



**Tourist segmentation based on food risk perception:
A study of Australian tourists in Phuket**

Nichanan Blaxell

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ชื่อวิทยานิพนธ์	การแบ่งกลุ่มนักท่องเที่ยวตามการรับรู้ความเสี่ยงด้านอาหาร:กรณีศึกษาเกี่ยวกับนักท่องเที่ยวชาวออสเตรเลียในจังหวัดภูเก็ต
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บทคัดย่อ

การศึกษานี้มีวัตถุประสงค์ เพื่อ 1. เพื่อศึกษาการรับรู้ความเสี่ยงด้านอาหารของนักท่องเที่ยวชาวออสเตรเลียในจังหวัดภูเก็ต 2. แบ่งกลุ่มนักท่องเที่ยวออสเตรเลียออกเป็นกลุ่มต่าง ๆ ตามความเสี่ยงด้านอาหารรับรู้เกี่ยวกับเกาะภูเก็ต 3. เพื่อจัดกลุ่มความแตกต่างของนักท่องเที่ยวออสเตรเลีย โดยขึ้นอยู่กับรับรู้ข้อมูลความเสี่ยงด้านอาหารของแต่ละกลุ่ม

ผู้วิจัยใช้วิธีการเชิงปริมาณ โดยการเก็บข้อมูลแบบสอบถาม ซึ่งได้เริ่มต้นโดยการกระจายแบบสอบถามให้แก่นักท่องเที่ยวชาวออสเตรเลีย ที่เคยมีประสบการณ์ในการบริโภคอาหารในจังหวัดภูเก็ต การเก็บข้อมูลแบบสอบถามได้ดำเนินการระหว่างเดือน ตุลาคม 2559 พฤศจิกายน ซึ่ง เป็นนักท่องเที่ยวชาวออสเตรเลีย 400 โดยมีผู้ตอบคำถามทั้งสิ้นวิเคราะห์ข้อมูลที่ได้ด้วยโปรแกรมทางสถิติ เพื่อการวิจัยทางสังคมศาสตร์ ค่าสถิติที่ใช้ในการวิเคราะห์ได้แก่ ค่าร้อยละ ค่าความถี่ ค่าเฉลี่ย และส่วนเบี่ยงเบนมาตรฐาน รวมถึงการทำตารางไขว้ ค่าแจกแจงวิเคราะห์องค์ประกอบความแตกต่างระหว่าง สามกลุ่ม

ในการศึกษาเรื่องการแบ่งกลุ่มนักท่องเที่ยวตามการรับรู้ความเสี่ยงด้านอาหาร:กรณีศึกษาเกี่ยวกับนักท่องเที่ยวชาวออสเตรเลียในจังหวัดภูเก็ต พบว่าปัจจัยที่มีความสำคัญของการเลือกบริโภคอาหารที่สำคัญที่สุดคือ ความสะอาด(ค่าเฉลี่ย3.35) และ ปัจจัยที่มีความสำคัญกับนักท่องเที่ยวออสเตรเลียมากที่สุดในการเลือกบริโภคอาหาร การที่มีแมลงวันและแมลงอื่น ๆ ทำให้ไม่เลือกบริโภคอาหารท้องถิ่นคือ (ค่าเฉลี่ย3.85) เมื่อวิเคราะห์องค์ประกอบความแตกต่างระหว่างกลุ่มนักท่องเที่ยวทั้งกลุ่ม พบว่า กลุ่มนักท่องเที่ยวส่วนใหญ่ รับรู้ความเสี่ยงของการบริโภคอาหารในภูเก็ตในระดับน้อย (ค่าเฉลี่ยที่ 43.50%) ตามด้วยความรู้ความเสี่ยงในระดับกลางที่ (37.90%) และนักท่องเที่ยวส่วนน้อยที่รับรู้ความเสี่ยงในระดับมาก (ที่ 18.60%)

จากการวิเคราะห์องค์ประกอบความแตกต่างของแต่ละกลุ่มของนักท่องเที่ยวออสเตรเลีย ผลการศึกษาพบว่าความแตกต่างระหว่างวัย ของชาวออสเตรเลียทำให้การรับรู้ความเสี่ยงด้านอาหารในระดับที่แตกต่างกัน จากการศึกษาพบว่าผู้ที่มีอายุน้อยจะมีความรับรู้ความเสี่ยงของอาหารมากกว่าผู้ที่มีอายุตั้งแต่ ปี ขึ้นไป กล่าวได้ว่าเพศ การศึกษา และรายได้ ไม่มีนัยยะ45

สำคัญที่ส่งผลต่อการรับรู้ความเสี่ยงของการบริโภคอาหารในจังหวัดภูเก็ต นอกจากนี้ในทาง
ภาพลักษณ์ที่ดีของการเลือกบริโภคอาหารคือทางด้าน สังคม จากการศึกษาพบว่า นักท่องเที่ยว
ชาวออสเตรเลียมีความกังวลในส่วนที่น้อยมาก เมื่อเทียบกับปัจจัยด้านอื่นๆ โดยมีค่าเฉลี่ยความ
กังวลอยู่ที่ 2.41 โดยการวิเคราะห์ องค์ประกอบของกลุ่มนักท่องเที่ยวทั้งสามกลุ่มพบว่า กลุ่มที่ 1
ของนักท่องเที่ยวที่มีความกังวลมากในการรับประทานหรือบริโภคอาหารในจังหวัดภูเก็ต คือกลุ่ม
ของนักท่องเที่ยวที่มีอายุระหว่าง 34-45 ปี และ ในทางตรงกันข้ามกลุ่มนักท่องเที่ยวที่มีความกังวล 34-25
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ถึงแม้ว่าในการศึกษาครั้งนี้ จะมีข้อจำกัดด้านข้อมูลที่เกี่ยวข้องกับการบริโภค
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คำสำคัญ: ระดับความเสี่ยงด้านอาหาร, นักท่องเที่ยวชาวออสเตรเลีย, ความพึงพอใจในอาหาร

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ABSTRACT

This study taken in Phuket with aim to: 1). To examine the food risk perceptions of Australian tourists in Phuket. 2). To categories Australian tourists into different groups based on their food risk perception benefit regarding Phuket Island 3). To profile the different groups of Australian tourists based on their food risk perception targeted information of each groups.

The study employed a quantitative methods of data collections. A self-administered were used, started by distributing questionnaires to Australian tourists who have had experience in food consumption in Phuket. Data collection was conducted during the month. October to November 2016, with 400 respondents from Australia. Five dimensions factors including overall food risk perception level in Phuket and satisfaction of food in Phuket were used to investigate the perceived Phuket's food risk perception.

Analyze the data with SPSS program, the statistics used in the analysis were percentage, frequency, mean, and standard deviation. Include cross-table analysis, analysis, composition, differences between the three groups.

A study on the classification of tourists by food risk perception: A case study of Australian tourists in Phuket. It was found that the most important factor in choosing the most important food consumption was Cleanliness (average 3.35) and the most important factor for Australian tourists in choosing food. The presence of flies and other insects do not consumption local food. (Average 3.85).

The results of factor analysis shown that the majority of travelers Perceived risk of consumption in Phuket is low. (Average 43.50%), followed by medium-level risk appetite at 37.90% and low-risk travelers at 18.60%. Moreover, the study shown that each group of travelers have difference level of perceiving food risk perception while traveling in Phuket. Younger traveler has perceived food risk perception more than traveler ages between 45 -54 years old.

Furthermore, Sex and education have no significant impact on the perceived risk of food consumption in Phuket.

In addition, the good image of the choice of food is the social aspect. Australian tourists are concerned in very little. When traveling with other factors. The average concern is. 2.41. The composition of the three groups of tourists a group of tourists who are very concerned about eating or consuming food in Phuket is a group of tourists between the ages of 25-34 years, and in contrast, the tourists who have less concerned about eating food in Phuket is the tourists ages between 45-54 years old.

Although in this study. There are restrictions on information related to the consumption of local foods that are diverse and well-known to foreigners. But this study provides useful information. And importantly, the choice of food. Of Australian tourists Influence of food choices in Thailand. Highlights of eating and the factors that are important to the market and the traveler to decide to consumption food in Phuket.

Keywords:Food risk dimensions, Australian tourists, food satisfaction, Phuket

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CHAPTER 1

Introduction

The first chapter is the introduction, it includes the background of the topic and selected area, the researcher will also discuss the research question, objective and at the end of chapter report the advantages and disadvantages of the study.

1.1 Background

The 19th Century brought magnificent changes in travel to the world, connecting cities by railways, increasing tourism travel, and helped to establish restaurants around the world. Then in the 20th Century, we saw restaurants developing their business model to be unique, as we see nowadays. This increase of food availability, restaurants, and international travel encourages people to spend more money and their free-time on leisure activities, a large proportion of the money spent goes to the most important thing in life which is food.

Food risk, food safety and food satisfaction have been included in many studies and food are one of the factors that influence tourist destination choice. The tourist does not seek only the 'comforts' of home when they are travelling, but also the convenience from the services provided by the food and restaurant industry. According to Cohen and Avieli(2004) tourists are likely to try or have experiences of local traditional food and often to have these foods in a clean and sanitary environment. The tourism industry has been providing food products and catering to meet the needs of tourists in all areas such as accommodation, transfers or trip activities. Comfort is not only a physical need but also the tourist's personal feelings, including both physical and psychological needs. Service, outstanding food and the uniqueness of local food provided by restaurants can be one of the fastest ways a tourist spends their travel budget. A tourist will prefer to fulfil their needs by eating at restaurants or local street food outlets, as cooking their own meal may not be their preferred option, while they are enjoying their holiday. For most people travelling is not a time to be cooking. The tourists would prefer to go out for their meal and enjoy the local food, culture, and scenery without the need to wear a formal dress or a suit to dine. The new quick and casual restaurant segment has become a huge influence on the industry within Phuket and has also emerged as a growth category in the food-service industry. Even though the

casual restaurants offer a more casual menu and scenery they are more attractive to tourists and so more profitable. With regards to the application of tourism, the role of food could be increased in the marketing of a destination.

1.2 Food and tourist

Food is more than a tool for living, it's not intended to only satisfy hunger and to provide necessary nutrients for humans but also to prevent nutrition-related diseases and improve the physical and mental well-being of the consumers. Influencies of choosing food can be a source of pleasure, comfort and safety. For tourist food, it can be a symbol of hospitality and reflect the significance of food in some religions. As humans assert, food is an important part of the tourism industry, which comprises on average 25% of a total tourist's expenditure (Hudman, L.E., 1986, Heaney & Robertson, 2004).

Dining out is common among tourists, it is the easiest and simple way for people to enjoy their holidays, food is believed to rank alongside climate, accommodation, and scenery in importance for tourists (McKercher, Bob, Fevzi and Okumus, Bendegul, 2008). The trend of eating out has led to the growth of this industry, supported by other emerging trends such as higher income and a higher population, especially in urban areas. This leads to the need of managing the customer and making sure that all the customer's needs and preferences can be fulfilled in order to increase the industry revenue. McComber and Postel (1992) suggested that restaurants serve more than food and strive to satisfy the nutritional and emotional needs in their clientele. (Lupton 1996; Counihan 1999). When customers choose to dine out many factors can affect their decision making for example prices, location, atmosphere, menu, appearance, reputation, and value for money.

Culinary tourism is an increasingly important part of "destination marketing" (Boniface, 2003; Hall & Sharples, 2003; Hjalager & Richards, 2002; Ignatov & Smith, 2006; Okumus, Okumus, & McKercher, 2007). The increasing number of tourists coming to Thailand has inflated the economy, creating more job opportunities, higher incomes, and higher skilled employees.

World top tourism destinations

Table 1.1 International tourist receipts

Rank	Country	US\$				Local currency	
		Billion		Change %		Change %	
		2015	2016*	15/14	16/*15	15/14	16/*15
1	United state	205.4	205.9	7	0.3	7	0.3
2	Spain	56.5	60.3	13.3-	6.9	3.8	7.1
3	<u>Thailand</u>	<u>44.9</u>	<u>49.9</u>	<u>16.9</u>	<u>11</u>	<u>23</u>	<u>14.7</u>
4	China	45	44.4	2.1	1.2-	3.6	5.3
5	France	44.9	42.5	22.9-	5.3-	7.6-	5.1-
6	Italy	39.4	40.2	13.3-	2	3.8	2.3
7	United Kingdom	45.5	39.6	2.3-	12.9-	5.2	1.4-
8	Germany	36.9	37.4	14.8-	1.4	2	1.7
9	Hong Kong	36.2	32.9	5.8-	9.1-	5.8-	9-
10	Australia	28.9	32.4	8.2-	12.3	10.2	13.5

Source :UNWTO, July 2017

Table 1.2 International tourist arrivals

Rank	Country	Series	Millions		Change %	
			2015	2016*	15/14	16/*15
1	French	TF	84.5	82.6	0.9	2.2-
2	United state	TF	77.5	75.6	3.3	2.4-
3	Spain	TF	68.5	75.6	5.5	10.3
4	China	TF	56.9	59.3	2.3	4.2
5	Italy	TF	50.7	52.4	4.4	3.4
6	United Kingdom	TCE	34.4	35.8	5.6	4
7	Germany	TF	35	35.6	6	1.7
8	Mexico	TF	32.1	35	9.4	8.9
9	<u>Thailand</u>	<u>TF</u>	<u>29.9</u>	<u>32.6</u>	<u>20.6</u>	<u>8.9</u>
10	Turkey	TF	39.5	..	0.8-	..

Source :UNWTO, July 2017

According to UNWTO -the United Nations World Tourism Organization 2016 stated that Thailand is one of the top 10 highest income earners from international tourists, having receipts of 44.9 billion US dollars and ranked 9th in the number international tourist's arrival at 32.6 million. This demonstrates that Thailand continues to rise in the international rankings, which is a positive result, but this can be improved on in the future and the destination can be made more attractive to travellers.

Furthermore, Trading Economics website stated that consumer spending in Thailand has increased to 1,251,988 million THB in the third quarter of 2016 from 1,247,232 million THB in the second quarter of 2016. Consumer spending in Thailand averaged 907,031.16 million THB from 1993 to 2016, reaching an all-time high of 1,251,988 million THB in the third quarter of 2016 and a record low of 579,972.00 million THB in the first quarter of 1993 ("Thailand Consumer Spending: 1993-2017 "). Which supports the result of WTO in the growth of the tourism industry in Thailand.

Australia

Focusing on Australian tourists, the understanding of the food risk perception associated with local food is essential to the processes evaluating the cuisine and can support successful destination marketing in increasing tourist satisfaction in the future.

Table 1.3 TOP 10 nationalities to arrive at Phuket (January – December 2015 Phuket International Airport Immigration)

Nationality	2014	2015	%
	Number	Number	(-/+)%
China	981,278	1,323,128	34.84
Russia	555,734	357,921	35.59-
<u>Australia</u>	<u>258,979</u>	<u>244,086</u>	<u>5.75-</u>
South Korea	219,485	203,689	7.2-
Malaysia	120,250	134,265	11.65
United Kingdom	111,283	112,710	1.28
Singapore	114,556	101,115	11.73-

Table 1.3 Continued

Nationality	2014	2015	%
	Number	Number	(-/+)%
Hong Kong	75,224	92,893	23.49
German	96,217	91,200	5.21-
France	66,100	82,087	24.19

Source :intelligence center.tat.or.th

Australian tourists are regarded as one of the most important sectors and this area is increasing in Phuket, Thailand .Australians have potential and high value to drive Phuket's tourism economy, they are not only increasing in numbers but also the amount of money they spend, according to reports from TOP 10 nationalities arriving in Phuket since 2007 Australians have been in the top 5 of the top 10 nationalities entering into Thailand .The results show that one of the largest financial contributions come from Australian spending, even though in 2015 it dropped by 5-6 %but slightly increased again in the year 2016 .According to a Galaxy survey conducted for Escape, that asked 1000 Australians the best holiday designation they rated Bali as best overall value and Thailand as value for money.

Phuket has benefited from the rapid growth as an Australia destination, especially due to low-costairlines having direct flights and easier visa application requirements . The increased number of low-costflights has increased the overall popularity of overseas travellers.

With an increasing number of Australiantourists, the researcher sees opportunities to study their food risk perception and food satisfaction that they have comprehended during their visit, and based on the results of the investigation be used to develop marketing in the future .

1.3 Food and tourist destination

Phuket is a popular and increasing destination for travellers from around the world, they come for are laxing holiday, taking a break from their busy lives, and hard work .By giving them a taste of life in a tropical paradise, beaches, sparkling blue water, and indulgences of

every kind catering from young to old, families, and the elite alike .Phuket is the biggest island in Thailand, it is located in the Andaman Sea at the southern area of the country .The traditional economic life for centuries was rubber plantations and tin mining, along with rubber and tin the fishing industry also thrived .

Phuket was named "City of Gastronomy "by UNESCO Creative City Listing " :2016 .The Governor of the Tourism Authority of Thailand, MrYuthasak Supasorn, said, “Phuket is no longer just a beach resort .It has become a complete holiday destination, with a broad range of cultural attractions and convention facilities.Gastronomic tourism reflects the local culture and promoting regional dishes will help to generate revenue for local communities .Phuket is already world famous for its seafood and the promotion of Thai cuisine is one of the TAT’s topmost priorities because it is an indispensable part of the travel and tourism experience) Newsroom : 2017.(Food tourism can inspire people to create local dishes and after, share information online or any media such as Facebook, Instagram, Twitter, etcetera .The media can create interest from those tourists who are using online programs, before visiting the place, and more importantly can be a highlight of the economic and social promotion .

