act 1967.<sup>4</sup> The number of cases recorded in Malaysia on Mar 18 was 790 with two deaths.<sup>5</sup> The MCO (also referred to as semi-lockdown measure) restricted inter-district travel, permitted only essential staff to go to workplaces, and

confined people to their homes, allowing them to go out for buying essential items and medical reasons. The MCO was relaxed from Jun 9 2020, but tightened only in areas with a spike in cases. On Jan 23 2021, the largest number of daily new coronavirus cases was recorded (4,275), and a number of cases in Malaysia has reached 180,455, with 667 deaths.<sup>6</sup>

In Malaysia, the regular updates by the Ministry of Health Malaysia and public service announcements create health literacy to control the spread of the disease. The public is also informed about the prevalence of asymptomatic (do not show symptoms) and pre-symptomatic (yet to show symptoms) individuals who can transmit COVID-19 to people in close contact with them.<sup>7-12</sup> However, the daily reports by the Defense Ministry, Malaysia show the large number of people who violate standard operating procedures (SOPs) for

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