The government also promote what is popularly called foodie tourism and has already requested the Cabinet to approve a proposal by the Tourism Authority of Thailand to sign an agreement with the Michelin Guide to award Michelin stars for restaurants of excellence .The Michelin Guidebook Bangkok is expected to cover five years period, starting this year and will cost US\$4.1mn)B49.252mn (to establish and operate, although he did not elaborate on the cost breakdown“ .Once the project is approved, Thailand will be the second country in Asian, after Singapore, to join the Michelin Guidebook .It will increase tourist spending in the country” . deputy PM Thanasak added (Ngamsangchaikit, 2017)

Thailand, including Phuket, has some special places for food, such as Street food where tourists can have a new experience and find out about the cheapest way to eat Thai cuisine . Street food has great locations for tourist to enjoy the food .Street food is presented as selling local food and international food at affordable price, often 50 baht for a dish and could be even less . Street food is a very popular way to enjoy a meal in most parts of Asia, where the weather often permits locals to eat outside year-round. Phuket’s Thai international culinary culture is seafood, some food is a major part of rituals and represents the local people's lifestyle and some dishes

cannot be found elsewhere as the recipes are passed on only to family members. Many local restaurants should be concerned to develop and focus on local dishes, due to their characteristic cultural features, to stimulate tourism.

The rise of restaurants in Phuket has been characterized to attract globalization and different cultures. People are becoming much more interested in different kinds of food and enjoy experiencing local food that they are not used to when they travel elsewhere.

According to Cohen and Avieli (2004) through food, tourists receive a greater engagement with the environment where the visit takes place, far from the role of simple observer traditionally associated with tourist visits. Thailand received a record 32 million tourists last year, up 11 percent from 2015. Consumer spending in Thailand is expected to be 1,250,000 million THB by the end of the first quarter of 2017, according to the Trading Economics global macro models and analysts' expectations. Looking forward, the estimate consumer spending of the 59 million foreign visitors in the year 2016 increased by 8.91% compared with the 29.9 million in 2015, with revenue beating expectations and likely to exceed previous forecasts this year, 2017, growing by 10 percent or more.

Another significant trend is an expansion of the tourist base for Phuket, underpinned by the growing number of affordable accommodations opening up the market to a larger demography of visitors. The Phuket airport expansion will also facilitate further growth across all tourist segments. The 5-billion-baht expansion includes a new terminal, ten additional aircraft bays and a five-storey car park. Once completed, in June 2016, the long overdue expansions will double the airport's capacity from 6 million to 12.5 million ("Changing Trends in Two Major Contributors to Phuket Economy.") The Tourism Authority of Thailand said that the tourist industry earned 2.52 trillion baht (\$71.4 billion) last in Thailand to stand at 1,300,000 million THB in the next 12 months. In the long-term, the Thailand Consumer Spending is projecting around 1,420,000 million THB in 2020, according to econometric models. "With total airport arrivals surpassing 7.5 million passengers, Phuket experienced a sharp year-on-year rise of 18% compared to 13% the previous year," noted Bill Barnett, Managing Director of the hospitality consultancy C9 Hotel Works. The growth of the food tourism segment recently has become evidence of business and industry benefit. Today Phuket is one of huge benchmark of

cultural tourism and it is a destination point for millions of travellers who arrive at the city each year attracted by its rich culture, heritage and gastronomy.

A large amount of research has been conducted on food, eating, and culinary satisfaction. It is increasing as a VAT field and the economic significance of tourist food consumption is recognized. However, only a few studies have been made into the relationships between novelty-seeking, food risk perception, and food satisfaction; and allowing tourists to indicate their level of agreement of novelty seeking and food risk perception. This study aims to find out the importance for of Australians seeking novelty food and their food risk perception to provide a generic basic need for travellers and this study can help local people understand the marketing strategies that can be developed to benefit food tourism in Phuket.

Understanding consumers' idea of food preferences factors are critical to providing quick, clear and effective communications regarding food safety and in the future can manage the target needs and then be changed to meet the specific needs of different targets.

1.4 Market segment response to the marketing decision

Furthermore, previous studies (Czinkota & Ronkainen, 2003), Jang Morrison & O'Leary (2004), Loker-Murphy & Perdue (1992) have shown that the customer and competitive are reflected together as the marketing engagement and appear that there no even satisfaction or needs of all consumers. For example, Red Bull company have many tastes, colors, sizes and also have local taste differences in many places and countries. To understand the need of consumer in these segmentation, the provider can design and develop their product and services. According Frank, Messey & Wind (1972) studies focus on segmentation is the core for provider to become customer driven. Researchers of segmentation are various and important issue as traveler are more travelling, to study into micro segment of Australian tourist can help to increase profitability for the tourism industry in Phuket.

1.5 Objective /aim of this study

Several studies measured the perceptions of consumers on food safety (Nielsen et al., 2009; Ruth M et al., 2001; Redmond, et al., (2004) Sparks & Shepherd, 1994) However, in

the present study the objective was to capture the opinions of food safety from Australian tourists and its importance to public and local business such as the economic impact and tourist trust.

Previous researchers (Han 2005 and Chang 2007) have shown that many factors influence travel and food selection such as language barriers, psychology, social, health and sanitary, and value. These factors can give direction to travel choices and options of whether to experiences local products. The obtained information within our study gives the current food safety priorities and challenges to improve the cuisine.

Based on previous factors this study took Phuket as the case study with the aim to :

1.5.1 Research questions

1. What are the level of food risk perceptions of Australian tourists in Phuket?
2. What are the segmentation of tourist based on their food risk perception?

1.5.2 Research objectives

Based on previous factors this study taken Phuket as a case with aim to:

- 1 .To examine the food risk perceptions of Australian tourists in Phuket .
- 2 .To categories Australian tourists into different groups based on their food risk perception benefit regarding Phuket Island
- 3 .To profile the different groups of Australian tourists based on their food risk perception targeted information of each groups

This thesis examines how the behaviour of travellers can have an influence on decision making for continued economic growth .The research results will be used as a guideline for promoting tourism and also can result in an upscale of selling for the food provider .

1.6 Scope study

1.6.1 Scope of researcher area

The study is focus on segmentation of Australian tourist based on food risk perception. This study indicates the differences in level of segmentation perceived in level of food risk and food satisfaction. Moreover, it investigates the relationship between segmentation and food satisfaction in Phuket

1.6.2 Scope of Demographic

To understand the food risk perception associated with local food which is important to evaluate the local cuisine and to help in destination marketing to make more satisfaction for tourist in future, this study focused only independent Australian tourists. Dependent tourists were avoided, a trip provided by company were assumed that food provided to tourist are international food, their experienced about Thai food is not good enough to the study.

1.7 Significance of the study

1. The findings of this study determine its reveal positive and negative in food perception and the overall of food risk perception and food satisfaction in Phuket.

2. Segmentation based on food risk perception can benefit to retailers, food provider and mangers to focus specific groups and to develop marketing strategies to be more effective to their market target.

CHAPTER 2

Literature review

This part provides the theoretical and literature reviews. This chapter also defined the variable concept of food risk perceptions and food satisfaction. Moreover, it addresses the relationship between overall food risk perceptions and food satisfaction.

2.1 Tourist segmentation

Early 1960s segmentation has been introduced by Smith's, many approaches and techniques have been used to identify the target group for the tourism market (Chen & Hsu, 1999). Tourist has different expectation and need because they have perceived indifference experiences and each holiday has engaged to different activities. For holiday product and services offer is one of the driving tourism economies such as spa, scenery, entertain, shopping, activities and food product. These services and products have been component setting economics. As far as the seller can provide the best convenience and more of the satisfaction means more of tourist plans for holidays.

The main goal of market segment will bring very good interest benefit to the business owner. Previous researchers have been studied and conduct about segmentation research (Doinicar, 2004; Jang et al., 2002; Andriotis, Agiomirgianakis, Mihiotis, 2008; Hudson, 2000), Hsieh et al., 1992 ; Park & Yoon, 2009). Many segmentation frequently used customer expectations or attribute importance as the basis. Since Smith (1956) suggested about the marketing strategy is concept segmentation.

The market concepts of tourism business has segmented into such as behavior segmentation (Fodness & Murray, 1997), motivations segmentation (Bieger & Laesser, 2002; Park & Yoon, 2009), Satisfaction segmentation (Andriotis et al., 2008, Athanassopoulos, 2000), cultural segment (McKercher et al., 2002). Furthermore, market segmentation has been studied in various in tourism industry such as hotels, tourist attractions, including travel agency, and for this study focused on food risk perception. Segmentation has been offered as a choice to developed tourist segments across diverse backgrounds of national and culture.

Andriotis et al., 2008 found that statistical difference based on gender, marital status and ages. In contrast, education and income found there was no difference in tourist perception. A study Asian of Bauer found that Asian traveler seems to seek in entertainment facilities and Non-Asian seems to seek in health facilities. Moreover, a study of Yuksel(2004) indicated that internal traveller are more deprecation in services evaluations than international visitors. Segmentation of tourist has often based on geography as Australian are the direct data of this study to segment them based on food risk perception.

The data analysis about personal characteristic beliefs and most are relevant to tourist splitting segmentation. Traveler personal experience can affect to selection making. According to DolniČar (2004) study has shown a step by step outline of segmentation which are

Step 1: Selection of the segmentation criterion



Step 2: Grouping respondents



Step 3: Profiling of segments by identifying in which personal



Step 4: Managerial assessment of the usefulness of the market segments

Cluster analysis has been utilized segmentation of tourist in various of study. Since each group of segmentation are difference needed ideals for their holiday. Not only activities but the food is one the factors that tourist select when traveling. Their food risk perception and food satisfaction level are important and mainly to help understand of each group.

Study of Middleton (2002), segmentation can be defined as the process of dividing a total market such as all travellers or a market sector for example holiday travel. Furthermore, segmentation of tourist can help to understand type of tourists and also can help to develop market strategies (Bieger et al., 2002; Bloom 2004; Cho & Lee, 2006) and more of the tourism industries can increase by identifying of tourist experiences within limited time available (Opaschowski, 2001). Segment into subgroup to manage purpose of consuming or buying. Segmentation can help to achieve a better benefit for the producer or provider to make sure that

satisfaction of consumer has met and that will help grow by selling products. The primary of segmentation mainly is demographic, food risk perception and food satisfaction for this study.

The main findings to segment Australian tourist can help restaurant owners to identify opportunities to improve and develop services in a better way to provide for consumer and help to make appropriate marketing strategies for the provider. In order to plan effective strategies of group segmentation these factors of food risk perception should be identified and developed (Foster and Kaferstein, 1985; Green, McGinnity, Meltzer, Ford & Goodman, 2005). Especially can develop competitive advantages strategies in future.

2.2 Tourist Food risk perception

Risk perception can be a subjective assessment of the probability of accident happening and how concerned we are with the consequences. Risk is difficult to define events, though every language can understand “uncertainty or disaster

Frewer (2004) and Bruhn (2005) suggest that the more that can be understood of the factors that influence customers, such as concern and confident in food safety, can be useful to account in communicating about food risk perception. Overall, fewer attempted to explain that in a relation to perceived control over risk.

Consumers are willing to pay more for speciality or high-quality product, Lukovitz (2015) study shows that budget-conscious consumers often take pride in being excellent cooks and stretching their limited budgets, without sacrificing taste or nutrition. To avoid risk from food is one of the major concerns when they are travelling, such as food poisoning which has long been acknowledged as a ‘classical’ risk issue (Verbeke, Scholderer and Frewer, 2007). Li Nan (2015) proposed that consumers risk perception of healthcare products included socio-psychological risk, product risk and health risk. Customers want delicious food and healthier, rather than more get sick and food concern over food safety have been steadily increasing since the 1970s (Trait J1988; Payton S.1994). Nowadays people are more concerned about safety of food than they are about the fat or sodium content (Boo, Ghiselli, & Almanza, 2000; Dulen, 1998) or some groups of consumers may take only special food such as the elderly or children, they may avoid certain food in order to mitigate adverse health effects or some groups are allergic or intolerant of certain foods (Gaivoronskaia & Hvinden, 2006). More specifically, they are

concerned about natural based products, hygiene of food and cleanliness when they are dining out.

The increasing noticed and aware of importance of food for health, with the decreasing belief in the health benefits from functional food, which in the end translates into a lower willingness to compromise on taste are evolutions the most important of human life is the hunger for food. Human may skip meal but hungry is still there in stomach. Risk perception with regards to food preferences, individuals are aware of and engage in the possible health risks of eating fast foods despite the adverse health effect. Individuals engage in such behaviours (Martin et al. 2008; Werthmann et al. 2011

The cultural value of food has long been acknowledged from (Murcott, 2003). Slovic (1987) their study shown how attributes of risk that have infective of risk perception. His research has shown that respondents were ranked risks into two factors which are dread risk perceived by lack of control, uneven distribution in the population, and catastrophic or fatal consequences; and unknown risk characterized by lack of knowledge, of control and of observable, Hancock (1993) identified three types of risk including absolute, real and perceived risk 'Absolute risk 'is assessed by the service provider who implement safety procedures to ensure that the real risk is minimized.

Fisher (1988) suggests that a human has a common tendency to dislike or questions a new and unfamiliar foods and yet, also has a weakness to search for a new and exciting in novel foods. Many studies focus on perceived risk because it is usually influenced by consumers purchasing behaviour. Individual person perceived risk is a measure of the level of risk and judged risk in a particular context. Hans 2005, studied about 5 factors but this thesis employs only four dimensions, they are communication, Psychology, social and health dimensions to measure risk perception relating to food and dining experience. Furthermore, health is an increasing concern. Although there was a significant difference between countries, there was not in Phuket and it's not a marketing point of view in terms of different destinations as mention earlier. Bauer's study claimed that perceived risk changed when tourists changed destination or travel into different countries. Assume that knowledge of the local destination changed or influenced perceived risk.

This study focuses on the customers risk perceived and it seems likely to influence their decision making while they are travelling and it would be prudent for market segments or seller to pay some attention to the study of perceived risk and how understanding can increase the selling of their product.

Table 2.1 Summarizes some previous studies together with the dimensions

Author/s	Year	Dimensions	Perceived risk component
Roselius	1971	6	Physical Performance Financial Time Social Psychological
Jacoby and. Kaplan	1972	5	Physical risk, Social risk, Functional risk, Psychological risk and financial risk.
Korgaonkar	1982	9	Financial risk, Performance risk, Social risk, Physical risk, , Personal risk, Privacy risk and source risk
Slovic et al	1985	7	Voluntariness, catastrophic potential, novelty, and equity
Luce and Weber	1986	5	Probability of gain, loss quo, status quo, expected benefit and harm
Simpson and Lakner	1993	4	Economic, Performance-related, Physical, and social/psychological
Darley and Smith	1995	6	Based on Jacoby and Kalap five dimension he added time loss dimensions on his study
Moutinho	2000	5	Functional, Physical, Financial, Social, Psychological
Laroche et al.	2004	5	Time, Financial, Physical, Performance, Psychological
Hans	2005	7	Health Risk, Value Risk, Communication Risk.” Psychological Risk, Equipment Risk, and

Table 2.1 Continued

Author/s	Year	Dimensions	Perceived risk component
Chang	2007	5	Communication risk, Health risk, Value risk, Social risk and Psychological risk
Li Nan	2015	3	Socio- risk, heath value

2.3 Demographics

One of a factors that could contribute to gender is that women's greater concern controlling food behaviour eating and fatness and eating behaviour diet anxiety with adhering to a slimming diet, which has been found larger among women than men (Germov & Williams, 1996; Sobal et al., 1995, Fagerli, 2001; Buchler et al., 2010). (Claudia Arganini et al.: 2012). Men are likely to have and to exercise over dieting as a means for body weight control

Additionally, the study of Chandler & Costello, (2002) shows psychographics is mainly related to personality and the individuals' characteristics. In addition, Schutz and Weidmann (1998) comparison personal perceptions against the environmental risk of 30 different product ranges, such as clothing items, medicine, and food items, the food seems to be perceived largely by interim personal risk.

Furthermore, higher educated people are likely to consume or select a greater variety of food because of their better access to the available information about foods, however, the study of Williamson et al. (1992) shown that consumers aged more than 35 knew more about food safety risks and concepts than consumers under 35.

In addition, there was special attention to specialized dishes for particular types of tourist or consumer such as women age, pregnant women, These consumer groups are acknowledged to be aware of having some food (Raazzaghi and Tinker, 2014; Mozaffarian & Rimm, 2006; Hellberg et al., 2012)

Hall and Sharples (2003) defined food tourism as to travel to gastronomic country and region for relaxing and entertain expectation which include visiting products and producers of food gastronomic festivals, cooking shows and demonstrations, tastings of quality food products or any tourism activity related to food". Similar definitions of food gastronomic tourism (Boniface, 2003; Hall and Sharples, 2003; Long, 2004). Food has gained a higher profile

as a pull factor in destination marketing (Boniface, 2003 Richards, 2002) and has implications for the economics, culture and environment (Clark & Chabrel,2007). Karim and Chi (2011) noted “There are many travelerwho travel for reasons looking into unfamiliar food and culinary experience. Tourism related to food culinary tourism, or gastronomy tourism.

Travel away from home is creating motivation (Mak, Wong, & Chang, 2009) and thatmotivation can be a reflection coming out of the needs and wants of individuals. People respond differently when they are seated in a restaurant when they are travelling in a place that they never been there before. When they see the menu, some of them will order food that they are familiar with or have had at home but other tourists like to have something they have never tried before to gain a new experience or a new kind of food.

2.4 Past experiences

Past experiences with a food can significantly influence food consumption especially when it is possible to avoided eating and drinking (Warde, A. and L. Martens, 2000).Pastexperiences refer to past events, knowledge, skills or feelings which already have been gained, have memories about which are good or badand we have done the jobs or activities for some time which is associated with the sensoryor tastes of foods.

The diversity of food backgrounds and cultures have differences greatly affect how products are sold in various countries, individual people feel different things because they have perceived the food in different ways (e.g. Hashimoto & Telfer, 2006). It “exists only in the mind; if a person’s knowledge was complete, that person would have no uncertainty” (Windschitl& Wells, 1996) and individual people would have different feelings; even if they have had the same experience, especially in food, because each person may have a different definition of their needs, appropriate to eat and how they are appropriately eaten (Cardello& Schutz, 1996). Combining knowledge and experience will give anunderstanding of the flavour principle for different types of food.

When the cuisine used by restaurants reflects the different local people and regions the meals can contribute to the customer’s experiences by bringing a connection to the host culture (Symons, 1999). These past experiences have given the tourist some idea of that situation and can help them to have better judgment when having or avoidingto try a new food in

the future (Finkelstein, 2004) and many studies have also suggested that when tourists' holiday expectations are met with whatever they expected and its exceeded, they are more likely to re-visit in the future (Chen & Tsai, 2007; Oliver, 2010; Som, Marzuki, Yousefi& Khalifeh, 2012). Food plays a part in satisfying to the traveller .The tourist experience and is part of the of the destination(Ignatov and Smith 235-255).

Food is one out of many reasons that many tourists choose to go to the best destination for a visit or event and return again and again, the variety and special types of the food can play a significant role in their choice. Local and regional food could give more value and impression to the destination and contribute in this way to the competitiveness of the local area (Crouch and Ritchie 137-152). Tourists prefer to travel to destinations that are known as a place to experiment with quality local foods and beverages. Eating or drinking is an activity that they cannot possibly avoid (Warde. Aand L. Martens, 2000)..So, if travellers always have a chance to experience more and more different kinds of food the tourist will have new experienceswith local food. However, it not always that a new experience is a pleasure sometimeswhen you have eaten a totally new food and it has made you ill, when you try the same food in different place and it may not make you ill but you do not enjoy not the food your brain will forgiving the new attempt (Chinnakkaruppan et al.2014).

Past experiences have been recognized by many food researchers and its effected on people 's perceive about foods destinations.

2.5 Factor influencing food risk perception

2.5.1 Communication risk

Language barriers impact at every traveller when they are going to unfamiliar country and culture from planning the trip until make a satisfaction while they are there (Cohen & Cooper, 2004). Risk defined as the traveller opinions concern about risk and risk-related factors among risk assessorsto other interested to friends (FAO/WHO, 1998). Communicating food risk may be important in many circumstances not only for localpeople but for trust in the government or industry too. The government has to monitor, manage and develop the economy. Communication is the mainissue if we are unable to amplify the risk due to reduced communications ingrowing business they may be facing issues, this is true in every industry.

Many events indicate risk communication is very effective and important. Powell suggests that communication risk is now recognized of an integrative risk management strategy (Powell, 2000) and essential in reducing the risk of communication, it's very useful for risk managers. The US National Research Council said that risk communication is defined as "an interactive process of exchange of information and individuals opinion of individuals, groups and institutions, addition as individual tourist have different experiences, especially historical food experiences, it is related to food safety, according to the Corp's study a regional strategy previously advised about food risk communication. Overall,contamination risk and the benefit of food action can be taken when ordering food. Risk communication around food can make customer have benefits or disasters if the waitress is unable tounderstand what they are ordering or there is a misunderstanding.

According to Frewer and colleagues, they proposed that to study risk communication and the effect of trust information sources upon attitude to GM foods. Furthermore, the trust of the consumer can lead to engagement or commitment to return or repeat buying products

The perceived value of communication, common to taking advantage of close selling and it brings it closer to the consumer and furthermore, understanding the different groups of tourist andhave insight into their behaviour and beliefs can facilitate the development of how to use communication strategies (Pieniak et al., 2010a). Food service staff or retailers have to communicate their product or if they are unable to be identified because of communication failure in selling or buying it's hard to be successful. Staff are a benefit as they are able to communicate with customers in the commercial food and should learn details such as various different cultures and be encouraged to develop English speaking or even a third language to use on social media, these necessitiesfor international customers and are of great benefit to both the tourist and the local economy.

Australians' speak English as their native language but in Thailand,English is not used as much as the tourists need as it's not the Thai mother tongue nor recognised as a second language. This could be a communication failure for both sides, which can take unprecedented time for the tourists when they try to communicate to Thais.

2.5.2 Physical risk

The effect of prior experience of a particular vacationvacations. Tsaur, Tzeng, & Wang, (1997) study focused on two main factosfood of risk, one of them isan that a person's health is likely to be sickness and also defined as "Physical Risk" related to a group as they eat the same food and couls be uncertain health to eat . Young people have more inclination toward trying strange foods compared to middle age people and the elderly. Some age groups may need certain food or different types of food likea child's cereals or milk, teenager's snack, women's dietary food and for the elderly 's low-fat and low salt products. The traveller would consider to take or avoid risk with an unfamiliar product because it could contain toxic or harmful substances, according to the WHO (2015) some 600 million ill every year after eating unclean food o contaminated food.

Food-related to the personalcharacteristics, Fischler(1988)has shown that there is a distinction between 'neophobic' and 'neophilic'andhave a difference in taste. His study suggests a group of people have a natural tendancy to dislike or suspect new and unfamiliar foods (neophobic), and another group have a curious trait to wonder to search for novel or unfamiliar foods (neophilia).

2.5.3 Social risk

What people are saying and what they have been told can help you to understand what you are facing or having? However,sometimes other opinions make you lose your confidence and if we give more credit to information that we get sometimes it has the power to become an over-riding issue and lead the audience to conflict with their original idea. Social media, relatives, friends or families can give right, incorrect or misleading information (Scanfeld, Scanfeld, & Larson, 2010),or evencause the traveller to make wrong choices because the traveller uses information about what others think and do according to information about past choices or experiences, to develop attitudes and understand events (Salancik& Pfeffer, 1978).Individual people feel different things because they have perceived in different .

This is the process of "sense-making" after receiving information then evaluating the risk or benefit taken in food (Wilson & Wilson, 2013). Additionally, Falk (1994) pointed out that the eating the meal are the basic for or human life.

Some media, such as online media can have an impact on how news is perceived and can make a crisis more dramatic and alive (Mei, Bansal, & Pang, 2010). In recent times, a story that can affect people does not only come directly from a news source but it also comes from social media, this has had a positive effect on people and clearly can have positive and negative potential relating to food choice. Social media can help making sense of a subject, however, it is not always that we are agreeing with the information given by people that we know or from media because sense-making is which is uncertain situations (Weick, 1995; Weick et al., 2005)

In every social interaction is the likelihood of friendship. Travelling or tourism brings people together from diverse cultures or lifestyle backgrounds and contact can lead to friendship (Brown & Lehto, 2005). Moreover, local and regional food could give more value to the destination and contribute in this way to the competitiveness of the geographic area (Crouch and Ritchie 137-152). Tourists prefer to travel to destinations that are known as a place to experiment with quality local foods and beverages. Abroad travelling contributes to tourists engaging in social contact and that leads to communication and opportunities to learn and understand others culture (DeYoung, 2013)

2.5.4 Health and sanitary risk

According to Cohen and Avieli (2004), the highlighted concern the reflection with food is reflected in tourists' health and they tell of their unexpected, unfortunate food experiences. There are many public health risks, some are potentially toxic when related to food, including food that has not had agriculture chemicals fully removed and so can cause sickness. The increased use of chemicals make people have more chances to be affected from food poisoning (Collins and Oddy, 1998).

Food safety is important for the food industry because customers are becoming increasingly concerned about nutrition and their health. Maddock et al. (1999) use 'involvement in healthy eating' to estimate the significance of healthy eating to individuals. This can be one of the growing concerns about food risk to their health.

Furthermore, illness could happen from an allergic reaction, which can happen if the customer does not know the exact ingredients or potential ingredient cross-contamination of the food, it may cost a customer their health or even life, especially when they are travelling.

Studies of physical risk in tourism researchers refer to the likely to encounter physical danger, injury, or sickness while on vacation (Roehl & Fesenmaier, 1992). Food has cultural, symbolic, familial and religious connotations which must be considered when developing risk (Frewer et al., in press) and cultural tourism is one of the largest and fastest growing in the global tourist market. This can be one element to drive destinations to be attractive. But some people were more like to avoid travelling to an area that has more risk that they think or perceived, they would rather go to an area that has similar surroundings, but as mention above different people have different ideas.

Furthermore, Kim et al. (2009) study found that young people have more inclination toward strange foods compared to middle age people and gender causes different expectation of food. Cohen and Avieli (2004) research one of the thing that prevent tourist to not try the local food is food themselves which is implement instead of attrition and persuasion

2.5.5 Value risk

Personal value may influence food consumption (Feather et al., 1998; Lindeman & Stark, 1999) previous research showed that value can be a weak predictor only, as it is not directly linked to behaviour but likely to influence attitude and belief. A previous study found that the more consumers have or try new experiences that more familiar they become and pay more attention to restaurant selection, and they are happy and enjoy of foods (Kivela & Crofts, 2005)

Bao, Bao and Sheng 2011 proposed that food products have quality differences or have uniqueness in difference brands and brand is highly persuaded with quality in buyer's impressive. To overcome this goal managers or sellers can invest in their commercial and advertise, by including elements such as free food tasting, to encourage tourists to value the food and have some experience of the product through sampling the food. This could encourage more consumers to have experiences, value or commutate in food also it is a perfect way to associated with the customers.

In foodservice operations, food quality is an importantly condition to satisfy the needs traveller who hungry (Peri, 2006), more than food quality, environment (Peri, 2006; Ryu and Han, 2010), varieties of the menus (Sulek and Hensley, 2004), and eating out some time (Auty, 1992), the fine health (Kivela et al., 1999; Kim et al., 2009) and inside mood (Ha and Jang, 2010) were also found contributing to satisfaction level (Kivela et al. (2000))

Table 2.2 Summary food risk perception research findings

Author	Study	Findings
Barbara Knox 2000	Consumer perception and understanding of risk from food	People do not think and behave in mechanistic ways,
Saba & Messina, (2003).	Attitudes towards organic foods and risk/benefit perception associated with pesticides	The results of the cluster analysis indicated that the vegetarian who have organic foods found to be having low perceived in food industry.
Leikas, et al 2007	Food risk perceptions, gender, and individual differences in avoidance and approach motivation, intuitive and analytic thinking styles, and anxiety	Results showed that food risk perceptions mostly have f two dimensions which are scariness and likelihood, perceive food risks as less likely than others.
J.R. Houghton a,*, 2007	The quality of food risk management in Europe: Perspectives and priorities	The result identifies two priorities relevant to our understanding of effective food risk management: first, a need for further research to determine the source and nature of the different evaluative perspectives, and second, a need for the key stakeholders to appreciate and understand the alternative perspectives in order to enhance the effectiveness of the food risk management process.

Table 2.2 Continued

Author	Study	Findings
Andriotis, K.,2008	Measuring tourist satisfaction A factor-cluster segmentation approach	The study identifies segments of tourists by their responses may bring sprovider closer to the evaluation of tourists' satisfaction
Rubio, et al 2014	Brand awareness–Brand quality inference and consumer's risk perception in store brands of food products	communication factor is absolutely necessary and consequence for retailer's strategy of marketing store brands in food product
Li, et al, 2016	Segmentation of Chinese parents based on food risk perception dimensions for risk communication in rural area of Sichuan province	Segment in to four groups according to their risk perception difference on five dimensions. A series of risk communication strategies were specifically designed for each cluster based on their risk perception features
You and Ju 2017	A Comprehensive Examination of the Determinants for Food Risk Perception: Focusing on Psychometric Factors, Perceivers' Characteristics, and Media Use	psychology factors had the greatest influence on food risk perception, followed by perceivers' characteristics and media use and the effect of perceived benefit and dread in Chinese food were salient only for those with little media use
Rosi, et al. 2017	Food perception at lunchtime does not depend on the nutritional and perceived characteristics of breakfast	suggesting that the combination of different ingredients can modify the perceived health value of foods

Table 2.2 Continued

Author	Study	Findings
Kaptan et al. 2017	Generalizing understanding of food risk perceptions to emerging food safety cases	Most of least untrusty transparent and honest risk–benefit

2.6 Food Satisfaction

Perception of food risk and safety and food risk is one such psychological explanation customer behavior to consume food and related to the negative consequent. However, perception food risk has not only consequences for the purchaser but also the producer. Satisfaction can be described as the fulfilment gained by a customer after consuming or experiencing a product or service (Oliver, 1997). According to Cohen and Avieli (2004), their research found that local food can be a problem for tourist instead of persuade to eat or have experience about it, which is many tourists would avoid to have influence about local food and Chang et al. (2011). Studied shows that culture difference from local and tourist home culture have a great deal to effect the influence on others perceptions especially of flavour and cooking method.

Customer satisfaction has become one of the most critical marketing priorities because the target of sale is repeat sales, loyal customers and word of mouth will build sustainability of a business. Satisfaction can influence decision making to purchase while travelling (Mazursky, 1989; Chi and Qu (2008)); Santouridis and Trivellas (2010), when the perceived risk of a service or a brand are increased, the satisfaction of that service or brand decreases (Cronin et al., 2000; Johnson, Sivadas, & Garbarino, 2008 and Kandampully, & Juwaheer, 2009)

Nield, Kozak, and Le Grys (2000) conducted an empirical investigation on the role of food service in tourist satisfaction, their study pointed out that dissatisfaction with a service could lead to dissatisfaction of the overall tourist experience. Reisinger & Turner, 2003 pointed out that dissatisfied tourists may not return to the same destination and may not recommend it to others, which contrasts to the satisfied tourist who may revisit or recommend it to others

Travel has a positive influence on satisfaction (Assaker et al., 2011). If tourists seek new experiences and those experience meet their needs or expectations they tend to revisit the places in the future (Feng & Jang, 2007; Reisinger & Turner, 2003; Chen & Tsai, 2007; Oliver, 2010). This study views perceived food risk consumption as if the Australian sense of safety food when they are visiting Phuket they will be satisfied and if local people can make better quality cuisine and make it more attractive this may lead to an economic increase and more job availability.

Uniqueness and special identity can make a strong relationship between food and identity. These days it has been used to promote tourist destinations, and Mitchell and Geatorex (1993) suggest that perceived risk is a powerful tool when investigating consumer purchasing behaviour. Food involves a transfer of knowledge and information about the people, culture, traditions and identity of the place visited (Ignatov and Smith 2012) and it is one of the fundamentals of local culture, as well as part of a region's cultural heritage (Tellstrom, Gustafsson, & Mossberg, 2006). Consumers do not easily articulate their requirements; there are difficulties in delimiting and measuring the concept (Sachdev, Sheetal B; Verma, Harsh V 2002). Parasuraman, Berry and Zeithaml (1988) conducted research to analyse the importance of service quality which can cause the business to success or failure.

Conclusion

Gocek and Beceren (2012) indicate that perceived risk is one of the main factors influencing customer satisfaction and many studies propose that reducing risk perceived of customer can increase sales and also increase satisfaction (Johnson et al. 2006, 2008; Paul et al., 1980; Shimp and Bearden, 1982; White and Truly, 1989). Satisfied customers are more likely to recommend their experience to friends, relatives or other potential customers to a product/service by a free word of mouth advertisement (Shoemaker & Lewis, 1999; Kozak, 2003), and nowadays even more share their experiences on social media.

Food has *cultural, symbolic, familial* and *religious* connotations which must be concerned into account when management about risk messages (Frewer et al., in press). and cultural tourism is one of the largest and fastest growing in global tourist market this can be one element to drive of destinations attractive. Food can provide the basis for the of tourism improvement experiences in a number of ways: linking culture and tourism, develop meal

experiences, producing distinct food, developing the critical infrastructure for food production and consumption supporting local food. While using cluster analysis to segment tourist can help provide bring the need and satisfaction through the consumer.

Food can provide the basis for the development of tourism experiences in a number of ways: linking culture and tourism, developing meal experiences, producing distinctive food, developing the critical infrastructure for food production and consumption supporting the local food market.

CHAPTER 3

Methodology

Overall, the methodological approach of this thesis intends to review the literature about quantitative data, previous studies in the field of food and culture will be relevant to this study .

3.1 Population and Sample

The population for this study was Australian tourists who were visiting Phuket, Thailand mid-October to the end of November 2017 and the methodology was using convenience sampling .Phuket international airport was chosen as a suitable location to collect the data, as it is the gateway to Phuket .In addition, only respondents who had travelled to Phuket and who had had food experiences were interviewed in order to ensure that they could respond to the question of this study.

Since statistics show that Australians are one of top 10 nationalities to arrive at Phuket, below is the population from the strategic year 2014 and 2015, the information was reported by the Tourism Authority of Thailand Intelligence Center in the year 2016 and was segmented by nationalities .In this study, the population was Australian tourists who had already visited Phuket or spent more than 24 hours there and had at least experienced the food of Phuket.

Table 3.1Statistic number of Australian tourists who visited Phuket in years 2015 and 2014

Nationalities of tourist	2015	2014
Australian	244,086	258,797

Source :Tourism Authority of Thailand Intelligence Center, 2016.

The proportion of sampling was designed according to the Tourism Authority of Thailand Intelligence Center, 2016 .The sampling proportion of this research was design by using Yamane's tool.

The sample sizes

Calculated population of this study

According to Yamane Taro)1967 (tool for calculating sample size

is Formula
$$N = \frac{N}{1 + N(e)^2}$$

Where n: Sample size

N: Size of the target population of Australian who come to

Phuket in the year 2015)Phuket international airport immigration only (

e :Inconsistency from sampling at 95 %confidence level

$$N = 1 + 244,086(0.05)^2$$

$$n = 400$$

The study population consisted of Australian tourist participants in Phuket and tourists who had entered Phuket restaurants or have had experience of food in restaurants around Phuket were requested to complete the 400 questionnaires .The convenience sampling method technique was utilized to make certain that every Australian tourist had a chance of being involved in the data collection .Ages below eighteen years old were avoided or the responses made invalid if found after questionnaire completion .

3.2 Questions design

The questionnaire was designed as the survey instrument and the research tools were a self-administrated English questionnaire. In this research it comprised of four parts as follows :

First part: demographic profile

The first part was concerned with general questions about sex, age, education, occupation, monthly income and experience over the past 3 years .

Second part: was comprised of twenty-nine items of food risk perception of Australian tourist holidaying in Phuket which were adapted from Chang S, (2007), Amuquandoh, F, (2011) such as communication factors, psychology factor, social factors, health risk and

sanitary and value risk factors, five-point scale was employed in this part, for which the scale was strongly disagree to strongly agree.

Third part :investigated the overall food risk perception, after that an independent variable questionnaire that asked the tourist to rate the overall degree of risk associated with food consumption .In this part a five -point scale was used to measure the variable, the scale between 1 meaning not risky at all to 5 meaning a very high risk.

Fourth part :investigated the overall food satisfaction, the last part asked the tourist to indicate their level of satisfaction with the food experience during their holiday in Phuket and concluded with a comment or opinion from the respondents .It used a five-point Linkert scale to measure, the scale of 1-5 was used where 1 means very dissatisfied, 2 means dissatisfied, 3 means neutral, 4 means satisfied and 5 means very satisfied.

General Question

Table 3.2 General questions

Construct	Questions
Personal profile	Gender
	Age
	Education
	Occupation
	Monthly income
Travel Experiences	1 .Approximately, including this trip how many overseas trips have you been on in the past 3 years?Trips)s(
	2 .Is this your first time in Thailand? <input type="checkbox"/> Yes, this is my first time <input type="checkbox"/> No. Number of previous visit (s)..... .3Is this your first time in Phuket?
	3 .Is this your first time in Phuket? <input type="checkbox"/> Yes, this is my first time <input type="checkbox"/> No. Number of previous visit (s).....

Table 3.3 Variable and scale of food risk perception

Variable	Measurement	Scale
<u>Communication factor</u>	1. Difficulty in identifying local foods has prevented me from taking the local food	
	2. Difficulty in ordering local dishes discourage me from taking Thai food	
	3. Lack of competence in the local language discourage me from local food	
	4. Suspicious of being cheated discourage me from patronizing foods	
	5. I worry I might get something not what I want due to misunderstanding menu	Five-point scale were employed which is 1 =
	6. I worry there will be communication problems while dining	strongly agree, 2 = disagree, 3 =
	7. It is important that staff at restaurants could speak the same language as mine	indifference/neutral, 4 = agree and 5 = strongly
<u>Psychology factor</u>	8. I worry shopkeepers would cheat me because I am not a local	agree
	9. I worry that taste of the food is not what I expected	
	10. A tour guide is very important if I need to communicate with people while I am traveling	
	11. I would rather spend money on the food I am familiar with	
	12. It is hard to find food which is suitable me	
	13. I would buy the type of food that most people would buy	

Table 3.3 Continued

Variable	Measurement	Scale
Social factor	14. I worry relatives and friends may dislike food or souvenirs I bought for them	
	15. I worry about using the cutlery improperly while I am eating	
	16. I worry others would be influenced by my attitude on food	
	17. I consider what people whose opinion I value would think if dined in an establishment that was considered improper or of a low standard	Five-point scale were employed which is 1= strongly agree,2= disagree,3= indifference/neutral,4= agree
Health risk factor and sanitary	18. Potential health problems are a concern	and 5 = strongly agree
	19. I may get sick from food I am not familiar with	
	20. There is a possibility of contracting infections disease while dining out	
	21. Fear of illness deter from eating local food	
	22. Suspicious of chemical present in the food discourage me from eating local food	
	23. I avoid local foods because of my uncertainly of their nutritious value	
	24. The stories and experiences of friends and relative discourage me from local food	
	25. Too much litter around eating places deter me from eating local food	

Table 3.3 Continued

Variable	Measurement	Scale
	26. Uncovered food and bottles discourage me from eating local food	Five-point scale were employed which is 1= strongly agree,2= disagree,3= indifference/neutral,4= agree and 5 = strongly agree
	27. Presence of flies and other insects deter me from eating local food	
Value risk	28. I worry whether there is value for money	
	29. I have concerns about spending money on buying some food I do not know.	

3.3 Measurement scale of overall food risk perception

Table 3.4 Overall Food risk perception

Variable	Measurement	Scale
Overall food risk perception	Risk associated with food consumption during your holiday in Phuket	Five –point scale where 1 means very risky and 5 means not risky

3.4 Measurement scale of overall food risk perception

Table 3.5 Level of Food satisfaction

Variable	Measurement	Scale
Food satisfaction	Satisfaction with your food experience	Five –point scale where 1 means very dissatisfied and 5 means very satisfied

Previous researchers have studied and conducted segmentation research. Doinicar (2004), Jang et al 2002, Andriotis et al 2008, Hudson, S. (2000). Andriotis et al 2008 found statistical difference based on gender, marital status and ages. In contrast for education and income there were no differences in tourist's perception. A Study of Asian and non-Asian by Bauer found that Asian traveller seem to seek entertainment facilities and Non-Asian seem to seek health facilities. Segmentation of tourist has often been based on geography, as Australian are the direct data of this study to segment them will be based on food risk perception

Cluster analysis has been utilized for segmentation of tourists in various of studies. The main findings of segment Australian tourists can help sellers or management identify opportunities to improve and develop services in a better way for both seller and consumer.

K-means cluster analysis was used to divide the sample into meaningful sub-groups. Also, K-means that carried out 29 food risk perception variables were used. Cases and statements were grouped by cluster analysis. In this study from 5 factors of those which previous researchers grouped into 7 factors. One cluster was group name. Furthermore, cross tabulations with χ^2 tests were used, and Cramer's V was calculated in order to identify the strength of the relationship.

3.5 Data collection

The survey was conducted at Phuket international airport and the data was collected by using questionnaires asking Australian who visited to Phuket and had already had actual experiences of the food or restaurants in Phuket. The questionnaires distribution was conducted between 10.00 to 22.00, as many flights take off to Australian both direct and connected flights.

Initially, the data was collected at Patong Beach in some restaurants, at the beach and the O-Top area as it has an area of small restaurant for dining and drinking, shops for shopping and bars mostly operated by Australians (Phuket.com/phuket-magazine/OTOP-market.htm#), however due to the low level of respondents and the lack of interesting to fill-in the question while relaxing at the beach or eating at the restaurant, the researcher decided to change the data collection site to Phuket airport where it was found that they respondents were more willing to help.

3.6 Validity and reliability

A pilot test or pre -test questionnaire was used to measure the accuracy of variables .Thepre-testwascollected before actual data collection in September using 30 Australian tourists to verify any misunderstanding of the questionnaire or any difficulty to understand .The pre-test was collected at Phuket airport on 8th of September 2017 between 12.00to 15.00, the resulted of the pilot test was in total 30 samples and it found that there was some mistyping in some words and sections that required to be adjusted .The pre-test was tested to achieve a Cronbach alpha .Greater than 0.70 was set to make certain that the reliability and validity of the questionnaire was acceptable .The test of reliable coefficient showed a high correlation for each variable, more than 0.488 or between 0.488 -0.904for all variables. In conclusion the reliability of this study was a high priority of this research

3.7 Data analysis

The results were interrupted by using the SPSS program, the analysis of data was based on descriptive statistics using: percentage, mean, and standard deviation.

In part one of the demographic: it reported about the respondent profile such as gender, age, education, occupation and income. The t-test statistical analysis was employed to compare the means of two variables for one group, for this study they were used to compare socio-demographic data such as gender (1= Male, 2= Female), age. Moreover, to test the hypothesis, a significant level was measured at $p=0.5$ or hypothesis is accepted, otherwise it was null. Furthermore, the past experience variable: the resulted represented the average times an Australian travelled for the last 3 years and how frequently traveling to Thailand and Phuket. The t-test was used to compare the differences of perceived food risk in Phuket of the first visitors and the repeat visitors.

In the second part, the variables of food risk perception Bartlette's test and KMO were applied to access factorability of the data. The second step was factors analysis. Before the

cluster analysis were taken the validity of the data were tested by Bartlette's test and KMO. Bartlette's test and KMO were applied to access factorability of data. Twenty-nine food risk perception were item factor analyzed using the principal component method. In this research, all factors with eigen values greater than 1 were retained, as it were considered significant. All factors with less than 1 were discarded. K Means cluster analysis was used to divide the sample into meaningful sub-groups. Also, K-means carried out 29 food risk perception variables were used. Cases and statements were grouped by cluster analysis. In this study from 5 factors of previous researchers can groped into 7 factors. Once cluster were grouped they were named. Furthermore, Cross tabulations with χ^2 tests were used, and ANOVA was calculated in order to identify a significant level.

The third part, used independent variables to investigate the level of food risk perception of Australians while holidaying in Phuket, using the overall of food risk perception in Phuket to answer the first question of this study

The final part was another independent, this part was to investigate the overall of food satisfaction in Phuket, to answer the first question of this study which is to what extent does food risk perception influence food satisfaction?

CHAPTER 4

Results

This study has revealed the perspectives of Australian tourists on destination food consumption and the major factors affecting food choices for tourist .

This chapter will present the findings from the survey which was divided into 5 parts, consisting of the demographics profiles of tourists travelling to Phuket, Australian seeking novelty at the destination, food risk perception during travelling to Phuket, risk associated with food consumption during holidaying at Phuket and satisfaction of the food experience .This study was conducted by using a quantitative study comprising of a closed-ended and an open-ended parts to gather the tourist's opinion.

A total of 417 responses were returned, 9 of the responses were incomplete and 8 of responses were completed by under eighteen years old .Hence, both set of incomplete data were eliminated. The result of the 400 respondents presents the relationships between Novelty-Seeking, Food Risk Perception and Food Satisfaction by using a statistical analysis program to interpret the data.

At the end of the quantitative study questionnaire was the suggestion and comment section for respondents to complete, the repeated comments were counted and reported by frequency analysis .The result shown how Australian tourists think about food while travelled in Phuket due to the question format :

4.1 Demographic profile of Australian tourists traveling in Phuket

Table 4.1 Sample characteristics :frequency and percentage distribution of the respondents .

	Frequency	Percent	N
Group			400
Australian tourist	400		
Gender			400
Male	174	43.5	
Female	226	56.5	

Table 4.1 Continued

	Frequency	Percent	N
Age			400
18-24	56	14.0	
25-34	92	23.0	
35-44	55	13.8	
45-54	84	21.0	
55-64	67	16.8	
65 or above	44	11.0	
Missing	2	0.5	
Education			400
Up to secondary school	47	11.8	
High school	131	32.8	
Diploma	103	25.7	
Bachelor	74	18.5	
Master's degree	25	6.3	
Doctoral degree	7	1.8	
Missing	13	3.3	
Occupation			400
Administrative/Managerial	74	18.5	
Others	69	17.3	
Technician/Professional	55	13.8	
Self-employed	49	12.3	
Retiree	48	12	
Government	41	10.3	
Business owner	23	5.8	
Student	23	5.8	

Table 4.1continued

	Frequency	Percent	N
Housewife	15	3.8	
Missing	3	0.8	
Monthly income (Australian Dollar)			400
below 1,000	23	5.8	
1,000-1,999	32	8	
2,000-2,999	36	9	
3,000-3,999	89	22.3	
4,000-4,999	74	18.5	
5,000-5,999	36	9	
6,000-6,999	39	9.8	
7,000-or higher	53	13.3	
Missing	18	4.5	

Gender

The respondents were asked if they were male or female .All of the individuals responded to this question .Table 4.1.of this study shows that the mostindicated gender within the sample were female 226 or 56.5 % and 174 or 43.5 %were male .

Age

The respondents were asked to indicate their age and the largest group age was 25-35 at 23 percent, second was 45-54 at 21 percent, third was 55-64 at 16 percent,fourth was 18-24 at 14 percent, fifth was 35-44 at 13 percent and the lowest group age was 65years old or above at 11.0 percent.

Education

Most of the respondents had an education level of high school (32.8 percent) followed by diploma (25.7 percent), bachelor's degree (18.5 percent), up to secondary School (11.8 percent), master's degree (6.3 percent) and doctoral degree (1.8 percent)

Occupation

As shown in Table 4.1.2 most respondents are administration or managerial (18.5 percent) followed by others opened-ended occupation (17.3percent), technical professional (13.8 percent), self-employee (12.3 percent), government (10.3 percent), business owner and student were the same percentage in this study (5.8 percent) and the lowest was housewife (3.8 percent).

Monthly income

The majority of individual respondents 'income showed that the highest percentage of monthly income was between 3,000-3,999 AUD at 22.3 percent, followed by 4,000-4,999AUD at 18.5 percent, 7,000 or above at 13.3 percent, 6,000-6,999 AUD at 9.8 percent and having equal percentage and ranked fifth formonthly income werebetween 2,000-2,999 and 5,000-5,999 at 9 percent and finally 1,000-1,999 and below 1,000 at 5.8 percent .

4.2 Travel Experiences

Table 4.2 Respondentexperience :descriptivestatistics.

Descriptive Statistics		
	Mean	Std .Deviation
Number of international trips in the last three years	2.83	2.219

Experience

Table 4.2 shows that the number of international trip in the last three years the Australian respondents travelled average was 2.83 times.

The frequency and percentage of the Australian tourists coming to Thailand for the first time was more than those who hadvisited Thailand before, of which the first time to Thailand was 55.8 percent or 223 respondents and had visited Thailand before was 177 respondents or 44.3 percent as reported in Table 4.3 .

Table 4.3 Is this your first time in Thailand?

Is this your first time in Thailand?	N	percent
Yes	223	55.8
No	177	44.2
Total	400	100.0

Table 4.4 Number of times visiting Thailand

Number of times visiting Thailand	Frequency	Percent
1	56	14.0
2	38	9.5
3	27	6.8
4	12	3.0
5	10	2.5
6	3	.8
7	6	1.5
8	3	.8
9	1	.3
10	10	2.5
12	1	.3
Total	167	41.8
Repeater/Not answer	233	58.3
Total	400	100.0

Table 4.5 Is this your first time in Phuket?

Is this your first time in Phuket?	N	percent
Yes	259	64.8
No	141	35.2
Total	400	100

Table 4.6 Number of times visiting Phuket

Number of times visiting Phuket	Frequency	Percent
1	56	14.0
2	33	8.3
3	17	4.3
4	9	2.3
5	4	1.0
6	5	1.3
7	1	.3
8	3	.8
10	2	.5
20	1	.3
Total	131	32.8
Repeater/Not answer	269	67.3
Total	400	100.0

To be more explicit of the specific frequency and percentage of visitors to Phuket the research indicated that the 259 Australian tourists had visited Phuket for the first time at 64.8 percent and 141 had visited and had experienced Phuket before at 35.2 percent

Table 4.3 and Table 4.5 illustrate that on average Australian tourist had visited Thailand one time and also visited Phuket Island for one time prior to this latest visit .

4.3 Risk perception regarding food

In this study, risk perception with relationship to food consisted of five factors Communication, Psychology, Social, Health Risk and Sanitary, and Value. According to Chapter 3, it mentioned there were 29 variables adapted and employed in this study (Chang S, (2007), Amuquandoh, F, (2011) in order to discover the food risk perception in Phuket

Table 4.7 Overall mean and standard deviation of food risk perception regarding Australian tourist holidaying at Phuket Thailand

variable	Strongly disagree	2	3	4	Strongly agree	mean	std
Difficulty in identifying local foods has prevented me from taking the local food	14.3	34.5	18	26.3	6.9	2.76	1.19
Difficulty in ordering local dishes discourage me from taking Thai food	16.4	43.8	17.2	17.2	5.4	2.5	1.11
Lack of competence in the local language discourage me from local food	12.5	46.1	17.8	17.2	6.4	2.59	1.098
Suspicious of being cheated discourage me from patronizing foods	13.5	38.5	26.8	16.7	4.5	2.61	1.051
I worry I might get something not what I wanted due to misunderstanding menu	6.4	30	29.4	25.7	8.5	3	1.072
I worry there will be communication problems while dining	5.6	36.1	28.9	24.4	5	2.86	1.003
It is important that staff at restaurants can speak the same language as me	5.6	24.9	30.2	30.5	8.8	3.11	1.043
I worry shopkeepers would cheat me because I am not a local	3.7	30	30.5	26.3	9.5	3.08	1.04
I worry that taste of food is not what I expected	5.8	31.8	29.4	26.1	6.9	2.95	1.042
A tour guide is very important if I need to communicate with people while I am travelling	6.6	29.4	26.8	27.1	10.1	3.04	1.115
I would rather spend money on the food I am familiar with	7.2	33.4	27.1	26.5	5.8	2.91	1.052
It is hard to find food which is suitable me	13.8	43.2	22.3	15.4	5.3	2.56	1.072
I would buy the type of food that most people would buy	4.2	24.9	37.4	25.7	7.8	3.09	0.992
I worry relatives and friends may dislike food or souvenirs I bought for them	15.6	40.3	27.2	13.5	3.4	2.48	1.03

Table 4.7 Continued

variable	Strongly disagree	2	3	4	Strongly agree	mean	std
I worry about using the cutlery improperly while I am eating	18.6	42.7	23.6	12.7	2.4	2.37	1
I worry others would be influenced by my attitude on food	18.6	44	25.5	10.3	1.6	2.33	0.954
I consider what people whose opinion I value would think if dined in an establishment that was considered improper or of a low standard	18.3	42.7	21.5	14.9	2.6	2.43	1.042
Potential health problems are a concern	4.5	19.4	21	40.1	15	3.41	1.094
I may get sick from food I am not familiar with	3.4	18.3	24.7	41.9	11.7	3.38	1.029
There is a possibility of contracting infections disease while dining out	5	21.5	32.9	33.4	7.2	3.15	1.012
Fear of illness deter from eating local food	7.7	30.8	26.8	26.2	8.5	2.97	1.11
Suspicious of chemicals present in the food discourage me from eating local food	10.1	36.6	25.5	19.8	8	2.79	1.114
I avoid local foods because of my uncertainly of their nutritious value	17.5	44.8	20.4	11.1	6.2	2.42	1.089
The stories and experiences of friends and relative discourage me from local food	12.5	45.6	20.2	17.5	4.2	2.56	1.051
Too much litter around eating places deters me from eating local food	6.1	26.3	18.8	37.9	10.9	3.2	1.137
Uncovered food and bottles discourage me from eating local food	1.3	10.9	19.6	43.8	24.4	3.77	0.993
Presence of flies and other insects deters me from eating local food	1.3	8.2	20.2	43.8	26.5	3.85	0.96
I worry whether it is value for money	8.8	40.3	26.8	16.7	7.4	2.74	1.065
I have concerns about spending money on buying some food I do not know.	10.3	43	27.3	16.5	2.9	2.62	0.985

Table 4.7 reported summary statistic of the mean and stand deviation of all variables. This finding showed the mean value regarding to food risk perception during a holiday at Phuket were between 2.33-3.84 (rankings were measured by a five-points Linkert scale, from 1 to five, where 1 meant very disagree to 5 meaning strongly agree. The highlight of food risk perception is the sanitation risk factor with the highest mean at 3.85, std. deviation 1.114 which is “Presence of flies and other insects deters me from eating local food” followed by ‘Uncovered food and bottles discourage me from eating local food’ (3.76 mean std.deviation = 1.11), Potential health problems are a concern (mean 3.41, std. deviation = 1.094), I may get sick from food I am not familiar with (mean 3.38, std. deviation = 1.029) , Too much litter around eating places deters me from eating local food (mean 3.20, std. deviation = 1.137), There is a possibility of contracting infections disease while dining out (mean 3.15, std. deviation = 1.012) , It is important that staff at restaurants can speak the same language as me (mean 3.11, std. deviation = 1.043), I would buy the type of food that most people would buy (mean 3.04, std. deviation = 0.992) , I worry shopkeepers would cheat me because I am not a local (mean 3.8, std. deviation = 1.040) , A tour guide is very important if I need to communicate with people while I traveling (mean 3.04, std. deviation = 1.115) , I worry I might get something not what I wanted due to misunderstanding the menu (mean 3.00, std. deviation = 1.072) , Fear of illness deters me from eating local food (mean 2.97, std. deviation = 1.110) , I worry that taste of food is not what I expected (mean 2.95, std. deviation = 1.052) , I worry there will be communication problems while dining (mean 2.86, std. deviation = 1.003) , Suspicious of chemicals present in the food discourage me from eating local food (mean 2.79, std. deviation = 1.114) , Difficulty in identifying local foods has prevented me from taking the local food (mean 2.7, std. deviation = 1.1190) , I worry whether it is value for money (mean 2.74, std. deviation = 1.065) , I have concerns about spending money on buying some food I do not know. (mean 2.62, std. deviation = 0.985) , Suspicious of being cheated discourage me from patronizing foods (mean 2.61, std. deviation = 1.051) , Lack of competence in the local language discouraged me from local food (mean 2.59, std. deviation = 1.098) , It is hard to find food which is suitable me (mean 2.56, std. deviation = 1.072) , The stories and experiences of friends and relative discouraged me from local food (mean 2.56, std. deviation = 1.051) , Difficulty in ordering local dishes discouraged me from taking Thai food (mean 2.50, std. deviation = 1.110) , I worry relatives and friends may dislike food or souvenirs I bought for them (mean 2.48, std. deviation

=1.030) ,I consider what people whose opinion I value would think if dined in an establishment that was considered improper or of a low standard (mean 2.43, std. deviation =1.042) ,I avoid local foods because of my uncertainly of their nutritious value (mean 2.42, std. deviation =1.089) ,I worry about using the cutlery improperly while I am eating(mean 2.37, std. deviation =1.000), and The lowest rating in food risk perception fell with in social risk factors as the lowest mean at 2.33 std. deviation 0.992)

Table 4.8 Overall the degree of risk associated with food consumption and the overall level of satisfaction with the food experience during a holiday at Phuket

	Mean	Std .Deviation
Overall degree of risk associated with food consumption during your holiday in Phuket	3.65	0.839

Note: independent variables were measured on a five-point Linkert scale 1 to (1 = not risk at all, 2 = risk, 3 = neutral/medium risk, 4 = high risk and 5 =very risky)

Table 4.9 Overall level of satisfaction with your food experience during a holiday at Phuket

Independent factors	Mean	Std .Deviation
Level of satisfaction with your food experience during your holiday at Phuket	4.07	0.764

Note: independent variables were measured on a five-point Linkert scale 1 to (1 = not risk at all, 2 = risk, 3 = neutral/medium risk, 4 = high risk and 5 =very risky)

According to Table 4.8 all of the Australian tourist indicated the independent variable of overall degree of risk associated with food consumption during your holiday in Phuket by using the five-points Linkert scale of 1 means not risky to 5 means very risky. The result of the study showed that the overall of risk associated with food consumption during your holiday at Phuket was 3.65, meaning that the Australian tourists had a perceived risk score between medium risk to high risk .Furthermore, in Table 4.9 independent variables were used to indicated the overall degree of risk associated with food consumption during holidaying at Phuket, these variable used a five-point Linkert scale, where 1 meant very dissatisfied to 5 meaning very

satisfied, the results showed the traveller were satisfied with their food experience based on the average mean level of 4.07.

Table 4.10 Overall mean and rank of food risk perception

Items	Mean	Level of risk	Rank
Presence of flies and other insects deter me from eating local food	3.85	medium risk	1
Uncovered food and bottles discourage me from eating local food	3.77	medium risk	2
Potential health problems are a concern	3.41	medium risk	3
I may get sick from food I am not familiar with	3.38	medium risk	4
Too much litter around eating places deter me from eating local food	3.2	medium risk	5
There is a possibility of contracting infections disease while dining out	3.15	medium risk	6
It is important that staff at restaurants can speak the same language as me	3.11	medium risk	7
I would buy the type of food that most people would buy	3.09	medium risk	8
I worry shopkeepers would cheat me because I am not a local	3.08	medium risk	9
A tour guide is very important if I need to communicate with people while I am travelling	3.04	medium risk	10
I worry I might get something not what I want due to misunderstanding menu	3	medium risk	11
Fear of illness deters me from eating local food	2.97	Low risk	12
I worry that the taste of food is not what I expected	2.95	Low risk	13
I would rather spend money on the food I am familiar with	2.91	Low risk	14
I worry there will be communication problems while dining	2.87	Low risk	15
Suspicious of chemicals present in the food discourages me from eating local food	2.79	Low risk	16
Difficulty in identifying local foods has prevented me from taking the local food	2.76	Low risk	17

Table 4.10 Continued

Items	Mean	Level of risk	Rank
I worry whether it is value for money	2.74	Low risk	18
I have concerns about spending money on buying some food I do not know	2.62	Low risk	19
Suspicious of being cheated discourages me from patronizing foods	2.61	Low risk	20
Lack of competence in the local language discourages me from local food	2.59	Low risk	21
The stories and experiences of friends and relative discourages me from local food	2.56	Low risk	22
It is hard to find food which is suitable for me	2.56	Low risk	23
Difficulty in ordering local dishes discourages me from taking Thai food	2.5	medium risk	24
I worry relatives and friends may dislike the food or souvenirs I bought for them	2.48	medium risk	25
I consider what people whose opinion I value would think if I dined in an establishment that was considered improper or of a low standard	2.43	medium risk	26
I avoid local foods because of my uncertainly of their nutritious value	2.42	medium risk	27
I worry about using the cutlery improperly while I am eating	2.37	medium risk	28
I worry others would be influenced by my attitude on food	2.33	medium risk	29

The variables used a 0.40 factor loading as suggested by Hair et al. (1998) to obtain a power of 80%, 0.40 and above is required a 0.05 significance level. Moreover, Kaiser-Meyer-Olkin (KMO) suggested that ranges from 0 to 1 are acceptable and the Bartlett's test scale should be significant ($p < 0.05$) and the results by using the KMO and Bartlett's tests show that the KMO index was 0.864 and index of the Bartlett's test was significant at 0.000, meaning that the results were strongly accepted and fit for this study to do a factorability test of factor analysis.

Table 4.11 Food risk perception factors

Factors	Factors loadings	Eigen value	Variance explained(%)	Alpha
Communication		8.31	28.66	0.822
I worry shopkeepers would cheat me because I am not a local	0.714			
I worry there will be communication problems while dining	0.699			
I worry that taste of food is not what I expected	0.684			
It is important that staff at restaurants can speak the same language as me	0.653			
I worry I might get something not what I want due to misunderstanding menu	0.586			
A tour guide is very important if I need to communicate with people while I am travelling	0.559			
Health		2.94	10.16	0.841
Fear of illness deter from eating local food	0.792			
I may get sick from food I am not familiar with	0.753			
There is a possibility of contracting infections disease while dining out	0.753			
Suspicious of chemicals present in the food discourages me from eating local food	0.749			

Table 4.11 Continued

Factors	Factors loadings	Eigen value	Variance explained(%)	Alpha
Potential health problems are a concern	0.628			
I avoid local foods because of my uncertainty of their nutritious value	0.606			
Social		2.11	7.3	0.862
I worry others would be influenced by my attitude on food	0.866			
I worry about using the cutlery improperly while I am eating	0.844			
I worry relatives and friends may dislike the food or souvenirs I bought for them	0.777			
I consider what people whose opinion I value would think if I dined in an establishment that was considered improper or of a low standard	0.711			
Local food familiar		1.655	5.7	0.863
Difficulty in ordering local dishes discourages me from taking Thai food	0.852			
Difficulty in identifying local foods has prevented me from taking the local food	0.827			
Lack of competence in the local language discourages me from local food	0.785			
Suspicious of being cheated discourages me from patronizing foods	0.589			

Table 4.11 Continued

Factors	Factors loadings	Eigen value	Variance explained(%)	Alpha
Sanitation		1.53	5.28	0.711
Uncovered food and bottles discourages me from eating local food	0.792			
Presence of flies and other insects deters me from eating local food	0.771			
Too much litter around eating places deters me from eating local food	0.749			
Unfamiliar food		1.03	4.49	0.733
I would buy the type of food that most people would buy	0.692			
I would rather spend money on the food I am familiar with	0.674			
It is hard to find food which is suitable for me	0.642			
Value		1.185	4.086	0.655
I have concerns about spending money on buying some food I do not know	0.622			
I worry whether it is value for money	0.598			

An evaluation of the literature review and previous research found 5 dimensions of risk and food risk perception, however, this finding can be generated into 7 dimensions. A clear resulted of factors attributed of food risk perceptions in Phuket were groups of 7 factors and explained a total of variance which represented the 7 factors at 65.70 %of all variances.

Factor analysis generated tourist segmentation into 7 factors, then renamed them into new factors and each factor had different attributes such as factors 1 :Communication factor consisted of 6 variables, factor2 :Health factor consisted of 6 variables, factors3 :Social factor consisted of 4 variables, Factor 4 :Local food knowledge consisted of 4 variables, factor 5 :

Sanitation factor consisted of 4 variables, factors 6 :Unfamiliar food consist of 3 variables, and factor7 :Value factor consisted of 2 variables.

Table 4.12 overall mean for each factor

Variables	Number of Items	Mean	Std .Deviation
Factor 1 :Communication	6	3.01	0.77
Factor 2 :Health	6	3.02	0.80
Factor3 :Social	4	2.41	0.84
Factor4: Local Food Knowledge	4	2.61	0.94
Factor5 :Sanitation	4	3.35	0.76
Factor 6 :Unfamiliar Food	3	2.85	0.84
Factor7 :Value	2	2.68	0.89

Five -point Linkert scales were used to measure all of the dependent variables .

The coefficient alpha scores were tested to achieve the Cronbach alpha and all of variable ranging between *0.655-0.863 are reported in Table 4.14. Nunnally (1978)* suggested that the reliabilities of factor should be 0.70 or higher is acceptable, however, the value factors demonstrated a Cronbach alpha of less than 0.70, the score was 0.655, but the scale was deemed acceptable (Pallant, 2013), as its inter-item-correlation high at .488. The highest tested Cronbach alpha should be considered as it had greater impact on the food risk perceptions for Australian tourist

4.4 Exploring the different tourist groups food risk perception

Travelling is exploring new experiences however travelers have to make decisions regarding risks, handling risks or avoiding risks of unexpected events when they are travelling.

This research studied Australian tourists who travelled to Phuket and have had experiences of food in Phuket .This study divided the tourists into 3 groups low risk tourists, medium tourists and high-risk tourists .

For this study, low perceived risk tourists meant a group of tourists that have a low level of concern to the food risk when they are travelling .

Medium perceived risk means tourists who neither have a low concern of food nor have high concern of food .

High perceived risk means tourists that are very concern to have or try food when they are travelling

Table 4.13 Cluster analysis of the Australian tourists regarding food risk perception at Phuket

	N	%
Low Perceived risk	164	43.50%
Medium Perceived risk	143	37.90%
High Perceived risk	70	18.60%
Total	377	100.00%

The result of the factor analysis generated the data of the 377 Australian respondents into 3 groups of Australian tourists which are 1 .Low perceived risk group N =164, Medium perceived risk N =143 and 3 High perceived risk group n=70.

Table 4.14 Segmentation of food risk perception

Factor	Mean			F	Sig.	post hoc)Tukey(
	low perceiv ed risk	medium perceive d risk	high perceiv ed risk			
Difficulty in identifying local foods has prevented me from taking the local food	2.17	2.92	3.85	70.61	0.00	L#M,L#H,M#H
Difficulty in ordering local dishes discouraged me from taking Thai food	1.89	2.57	3.82	121.11	0.00	L#M,L#H,M#H
Lack of competence in the local language discouraged me from local food	2.06	2.52	3.94	113.61	0.00	L#M,L#H,M#H
Suspicious of being cheated discouraged me from patronizing foods	2.02	2.73	3.68	92.82	0.00	L#M,L#H,M#H

Table 4.14 Continued

Factor	Mean			F	Sig.	post hoc)Tukey(
	low	medium	high			
	perceived risk	perceived risk	perceived risk			
I worry I might get something not what I want due to misunderstanding the menu	2.43	3.16	3.98	75.46	0.00	L#M,L#H,M#H
I worry there will be communication problems while dining	2.29	3.10	3.75	81.61	0.00	L#M,L#H,M#H
It is important that staff at restaurants can speak the same language as mine	2.68	3.23	3.91	42.19	0.00	L#M,L#H,M#H
I worry shopkeepers will cheat me because I am not a local	2.65	3.14	3.94	47.33	0.00	L#M,L#H,M#H
I worry that the taste of food is not what I expected	2.42	3.09	3.93	74.76	0.00	L#M,L#H,M#H
A tour guide is very important if I need to communicate with people while I am travelling	2.47	3.22	4.01	67.78	0.00	L#M,L#H,M#H
I would rather spend money on the food I am familiar with	2.26	3.13	3.94	105.08	0.00	L#M,L#H,M#H
It is hard to find food which is suitable for me	1.95	2.56	3.91	143.26	0.00	L#M,L#H,M#H
I would buy the type of food that most people would buy	2.78	3.07	3.77	28.1	0.00	L#H,M#H
I worry relatives and friends may dislike the food or souvenirs I bought for them	2	2.62	3.34	58.18	0.00	L#M,L#H,M#H
I worry about using the cutlery improperly while I am eating	1.83	2.56	3.27	75.50	0.00	L#M,L#H,M#H
I worry others would be influenced by my attitude on food	1.78	2.53	3.15	83.19	0.00	L#M,L#H,M#H

Table 4.14 Continued

Factor	Mean			F	Sig.	post hoc)Tukey(
	low perceived risk	medium perceived risk	high perceived risk			
I consider what people whose opinion I value would think if dined in an establishment that was considered improper or of a low standard	1.87	2.55	3.35	72.54	0.00	L#M,L#H,M#H
Potential health problems are a concern	3.17	3.51	3.8	9.37	0.00	L#M
I may get sick from food I am not familiar with	3.13	3.47	3.87	14.26	0.00	L#M
There is a possibility of contracting infections disease while dining out	2.87	3.28	3.58	15.16	0.00	L#M,L#H
Fear of illness deters from eating local food	2.5	3.17	3.64	35.38	0.00	L#M,L#H,M#H
Suspicious of chemicals present in the food discourages me from eating local food	2.34	2.91	3.57	36.85	0.00	L#M,L#H,M#H
I avoid local foods because of my uncertainly of their nutritious value	1.96	2.48	3.42	58.18	0.00	L#M,L#H,M#H
The stories and experiences of friends and relative discourages me from local food	2.01	2.74	3.42	63.81	0.00	L#M,L#H,M#H
Too much litter around eating places deters me from eating local food	2.85	3.36	3.72	18.03	0.00	L#M,L#H,
Uncovered food and bottles discourages me from eating local food	3.56	3.86	4.15	10.14	0.00	L#M
Presence of flies and other insects deters me from eating local food	3.69	3.94	4.07	4.88	0.01	
I worry whether it is value for money	2.1	3.08	3.5	73.76	0.00	L#M,L#H,M#H
I have concerns about spending money on buying some food I do not know	2.06	2.89	3.18	57.06	0.00	L#M,L#H

The purpose of this stage was to find out if the different clusters have different ranking of perceiving food risk perception among the variables. Linkert scale was employed for this stage by using a 1-5 scale. Cluster analysis showed a different cluster indicated a difference in ranking of agreement.

Table 4.15 Comparison of mean and ranking between factors of food risk perception

Factors of food risk perception	Low perceived Risk			Medium perceived risk			High perceive drisk		
	Rank	Mean	STD	Rank	Mean	STD	Rank	Mean	STD
Sanitation	1	3.04	0.73	1	3.48	0.69	3	3.85	0.61
Health	2	2.67	0.68	3	3.14	0.73	5	3.65	0.76
Communication	3	2.49	0.6	2	3.16	0.55	1	3.93	0.51
Unfamiliar Food	4	2.33	0.63	5	2.93	0.65	2	3.88	0.57
Value	5	2.09	0.66	4	2.99	0.73	6	3.34	0.82
Local Food Knowledge	6	2.04	0.66	6	2.69	0.72	4	3.83	0.65
Social	7	1.87	0.52	7	2.57	0.72	7	3.28	0.82

This stage was to find out if each cluster indicated a different level of agreement of factors in food risk perception.

The first group of tourist represented tourists who indicated a low perceived risk level in food risk perception, which the score of the initial cluster centres reported between 1.87-3.04 for all variables

The second group of tourists represented tourist who indicated high perceived risk level in food risk perception, which the score of the initial cluster centres reported between 2.93 3.93-for all variables.

Third groups of tourists represented tourist who indicated a medium perceived risk level in food risk perception, which the score of the initial cluster centres reported between 2.69-3.48 for all variables.

For Table 4.15 addition of more ranking factors regarding food risk perception group of low perceived risk in food risk perception indicated that the sanitary factor range was in

the highest perceived risk level (Mean 3.03). Which was the same range as the group of medium perceived risk that indicated that sanitation was the highest perceived risk among their factors and also the medium perceived risk group had more concerned than the low risk group as the mean was higher than low perceived sanitation risk mean (3.48:3.04). In contrast in high perceived risk group, the report found that the high perceived risk group had less concern of sanitation than communication. The score means show that the high perceived risk group were concerned about communication the most, as the results show the highest mean at 3.93 and for sanitation they fell into the third level among the variable of high perceived risk.

However, all of three group of tourists indicated that the social factor had not much influence on food risk perception while travelled in Phuket, according to the results they indicated the lowest score among the 3 groups (Low perceived risk mean value =1.87, High perceived risk mean value =3.28, and medium perceived risk mean value = 2.56)

Table 4.16 Comparison of the mean score of food risk perception across the 3 groups of Australian tourists travelled in Phuket Thailand

Factors	Mean			F	P
	Low perceived risk	Medium perceived risk	High perceived risk		
Communication	2.5	3.16	3.92	165.93	0.00
Health	2.67	3.14	3.65	49.54	0.00
Social	1.87	2.56	3.28	118.76	0.00
Local Food Knowledge	2.04	2.68	3.82	170.25	0.00
Sanitation	3.03	3.47	3.84	37.32	0.00
Unfamiliar Food	2.33	2.92	3.87	149.6	0.00
Value	2.08	2.98	3.34	99.23	0.00

Based on the results in Table 4.16, they show that the three groups of Australian tourists have different perceived food risks during their holiday in Phuket, in the details of each factor. Overall, the differences of perceived food risk across the 3 groups of Australians were measured by using ANOVA or a one-way analysis of variance, as reported in Table 4.18 all of the

factors in this study were significant among the 3 groups. Ranges of F value were employed to identify which ranging from 37.32-170.25 and p value of 0.00.

Table 4.17 Comparing the means of risk associated with food consumption among the clusters .

Factor	Mean			F	p
	Low perceived risk	Medium perceived risk	High perceived risk		
Risk associated with food consumption	2.23	2.48	2.43	3.75	024.
N	164	143	70		

There was no significant difference between the groups of low perceived, high perceived and medium perceived risk according to the independent of overall risk associated with food ($P = 0.24$)

According to the report from Table 4.17 the group of low perceived risk indicated a mean value at 2.23 and the group of high perceived risk indicated at 2.43, while the medium perceived risk indicated a mean value at 2.48,

This explains that the group of low perceived risk found that there were no significances with the group of high perceived risk as the mean value difference was 0.20 $p = .222$, the group of high perceived risk had no significances to the medium perceived group as the mean value difference was 0.05 $p = .897$ and low perceived risk and medium perceived risk was found to be insignificant as the mean value difference was 0.25 $p = 0.23$

Table 4.18 Overall degree of Satisfaction among clusters

Independent	Mean			F	P	post hoc
	Low	Medium	High			
	perceived risk	perceived risk	perceived risk			
Satisfaction of your food experience	4.31	4.02	3.64	22.21	0.00	L>M, M<H, L>H

Linkert -Scale from 1 dissatisfied ,2distisfierd, neutral 4 satisfied and 5 vary satisfied

Table 4.18 shows that the level overall of the 3 groups of clusters analysis indicated the food at different levels, as the low perceived risk indicated that food's level of satisfaction was very high at 4.31 out of 5 followed by the medium perceived risk group indicated a food satisfaction score of 4.02 out of 5 and the high-perceived risk group indicated less than previous two groups at 3.64 out of 5

As Table 4.6reported multiples comparisons to compare the independent variable of overall satisfaction attributes of the 3 Australian groups. It was found that all of three groups had differences of satisfaction as following:

The group of low perceived risk had the highest mean value of overall satisfaction at 4.31 and was significant with the group of high perceived risk and medium perceived risk, where the high perceived risk group had a value at 4.02 and the medium risk group had a value at 3.64. A statistically significant difference at $p = 0.00$. It explains that the group of low perceived risk had a significance at $p=0.00$ with the group of high perceived risk and a mean difference of 0.29. The group of low perceived risk was significant at $p=0.01$ with group of medium perceived risk and mean difference was 0.49. The group of high perceived risk had significance at $p=0.01$ with the group of medium perceived risk and a mean difference of 0.38. In conclusion, events though all of the groups had significance in terms of the indicated level of satisfaction but overall the satisfaction level had a high mean value of 4.07according to the result of Table 4.9.

4.5 Summary clusters analysis of perceived food risk perception in Phuket

Cluster 1 :Low perceived food risk

Negative food risk perceptions (high mean value)

- 1 Presence of flies and other insects deters me from eating local food
- 2 Uncovered food and bottles discourages me from eating local food
- 3 Potential health problems are a concern
- 4 I may get sick from food I am not familiar with
- 5 There is a possibility of contracting infections disease while dining out

Positive food risk perceptions (low mean value)

- 1 It is hard to find food which is suitable for me
- 2 Difficulty in ordering local dishes discourage me from taking Thai food
- 3 I consider what people whose opinion I value would think if dined in an establishment that was considered improper or of a low standard
- 4 I worry about using the cutlery improperly while I am eating
- 5 I worry others would be influenced by my attitude on food

The first cluster: Low risk perceived food risk

Low perceived food risk represents 43.50%(n=165) of the sample, meaning that cluster 1 is the largest segment of food risk perception. This cluster had a low level of food risk perception in Phuket for each factors of food risk perception, it was found that this cluster had the lowest mean value of the clusters, moreover, in overall food satisfaction it expressed the highest level of food satisfaction in Phuket when comparing the three clusters. In addition, this cluster found that they were concerned the most in sanitation while having food in Phuket especially the statement of ‘Presence of flies and other insects deters me from eating local food’

Cluster2 :Medium perceived food risk

Negative food risk perception (high mean value)

- 1 Presence of flies and other insects deters me from eating local food
- 2 Uncovered food and bottles discourages me from eating local food
- 3 Potential health problems are a concern
- 4 I may get sick from food I am not familiar with
- 5 Too much litter around eating places deter me from eating local food

Positive in food risk perception (low mean value)

- 1 I avoid local foods because of my uncertainly of their nutritious value
- 2 Lack of competence in the local language discourage me from local food
- 3 I worry others would be influenced by my attitude on food
- 4 I consider what people whose opinion I value would think if dined in an establishment that was considered improper or of a low standard
- 5 I worry about using the cutlery improperly while I am eating

The second cluster :medium perceived food risk

Medium perceived food risk represented 37.93% (n=143) This cluster had medium mean value of food risk perception when compared in three clusters, however, in overall food satisfaction in Phuket the study found that their satisfaction indicated as high satisfaction of the food. For this cluster, it was found that the most concern they had about food risk perception was sanitation, which was the same as the group of low perceived food risk or cluster 1, however, the lowest concern of this cluster was 'I avoid local foods because of my uncertainly of their nutritious value'

Cluster 3 :High perceived food risk

Negative food risk perception (high mean value)

- 1 Uncovered food and bottles discourages me from eating local food
- 2 Presence of flies and other insects deters me from eating local food

A tour guide is very important if I need to communicate with people while

- 3 I am travelling
- 4 I worry I might get not what I want due to misunderstanding the menu
- 5 Lack of competence in the local language discourages me from local food

Positive in food risk perception (low mean value)

- 1 I consider what people whose opinion I value would think if dined in an establishment that was considered improper or of a low standard
- 2 I worry relatives and friends may dislike the food or souvenirs I bought for them
- 3 I worry about using the cutlery improperly while I am eating
- 4 I have concerns about spending money on buying some food I do not know
- 5 I worry others would be influenced by my attitude on food

The third cluster: medium perceived food risk

The last cluster perceived food risk represented 18.57% (n=70), this cluster was the smallest of all the clusters but showed the highest mean value in food risk perception in Phuket. Furthermore, their satisfaction of food was the lowest compare within the three group, however, it was still positive as they indicated medium / neutral satisfaction. The highest concerned in food risk perception of this cluster was about communication factors especially the statement 'Uncovered food and bottles discourages me from eating local food' had the highest mean value.

Table 4.19 Socio demographic characteristics of the clusters

Demographic	low	medium	high	Cramer's	sig
	perceived risk (n=164)	perceived risk(n=143)	perceived risk (n= 70)		
gender	%	%	%		
Male	46.96	41.43	39.86	0.67	0.204
Female	53.04	58.57	60.14		

Table 4.19 Continued

Demographic		low	medium	high	Cramer's	sig
		perceived risk (n=164)	perceived risk(n=143)	perceived risk (n= 70)		
Age					1.66	0.001
	18-24	9.8	21.1	10		
	25-34	19	23.9	32.9		
	35-44	14.1	14.8	8.6		
	45-54	25.8	19.7	15.6		
	55-64	19.6	13.4	18.6		
	64>	11.7	7.1	14.3		
Education	Up to secondary school	11.1	11.8	14.7	0.93	0.792
	High School	33.3	30.9	36.8		
	Diploma	28.4	29.4	20.6		
	Bachelor's degree	20.4	18.4	20.6		
	Master's degree	4.9	8.8	4.4		
	Doctoral degree	1.9	0.7	2.9		
Occupation					0.239	0.184
	Business owner	7.4	7	1.4		
	Administrative/Managerial	19.6	12	26.2		
	Self-employed	14.1	12.7	8.7		
	Government	11.7	12.6	4.3		
	Technician/Professional	12.9	15.5	14.5		
	Student	1.2	11.3	5.8		
	Housewife	3.7	0	10.1		
	Retiree	14.7	9.9	11.6		
	Others	14.7	19	17.4		
Monthly income (AUD)	below 1,000	5.1	6.7	5.6	0.105	0.68
	1,000-1,999	8.3	8.9	8.1		
	2,000-2,999	10.2	8.1	9.5		
	3,000-3,999	22.3	25.9	23.7		

Table 419. Continued

Demographic		low	medium	high	Cramer's	sig
		perceived risk (n=164)	perceived risk(n=143)	perceived risk (n= 70)		
	4,000-4,999	17.2	14.8	18.4		
	5,000-5,999	10.8	9.6	9.7		
	6,000-6,999	10.8	11.2	10.2		
	7,000 or higher	15.3	14.8	14.8		
The first time to Thailand	Yes	50.6	54.3	60.8	0.93	0.72
	NO	49.4	45.7	39.2		
The first time to Phuket	Yes	62.2	62.9	67.8	0.55	0.309
	NO	37.8	37.1	32.2		

Overall, in gender it was found that females have concerns of the food risk more than men, however, they were insignificant among gender. The members of low perceived food risk showed that ages between 45-55 had the highest share among the segments at 25.8%. They also had education in high school and most were Administrative/Managerial (19.6%) having earned a salary of around 3000-3999 AUD (22.3%) and most had visited Thailand for the first time (50.6%), also visiting Phuket for the first time to (62.2%). In this cluster, low perceived food risk, not only indicated food as a low risk and the overall food risk of medium risk associated with food, they also had the highest satisfaction of food at Phuket, 4.31 out of 5 according to the five-point Likert scale 1-5 (1 = very dissatisfied, 2 = dissatisfied, 3 neutral, 4 = satisfied, 5 = very satisfied).

For the medium perceived food risk, young tourist with ages between 25-34 were the highest proportion of this segment, most having high school education level (30.9%) and most had occupations as Technician/Professional (12.9%) and earned an income of between 3,000-3,999 AUD (25.9%) and were travelling for the first time to Thailand (54.3%) similar as first time to Phuket (62.9%). This cluster, medium perceived food risk indicated food in-between medium perceived food risk to low risk and high risk in this cluster had slightly less satisfaction of the food than the low perceived food risk cluster but still had a high level for food satisfaction in

Phuket (4.02 out of 5 according to the five-point Likert scale 1 -5 (1 = very dissatisfied, 2= dissatisfied, 3 neutral, 4= satisfied,5 = very satisfied).

The last cluster, high perceived food risk young traveller ages 25-35 years had the highest share. This cluster had the most educated in high school (36.8%) and had occupations in Administrative/Managerial the most (26.2%),also they earned an income between 3,000-3,999 AUD and this was the first time in Thailand (60.8%) similar as the first time to Phuket (67.8%). This cluster indicated the least satisfaction when comparing the three clusters, however, it was still in level of medium /neutral satisfaction of food in Phuket

To conclude, the result showed that tourists who seem to have low risk also seem to have more satisfaction of food. In contrast, tourists who have high risk seem to have less satisfaction of food when compared among overall food satisfaction.

Food risk perception had a significant difference between ages,it appears elderly have less concern about food than young people, according to the results.

CHAPTER 5

Discussion

This study is the conclusions of research, this chapter is divided into a five-part summary of the key findings, discussion limitations and suggestions of further study

5.1 Conclusion of the main findings

This samples size of the research is 400 Australian tourists who travelled to Phuket and had already had experiences about the cuisine or food. The conclusion of the data was divided into 5 parts included demographic characteristics of the respondents, past experience over the last three years, food risk perception, overall food risk perception, and overall food satisfaction.

5.1.1 The demographic characteristics of the respondents

The majority of the respondents were female (56.5 percent) and aged between 25-34 years old. The main education level of the respondents was high school (32.8percent), followed up by. The large proportion of respondents were administration or managerial (18.5 percent) and most ofthe respondents had monthly income between 3,000-3,999 AUD (22.3 percent).

5.1.2 Past experience of Australian tourists

The majority of tourist had never been to Thailand before (55.8%) and only 44.2% had visited Thailand prior to this current visit. For Phuket, most indicated they had never visited Phuket before and this was the first time to Phuket (64.8%). The average number of international trips for Australians in this study was 2.88 times.

5.1.3 Food risk perception

5.1.3.1 Comparison of food risk perceptions in Phuket by gender

The results of the focus between female and male suggests that different genders perceive different factors of risk.The trend for healthy food makes people concerned about their health and make them more careful of what they eat.

According to T-Test analysis used to compare the difference between genders in this study, it found that women seem to be slightly more concerned about food risk perception

than male. However, the overall degree of satisfaction, both male and female, indicated that food was a medium risk.

In conclusion, only two factors clearly showed that female and male had a different perception about food while travelled in Phuket, of which the female seemed to be more concerned and recognized food risk perception more than the male while travelling in Phuket.

5.1.3.2 Comparison of food risk perceptions in Phuket by age

The conclusion in the section draws regarding risk perception of food in Phuket by age. There were 7 factors, addressing independent sample multiple comparison analysis to compare the differences between the 6 age groups which were 18-24-years, 25-34 years, 35-44 years, 45-54 years, 55-64 years and 65+.

The result showed that all of the groups had an indicated level of food risk perception, ranging between low risk level, medium risk level and medium to high risk. Surprisingly, there was one age group that perceived factor 3: *Social factor* to be different which was group 45-54 years, it indicated social factor as a medium risk with a mean value higher than the group 24-35 which ranged it at a low risk level.

There was no significant difference perception of the other factors such as factor 1: Communication factor, factor 2: Health, factor 4: Local food knowledge, factor 5: Sanitation, factor 6 Unfamiliar food and factor 7: Value.

The age group 45-54 recognized the social factor at a medium risk level, but the others group indicated that social factor fell into the low risk level.

5.1.3.3 Comparison of food risk perceptions by education level

This section reports the conclusion regarding tourist perception on food risk by education level. Almost every occupation fell into the low risk perception except the clusters.

5.1.3.4 Comparison of food risk perceptions by occupation

Conclusion for occupations found that Business Owner, Administrative / Managerial, Self-employed, Government, Housewife, and Retiree indicated in the low risk group and technician, student and others occupation fell into the medium risk group.

5.1.3.5 Comparison of food risk perceptions by monthly income

All incomes fell into the low risk group, however, an income between 3,000-3,999 AUD fell into low risk and medium risk equally. All of the income groups seem less

concerned about food as most of tourist indicated in the low risk and the overall percentage that fell into high risk group was only 18.7 % .

5.1.3.6 Comparison of food risk perceptions by first time visiting Thailand

The question asked the tourist to indicate the time(s) to Thailand or has the tourist been in Thailand before. We found that there was a difference between first time tourist and repeater tourist to food risk perception. For the first-time tourist it was found that they indicated food as a medium risk and for the repeater tourist it mostly fell into the low risk.

However, both groups indicated a reduced percentage in the high risk.

Repeater tourist 41.8% were in the medium risk group, 39.9% are in the low risk group and for high-risk only 18.3%

First time tourist indicated that 47.9 % fell into the low risk group, 33.1 % fell into the medium risk group and 18.9% fell into the high risk group. In conclusion of comparison of food risk perception for first time tourists and repeater tourists in Thailand found that the majority of repeater tourists in Thailand perceived the food risk level at medium risk and the majority of first time tourists in Thailand perceived the food risk level at low risk.

5.1.3.7 Comparison of food risk perceptions by first time visiting Phuket

For the first-time tourist the resulted show that there was no difference to first time tourists or repeater tourist perception on food in Phuket. According to the result it showed that the tourist majority are in the low perceived risk group compared to the medium risk and high-risk groups.

Repeater tourist 42.0% are in medium risk, 39.9% are in low risk and for the high-risk group was only 18.1%

First time tourist indicated that 46.3 % fell into the low risk group, 34.3 % fell into the medium risk and 19.4 % fell into high risk group

In conclusion, clearly first time tourists or repeater tourists in Phuket perceived food at the low risk level.

5.1.4 Risk perception regarding food satisfaction in Phuket

The current study comprised of five dimension of overall food risk perception which are Communication, Psychology, Social, Health and Value. However, from previous research by using cluster analysis the data can generated seven dimensions which are

Communication, Health, Social, Local food knowledge, Sanitation, Unfamiliar food and Value. The questionnaires comprised of twenty-nine items representing the dependent variables and rated by using the five-point Likert scale: strongly disagree, disagree, neutral/indifference, agree, and strongly agree. Furthermore, the questionnaires asked 2 independent questions about overall food risk perception and overall food satisfaction during travelling in Phuket.

Overall, the variable of food risk perception showed that in all averages tourists have a high concern about sanitation. However, by using cluster analysis, in the 3 groups of travellers, it was found that only one group indicated in low risk and medium reported that they disagree that sanitation is the highest concern of food risk perception but communication is. This supports Chang's study (2007), that individuals perceive a higher level of overall risk when they travel to international destination where it is not their native language.

The results of this study show that Australian tourists who travelled to Phuket agree that the levels of food risk such as I worry others would be influenced by my attitude on food (Mean =2.33), I worry about using the cutlery improperly while I am eating (Mean =2.37), I avoid local foods because of my uncertainty of their nutritious value (Mean =2.42), I consider what people whose opinion I value would think if I dined in an establishment that was considered improper or of a low standard (Mean =2.43) and I worry relatives and friends may dislike the food or souvenirs I bought for them (Mean = 2.48). The average shown most of the variable are in Social factors, meaning that keeping up the good work to maintain low risk level.

Focusing on food risk perception as a medium risk, Australians perceived as a medium risk, according to the result shown, that eleven items fell into medium risk. Of which the highest medium risk concern was the Presence of flies and other insects deters me from eating local food (Mean = 3.85), followed by Uncovered food and bottles discourages me from eating local food (Mean 3.77), Potential health problems are a concern (Mean =3.41), I may get sick from food I am not familiar with (Mean =3.38), Too much litter around eating places deters me from eating local food (Mean =3.20), There is a possibility of contracting infectious disease while dining out (Mean = 3.15), It is important that staff at restaurants can speak the same language as me (mean = 3.11), I would buy the type of food that most people would buy (mean 3.04), I worry shopkeepers would cheat me because I am not a local (mean 3.8), A tour guide is very important if

I need to communicate with people while I am travelling (mean 3.04), I worry I might get something other than what I want due to misunderstanding the menu (mean 3.00).

All of the 29 dependents overall mean of the items has shown the average was 2.4 out of 5 according to the five-point Likert scale: strongly disagree, disagree, neutral/indifference, agree, and strongly agree, this means that the scale of agreement of the seven factors was low risk. However, the dependent variable of overall degree of food risk perception was 3.65 by using the five-point Likert scale: no risk to very risky found that tourist indicated in the medium risk level. Furthermore, food satisfaction still fell in the satisfied level according to the scale of 5 (1 strongly dissatisfied to 5 very satisfied) while experiencing a holiday in Phuket.

In conclusion, overall Australian tourists indicated food as being a concern at the level of low to medium risk. Phuket needs to focus on this average level of medium risk to decrease the level of perception in order to make Australian tourist more willing to try and have more experiences in food at Phuket.

5.2 Summary of the three Australian clusters

Given the detail of food risk perception contained in this study is the first attempt to generate three different groups of tourists for in depth understanding of Australian tourists who travel to Phuket. It provides a detailed analysis of food risk perception and food satisfaction when holidaying in Phuket, Thailand and also describes the demographics such as gender, age, education, occupation, monthly income and past travel experiences. Furthermore, this study explores group differences in food risk and food satisfaction. The findings of this study provide useful information for managers and local businesses specially restaurants, local food shops and hospitality businesses in developing their gastronomic products.

The perception of the general food risk, the majority of the respondent fell into low risk awareness in food risk perception (43.50%), followed by medium food risk awareness (37.90%), thus 18.60% of them had encountered high risk awareness where they have decided food in Phuket were too risk to try. Apparently, tourists fell into low risk however they still had high risk level in some of factors involving food, also the medium group and high-risk group had differences in agreement of some factors as follows.

Table 5.1 Summary of clusters analysis regarding food risk perception in Phuket

3 Clusters of food risk perception of Australian tourists	Low perceived risk group of tourists	Medium perceived group of risk tourist	High perceived risk group of tourists
Demographics	<p>More female had higher risk than male.</p> <p>Most age 44-54year were in high school.</p> <p>Most incomes were between 3000-399 AUD</p>	<p>More female had higher risk than male more in age in group 25-34 year .</p> <p>More were at high school level, most were retirees and others occupation.</p> <p>Most incomes were between 3000-3999 AUD .</p>	<p>More female had higher risk than male, more in age group 25-34 year, more were at diploma level, most were administrative /Managerial</p> <p>Most incomes were between 4999-4000AUD</p>
Experience of travelling	<p>Most were travelling in Thailand and Phuket for the first time</p>	<p>Most were travelling in Thailand and Phuket for the first time</p>	<p>Most were travelling in Thailand and Phuket for the first time</p>
Factor of risk perception in food overall	<p>concerned the most about sanitation but the indicated level of risk was in medium risk</p>	<p>concern the most about sanitation but indicated level of risk was in medium risk</p>	<p>concern the most about communication and concern least about social</p>

Table 5.1 Continued

3 Clusters of food risk perception of Australian tourists	Low perceived risk group of tourists	Medium perceived group of risk tourist	High perceived risk group of tourists
Ranking of food risk perception factors by clusters			
1	Highest concern in Sanitation	Highest concern in Sanitation	Highest concern in Communication
2	Health	Communication	Unfamiliar food
3	Communication	Health	Sanitation
4	Unfamiliar food	Value	Knowledge of local food
5	Value	Unfamiliar food	Health
6	Knowledge of local food	Knowledge of local food	Value
7	Least concern in Social factor	Least concern in Social factor	Least concern in Social factor
Risk associated with food consumption	low risk 2.23	low risk 2.48	low risk 2.43
Satisfaction with your food experience	satisfied 4.31	medium satisfied/neutral 3.64	satisfied 4.02

5.3 Conclusion

5.3.1 The relationship between past experiences and food risk perception

Experience is where we created memories and ideas of some situation and those memories help us to make the decision of whether to return or avoid the same places in the future. This section draws a conclusion of the Australians' past experiences and food risk perception. These were compare between first time tourist and repeater tourist visiting Phuket and Thailand.

The result indicated that there is no relationship between past experience and food risk perception, for the first-time tourist in Thailand and repeater tourist both indicated a level of food risk in the low level, indicating that food experience is not important to perception of

food risk. Tourist who had never experienced food in Thailand before were still satisfied with the food as were the repeater tourists and most of them indicated that food is not a risk that is dependent on experience.

It can say, that even though we might have bad food experiences the that last time that we have visited, however a new place/restaurant but same kind of food may will create a better experience and the brain will forgive for those unfortunate experiences that happened before (Chinnakkaruppan et al.2014).

5.3.2 The relationship between gender and food risk perception

As health trend is increasing, male and female have different way to take care of their health. In thus study it was found that females seem to be concerned about food risk perception more than males, however, in some factors such as familiar with local food and the value factor it was found that males had more concerned. As a social trend, male and female are encouraged to have different concerns such as males are concerned about physical exercise and need to eat more than females, but females seem to be concerned about dieting or sliming more than hard exercise. These trends can make individual person have difference needs.

5.3.3 The relationship between age and food risk perception

The age that was found to be most concerned about risk was the 18-24 age group and the age group that indicated food to be the least concern were 64 and above.

It is assumed that the younger age groups have not had much experience or are just starting to gain experience or explore the world and this makes them worry about the experiences that they are about to have. Compared to the elderly, who have gained a lot of experience and leant about it so they have less concern about what they are facing, maybe because they have leant and know how to deal with the situation. This study found that the elderly have less concern when compare to younger ages.

5.3.4The relationship between food risk perception and food satisfaction

Even though the tourist indication was dependent on food risk perception the questionnaires returns were in the satisfied level, however, in clusters it was found that the low risk group of tourists were satisfied about food the most with an average mean at 4.31 and for the medium risk group event they had concerns about food but after having had experience of food in Phuket they found that food had a high level of satisfaction as the average mean was still high at

4.02 out of 5. For the high risk group concerns of food found that they indicated food as neutral or medium satisfied. This average could have happened because they tried food less in Phuket as they had food concerns.

Previous studies of Nield et., al (2000); Chi et.,al(2008);Santouridis and Trivellas(2010) show that the overall satisfaction of a travel experience is a major antecedent of revisit intention, the findings of three studies found that the majority are satisfy with the food. We predict that they will revisit and local restaurants and managers should be preparing for returning tourist and other consumer.

5.4 Discussion

5.4.1 To examine the food risk perceptions of Australian tourists in Phuket.

Perceived risk is a powerful tool to investigate consumer purchasing behaviour Mitchell and Geatorex(1993), this research ideally supports previous researchers as different groups have different perceptions about food risk. Overall, this study found that Australian tourists perceived food risk as low level and were satisfied overall of the food.

In examining tourists food risk perception and to identify segments of tourists level of perceived risk, we identified that each group or segment of tourists had extra attention about food in some statement and in which each cluster had identified differences.

This study found evidence that food risk perception influenced food satisfaction, each cluster of the study indicated different levels of food risk. The low perceived risk group seems to enjoy and be satisfied the most with the food. This finding shows overwhelming that tourists do not worry or perceive a high risk of food during their travelling in Phuket. However, not only does a low perceived risk need to be recognized, it necessary to examine tourists who perceive a medium and high risk in food to understand the reason why they have concerns and how this can help implement specific marketing measures to decrease the level of high perceived food risk and increase their satisfaction of food in Phuket

5.4.2 To categories Australian tourists into difference group based on their food risk perception benefits regarding Phuket Island.

Cluster analysis generated the tourist into three groups and found that those three groups had perceived food risk perception and food satisfaction at different levels. The three

groups perceived risk differently as low perceived risk, medium perceived risk and high perceived risk. Low perceived risk seems to give high satisfaction for food and is less concerned about food risk, the medium perceived risk group have medium/ neutral satisfaction for food and have medium risk concerns about food, the last group is the high perceived risk group they are satisfy with the food event though they have high perceived risk concerns. It is clear that even though tourists have concerns about food, however, after they have experience of the food they are still satisfy with food.

Despite the low risk group of Australian tourists having indicated that they were satisfied with the food and it was better than the other groups, when compared to the medium risk and high-risk group it showed the highest score. It appears that all of them were willing to take a risk or they did not seem scared or worried about food while they are travelling

For the group of medium risk that indicated food in medium risk, it was found that this group had satisfaction of the food. They might have had concerns about the food but still want to have food experiences.

In contrast, the group of tourists that were very concerned about food and indicated that food in Thailand, and specifically in Phuket, are high risk, the study found that food they had less satisfaction with food, because they had never or had less experience about food, this made them feel less satisfied than other groups

In conclusion, novelty seeking makes people dare to do or try to do something or have some experiences that they have never tried before and that could make them find something different in this case food in Thailand or in Phuket. Australian tourists found that that they were satisfied with the food, even though they had never experienced Thai food before and the food in Thailand or Phuket were a medium risk that did not give them concerns. Furthermore, it was found that past experience has no influence on food risk perception.

5.4.3. To profile different groups of Australian tourists based on their food risk perception targeted by the information of each groups

These finding are about clusters associated to the socio -demographics with food risk perception while traveling in Phuket.

Firstly, the results revealed significant differences in the clusters of the 3 groups in food risk perception. In addition, it was found that the low risk group of Australians has a better perception of food risk while travelling in Thailand.

Not every factor found that females had concerns with food risk perceptions more than males. It may be for some parts of the attributes that males are more concerned with their body than females such as familiar with local food and value.

Differences between genders have different expectations and perceptions of food and that influences food risk perception. There was no difference in overall food satisfaction level between genders and ages, but in factor details we can see that in gender females seem to be more concerned about weight and diet more than males.

Age differences include specific concerns about nutrients such as children need more food and vitamins or carbohydrate or protein than the elderly and seniors need to control food or limit eating fat. Furthermore, different needs influence the level of food risk perception.

We postulated, that changes in consumer awareness of food risk perception influence food satisfaction.

5.5 Recommendations

In addition, according to the *Phuket Hotels Association* it is *expecting a 5-7* percent per year increase of the number of international passenger's arrivals at Phuket International Airport. Especially, Australian tourists who will spend time in Phuket and eating food is unavoidable, if most of tourists perceive less risk of eating local food it could bring more benefit to the local people and more food experiences to the tourist as well.

This dissertation included only Australian tourists in measuring food risk perception at the Phuket destination. Investigation of individual tourists from other countries may find or produce different levels of food risk perception.

5.6 Limitations of this study

The first study comprised of previous research then included more attributes. Those attributes include more specific details of the tourists. These findings were utilized to create further details for the study.

A number of limitations of the study can be recognized, even so it does not necessarily mean these limitations invalidate the findings.

A few of the limitations of this research are concerns about sample size, the representativeness of respondents between gender and age of the total population, further research could select a sample size based on a group gender of male and female and different-based groups of young people and senior groups and compare their existing knowledge, novelty seeking destination and existing knowledge towards food risk perception when travelling to Phuket, Thailand. A sample of more diverse nationalities will expand the knowledge and understanding of consumers' food risk perceptions more in food tourism research.

5.7 Future studies

Despite the interesting findings, future research may use a mixed method of quantitative and qualitative techniques to explore and approach data collection to understand more of tourists' attitude toward food risk perception in the area of foodie tourism or gastronomy tourism. This study compared female and male Australian tourists and clusters groups of tourists, it suggests that in the future comparison of genders or clusters should be conducted with similar socioeconomic background as it would at least allow for more level field of comparison.

The current study examined peoples' food risk perception but was not concerned about food preferences. It would be quite interesting for future studies to incorporate other food risk theories in their testing. As rapidly growing markets for food products with enhanced safety attributes, a future survey could attribute to specific preferences from the tourist such as food style to influences of food choice, or food preferences and food choices when they are travelling.

BIBLIOGRAPHY

- A. Chinnakkaruppan, M. E. Wintzer, T. J. McHugh, K. , (2014). Rosenblum. Differential Contribution of Hippocampal Subfields to Components of Associative Taste Learning. *Journal of Neuroscience*, 34(33), 11007
- Adam, Issahaku. (2015). "Backpackers' Risk Perceptions And Risk Reduction Strategies In Ghana". *Tourism Management*, 49, 99-108.
- Aliwassa Pathnadabutr, (2016) "Changing Trends in Two Major Contributors To Phuket Economy". Retrieved March 1, 2017. from <https://www.cbre.co.th/en/News/Article/Changing-Trends-in-Two-Major-Contributors-to-Phuket-Economy>
- Andriotis, K., Agiomirgianakis, G., & Mihiotis, A. (2008). Measuring tourist satisfaction: A factor-cluster segmentation approach. *Journal of Vacation Marketing*, 14(3), 221-235.
- Blešić, Ivana et al. (2014). "An Importance-Performance Analysis Of Service Quality In Spa Hotels". *Economic Research-Ekonomska Istraživanja* 27, 483-495.
- Bon, M., & Hussain, M. (2010). Halah Food and Tourism: Prospects and Challenges. In N. Scott & J. Jafari (Eds.), *Tourism in the Muslim World: Bridging Tourism Theory and Practice*. Bingley: Emerald Group Publishing.
- Boniface, P. (2003). *Tasting tourism: traveling for food and drink new directions in tourism analysis*. Ashgate : London.
- Bryant, B., & Morrison, A. (1980). Travel market segmentation and the implementation of market strategies. *Journal of Travel Research*, 18(4), 2–8.
- Buchler, S., Smith, K., & Lawrence, G. (2010). Food risks, old and new Demographic characteristics and perceptions of food additives, regulation and contamination in Australia. *Journal of Sociology*, 46(4), 353–374.
- Chang, R. C. Y., Kivela, J., & Mak, A. H. N. (2010). Food preferences of Chinese tourists. *Annals of Tourism Research*, 37(4), 989-1011.
- Chang, R. C. Y., Kivela, J., & Mak, A. H. N. (2011). Attributes that Influence the Evaluation of Travel Dining Experience: When East meets West. *Tourism Management*, 32(2), 307-316.

- Chang, Shu-yun (2007) A cross cultural comparison of food preferences employing risk perception and novelty seeking influences. Retrieved March 1, 2017. from <https://researchonline.jcu.edu.au/11942/>
- Claudia Arganini, Anna Saba, Raffaella Comitato, Fabio Virgili and Aida Turrini (2012). Gender Differences in Food Choice and Dietary Intake in Modern Western Societies Public Health – Social and Behavioral Health Retrieved March 1, 2017. from <https://www.intechopen.com/books/public-health-social-and-behavioral-health/gender-differences-in-food-choice-and-dietary-intake-in-modern-western-societies>
- Cohen, E. (1972). Toward a sociology of international tourism. *Social research*, 164-182.
- Cohen, E., & Avieli, N. (2004). Food in Tourism: Attraction and Impediment. *Annals of Tourism Research*, 31(4), 755-778.
- Cohen, E.; Avieli, N. (2004). Food in tourism: Attraction and Impediment. *Ann. Tour. Res.* , 31, 755–778.
- Collins, E., & Oddy, D. J. (1998). The centenary of the British Food Journal, 1899-1999—changing issues in food safety regulation and nutrition. *British Food Journal*, 100(10/11), 433-550.
- Crompton, J. L. (1979). Motivations of pleasure vacation. *Annals of Tourism Research*, 6, 408–424.
- Crouch, Geoffrey I and J.R.Brent Ritchie. (1999). "Tourism, Competitiveness, And Societal Prosperity". *Journal of Business Research*, 44.3, 137-152.
- Czinkota, M. R., & Ronkainen, I. A. (2003). An international marketing manifestoes. *Journal of International Marketing*, 11(1), 13-27.
- Dann, G. M. (1977). Anomie ego-enhancement and tourism. *Annals of Tourism Research*, 4(4), 184–194.
- Davis, D., Allen, J., & Cosenza, R. (1988). Segmenting local residents by their attitudes, interests and opinions towards tourism. *Journal of Travel Research*, 27(3), 2–8.
- Dolničar, S. (2004). Beyond “commonsense segmentation”: A systematics of segmentation approaches in tourism. *Journal of Travel Research*, 42(3), 244-250.
- Executive, S. (2006). *Nutritional guidance for early years: food choices for children aged 1–5 years in early education and childcare settings*. Edinburgh: Scottish Executive.

- Frank, R. E., Massey, W. F., & Wind, Y. (1972). *Market segmentation*. Englewood Cliffs : Prentice Hall.
- Vereijken, C. M. J. L. (2011). Consumer response to novel agri-food technologies: Implications for predicting consumer acceptance of emerging food technologies. *Trends in Food Science & Technology*, 22(8), 442-456.
- Frewer, L.J., et al., (2016). Risk/benefit communication about food – a systematic review of the literature. *Journal Critical Reviews in Food Science and Nutrition*, 56(10), 1728 – 1745.
- Gaivoronskaia, G., and B. Hvinden. (2006). "Consumers With Allergic Reaction To Food: Perception Of And Response To Food Risk In General And Genetically Modified Food In Particular". *Science, Technology & Human*, 31(6), 702-703.
- Garbarino, E., & Strahilevitz, M. (2004). Gender differences in the perceived risk of buying online and the effects of receiving a site recommendation. *Journal of Business Research*, 57(7), 768-775.
- Gaztelumendi, I., 2012. Global trends in food tourism. Madrid: WTO World Tourism Organization.
- Goyal, Anita, and N.P. Singh. (2007) "Consumer Perception About Fast Food In India: An Exploratory Study". *British Food Journal*, 109(2), 182-195.
- Green, H., McGinnity, Á., Meltzer, H., Ford, T., & Goodman, R. (2005). Mental health of children and young people in Great Britain, New York : Ashford Colour Press.
- Hall, M.; Sharples, L.; Mitchell, R.; Macionis, N. and B. Cambourne(2003). *Food tourism around the world: development, management and markets*. Oxford : Butterworth-Heinemann.
- Hansen, J., Holm, L., Frewer, L., Robinson, P., & Sandøe, P. (2003). Beyond the knowledge deficit: recent research into lay and expert attitudes to food risks. *Appetite*, 41(2), 111–121.
- Hauser, M., Jonas, K., & Riemann, R. (2011). Measuring salient food attitudes and food-related values. An elaborated, conflicting and interdependent system. *Appetite*, 57(2), 329–338.
- Hellberg, R. S., DeWitt, C. A. M., & Morrissey, M. T. (2012). Risk-benefit analysis of seafood consumption: A review. *Comprehensive reviews in food science and food safety*, 11(5), 490-517.
- Henderson, J C. (2009), "Food tourism reviewed", *British Food Journal*, 11(4), 317-326

- Hjalager, A.M. and Richards, G. (2002a). *Still undigested: research issues in tourism and gastronomy*. London :Routledge.
- Hjalager, Anne-Mette. (2015). "Scholarly Creativity And Contributions To The Development In Tourism And Gastronomy: The Nature Of Editorial Coincidence". *Journal of Gastronomy and Tourism* 1(1), 1-4.
- Ignatov, Elena and Stephen Smith. "Segmenting Canadian Culinary Tourists". *Current Issues in Tourism* 9.3 (2006): 235-255.
- Jang, S., Morrison, A. M., & O'Leary, J. T. (2004). A procedure for target market selection in tourism. *Journal of Travel and Tourism Marketing*, 16(1), 17–31
- Jiménez-Beltrán, Francisco, Tomás López-Guzmán, and Francisco González Santa Cruz. (2016). "Analysis Of The Relationship Between Tourism And Food Culture". *Sustainability* 8(5), 418.
- Kaplan, L. B., Szybillo, G. J., & Jacoby, J. (1974). Components of perceived risk in product purchase: A cross-validation. *Journal of applied Psychology*, 59(3), 287.
- Kaptan, G., Fischer, A. R., &Frewer, L. J. (2017). Extrapolating understanding of food risk perceptions to emerging food safety cases. *Journal of Risk Research*, 1-23.
- Kim, Y. G., Eves, A., &Scarles, C. (2009). Building a Model of Local Food Consumption on Trips and Holidays: A Grounded Theory Approach. *International Journal of Hospitality Management*, 28, 423-431.
- Knox, Barbara. (2000). "Consumer perception and understanding of risk from food." *British medical bulletin* 56(1) 97-109.
- Kudahl, A. B., & Nielsen, S. S. (2009). Effect of par a tuberculos is on slaughter weight and slaughter value of dairy cows. *Journal of Dairy Science*, 92(9), 4340-4346.
- Li, J., Li, N., Luo, L., & Ren, Y. (2016). Segmentation of Chinese parents based on food risk perception dimensions for risk communication in rural area of Sichuan province. *British Food Journal*, 118(10), 2444-2461.
- Lofstedt, R. (2013). Communicating Food Risks in an Era of Growing Public Distrust: Three Case Studies. *Risk Analysis*, 33(2), 192–202.
- Loker-Murphy, L., & Perdue, R. (1992). A benefit-based segmentation of a nonresident summer travel market. *Journal of Travel Research*, 31(2), 30–35.

- Lukovitz, K. 2015. "Kraft Rolls out Recipe Hub, Content Marketing Program For 'Strapped' Consumers," *Marketing Daily*, March 10, available at
- Mak, A. H., Lumbers, M., Eves, A., & Chang, R. C. (2012). Factors influencing tourist food consumption. *International Journal of Hospitality Management*, 31(3), 928-936.
- Marriott, N. G., Schilling, M. W., & Gravani, R. B. (2018). *Principles of food sanitation*. Springer.
- Mazursky, D. (1989). Past experience and future tourism decisions. *Annals of Tourism Research*, 16(3), 333-344.
- McKercher, Bob, Okumus, Fevzi and Okumus, Bendegul, 2008. Food Tourism as a Viable Market Segment: It's All How You Cook the Numbers, *Journal of Travel & Tourism Marketing*, 25(2), 137-148.
- Mo, C., Havitz, M., & Howard, D. (1994). Segmenting travel markets with the international tourism role (ITR) scale. *Journal of Travel Research*, 33(2), 24-30
- Morgan, M. G., Fischhoff, B., Bostrom, A., & Atman, C. J. (2002). *Risk Communication: A Mental Models Approach*. UK: Cambridge University Press.
- Moutinho, L. (1987). Consumer behaviour in tourism. *European journal of marketing*, 21(10), 5-44.
- Mumuni, A. G., & Mansour, M. (2014). Activity-based segmentation of the outbound leisure tourism market of Saudi Arabia. *Journal of Vacation Marketing*, 20(3), 239-252.
- Park, D. B., & Yoon, Y. S. (2009). Segmentation by motivation in rural tourism: A Korean case study. *Tourism management*, 30(1), 99-108.
- Pieniak, Z., et al., (2010). Health-related attitudes as a basis for segmenting European fish consumers. *Food Policy* 35, 448-455.
- Powell, D. (2001) Communication of food-related risks. *AgBioForum*, 4(3&4), 179- 185.
- Powell, D.A. (2000). Food safety and the consumer—perils of poor risk communication. *Canadian Journal of Animal Science*, 80(3), 393-404.
- Prescott, J. (1998). Comparisons of taste perceptions and preferences of Japanese and Australian consumers: Overview and implications for cross-cultural sensory research. *Food Quality and Preference*, 9(6), 393-402.

- Promsivapallop, P., & Kannaovakun, P. (2017). A comparative assessment of destination image, travel risk perceptions and travel intention by young travellers across three ASEAN countries: a study of German students. *Asia Pacific Journal of Tourism Research*, 22(6), 634-650.
- Redmond, E. C., & Griffith, C. J. (2004). Consumer perceptions of food safety risk, Renn, O. (2006). Risk communication - Consumers between information and irritation. *Journal of Risk Research*, 9(8), 833-849.
- Roehl, W. S., & Fesenmaier, D. R. (1992). Risk perceptions and pleasure travel: an exploratory analysis. *Journal of Travel Research*, 30(4), 17e26.
- Rosi, A., Mena, P., Scazzina, F., Marino, B., Danyego, O., Fasano, F., & Brighenti, F. (2017). Food perception at lunchtime does not depend on the nutritional and perceived characteristics of breakfast. *International journal of food sciences and nutrition*, 1-12.
- Rozin, P., & Fallon, A. E. (1987). A perspective on disgust. *Psychological review*, 94(1), 23.
- Rubio, N., Oubiña, J., & Villaseñor, N. (2014). Brand awareness-Brand quality inference and consumer's risk perception in store brands of food products. *Food quality and preference*, 32, 289-298.
- Ryu, K. and H. Han. (2009). "Influence Of The Quality Of Food, Service, And Physical Environment On Customer Satisfaction And Behavioral Intention In Quick-Casual Restaurants: Moderating Role Of Perceived Price". *Journal of Hospitality & Tourism Research*, 34(3) 310-329.
- Saba, Anna, and Federico Messina. (2003). "Attitudes towards organic foods and risk/benefit perception associated with pesticides." *Food quality and preference*, 14(8), 637-645.
- Sjoberg, Lennart. "Explaining Risk Perception: An Empirical Evaluation Of Cultural Theory". *Risk Decision and Policy* 2.2 (1997), 113-130.
- Slovic P, Malmfors T, Mertz CK, Neil N, Purchase FH. (1997)Evaluating chemical risks: results of a survey of the British toxicology society. *Hum Exp Toxicol*, 16, 289- 304
- SMITH, MONICA L. (2006), "The Archaeology Of Food Preference". *American Anthropologist*, 108(3), 480-493.
- STEPTOE, ANDREW, TESSA M. POLLARD, and JANE WARDLE. (1995) "Development Of

- A Measure Of The Motives Underlying The Selection Of Food: The Food Choice Questionnaire". *Appetite* 25(3), 267-284.
- Tellström, R., Gustafsson, I. B., & Mossberg, L. (2006). Consuming heritage: the use of local food culture in branding. *Place Branding and Public Diplomacy*, 2(2), 130–143.
- Thomas, Alexander (1993). *Kulturvergleichende Psychologie*. Göttingen :Hogrefe.
- Tkaczynski, A., Rundle-Thiele, S. R., & Beaumont, N. (2008). Insights into how regional tourism operators view their markets. Retrieved July 17, 2017 from <https://www.eunwto.org/doi/pdf/10.18111/9789284419029>
- Verbeke, W. (2006). Functional foods: Consumer willingness to compromise on taste for health? *Food Quality and Preference* 17 , 126–131.
- Verbeke, W., (2008) Impact of communication on consumers' food choices .*Proc.Nutr .Soc .* 67, 281–288
- Wilcock, A., Pun, M., Khanona, J., & Aung, M. (2004). Consumer attitudes, knowledge and behaviour: a review of food safety issues. *Trends in Food Science & Technology*, 15(2), 56-66.
- Yi-Chin L, T.E. Pearson and Liping A. Cai, (2011). Food as a form of Destination Identity: A Tourism Destination Brand Perspective. *Tourism and Hospitality Research*, 11(1), 30–48
- You, M., & Ju, Y. (2017). A comprehensive examination of the determinants for food risk perception: Focusing on psychometric factors, perceivers' characteristics, and media use. *Health communication*, 32(1), 82-91.
- Yuksel, A. (2003). Market segmentation based on customers' post-purchase performance valuation: a case of tourist diners. *Journal of Travel and Tourism Marketing*, 15(1), 1–18.

APPENDIX

Dear respondents

I am a student from Prince of Songkla University Phuket campus, currently studying for my master degree. This is a survey for analyzing the relationship between novelty seeking and food risk perception. Your participation in the survey is a vital component of the study.

Please indicate your opinion by circling the appropriate number, ticking the appropriate boxes and filling the blanks for each question and please be reassured that all information collected will be treated confidentially and used for this study only.

Thank you very much for your kind assistance

Nichanan Blaxell

Master Degree Student

Faculty of Hospitality and Tourism, Prince of Songkla University, Phuket Campus

Personal Information

Gender Male Female

Age 18-24 25-34 35-44 45-54 55-64 65
or above

Education Up to secondary school High school Diploma
 Bachelor Master degree Doctoral degree

Occupation Business Owner Administrative/Managerial Self-employed
 Government Technician /Professional Student
 Housewife Retiree Others (Please specify)

Monthly income (AUD) below 1,000 1,000-1,999
 2,000-2,999 3,000-3,999
 4,000-4,999 5,000-5,999
 6,000-6,999 7,000-or higher

Part I :Past experience

1. Approximately, including this trip how many overseas trips have you been on in the past 3 years?.....Trips(s)

2. Is this your first time in Thailand?

Yes, this is my first time No. Number of previous visit (s).....

3. Is this your first time inPhuket?

Yes, this is my first time No Number of previous visit (s)

Part II: Food risk perception

On a scale of 1-5, how would you rate the overall degree of risk associated with food risk perception during holiday in Phuket.

1= strongly agree, 2= disagree, 3= indifference/neutral, 4= agree, and 5 strongly agree

Statement of food risk perception	Level of agreement				
	Strongly disagree	Disagree	Indifferent	Agree	Strongly agree
1. Difficulty in identifying local foods has prevented me from taking the local food	1	2	3	4	5
2. Difficulty in ordering local dishes discourage me from taking Thai food	1	2	3	4	5
3. Lack of competence in the local language discourage me from local food	1	2	3	4	5
4. Suspicious of being cheated discourage me from patronizing foods	1	2	3	4	5
5. I worry I might get something not what I want due to misunderstanding menu	1	2	3	4	5
6. I worry there will be communication problems while dining	1	2	3	4	5

Statement of food risk perception	Level of agreement				
	Strongly disagree	Disagree	Indifferent	Agree	Strongly agree
7. It is important that staff at restaurants could speak the same language as mine	1	2	3	4	5
8. I worry shopkeepers would cheat me because I am not a local	1	2	3	4	5
9. I worry that taste of food is not what I expected	1	2	3	4	5
10. A tour guide is very important if I need to communicate with people while traveling	1	2	3	4	5
11. I would rather spend money on the food I am familiar with	1	2	3	4	5
12. It is hard to find food which is suitable me	1	2	3	4	5
13. I would buy the type of food that most people would buy	1	2	3	4	5
14. I worry relatives and friends may dislike food or souvenirs I bought for them	1	2	3	4	5
15. I worry about using the cutlery improperly while I am eating	1	2	3	4	5
16. I worry others would be influenced by my attitude on food	1	2	3	4	5
17. I consider what people whose opinion I value would think if dined in an establishment that was considered improper or of a low standard	1	2	3	4	5

Statement of food risk perception	Level of agreement				
	Strongly disagree	Disagree	Indifferent	Agree	Strongly agree
18. Potential health problems are a concern	1	2	3	4	5
19. I may get sick from food I am not familiar with	1	2	3	4	5
20. There is a possibility of contracting infections disease while dining out	1	2	3	4	5
21. Fear of illness deter from eating local food	1	2	3	4	5
22. Suspicion of chemical present in the food discourage me from eating local food	1	2	3	4	5
23. I avoid local foods because of my uncertainly of their nutritious value	1	2	3	4	5
24. The stories and experiences of friends and relative discourage me from local food	1	2	3	4	5
25. Too much litter around eating places deter me from eating local food	1	2	3	4	5
26. Uncovered food and bottles discourage me from eating local food	1	2	3	4	5
27. Presence of flies and other insects deter me from eating local food	1	2	3	4	5
28. I worry whether there is value for money	1	2	3	4	5
29. I have concerns about spending money on buying some food I do not know.	1	2	3	4	5

Part IV: On a scale of 1-5, where 1 means very risky and 5 means not risky, how would you rate the overall degree of risk associated with food consumption during your holiday in Phuket?

	Very risky	High risk	Medium risk	Low risk	Not risky
Risk associated with food consumption during your holiday in Phuket	1	2	3	4	5

Part V: Please indicate the level of satisfaction with your food experience during your holiday in Phuket

	Very dissatisfied	Dissatisfied	Neutral	Satisfied	Very satisfied
Satisfaction with your food experience	1	2	3	4	5

Other suggestions/ comments

.....

Thank you very much for your kind co-operation.

Certificate

**CERTIFICATE OF PRESENTATION**

This certifies that

NICHANAN BLAXELL

Presented Paper entitled

***FOOD RISK PERCEPTION DIMENSIONS AND FOOD
SATISFACTION OF AUSTRALIAN TOURISTS***

In the ASEAN Tourism Research Conference (ATRAC 2019)

held on 19th January 2019

At Hòa Sen University, Ho Chi Minh City, Vietnam

Dr Le Minh Thanh
HOA SEN UNIVERSITY

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