1. Introduction

Earlier studies suggest that foodborne illness may be related to the food safety culture of the food handlers (Griffith et al., 2010; Towns et al., 2006; Abdullah Sani and Siow, 2014). Food safety culture is a contribution of the aggregation of the prevailing, shared attitudes, value, learned belief towards hygiene behaviour in a food preparation environment (Griffith et al., 2010). Besides, in term of food safety only, it also can be related as the food that is sustained their nutritional values that are physically, microbiologically and chemically clean without any contamination (Uçar et. al., 2016). However, attitudes of food safety also one of the crucial factors that affect the practices of the food handlers while preparing and handling food. Towns et al. (2006) indicated that proper refrigeration and freezer food storage techniques not typically practised in their homes, even the individuals completing the survey were concerned about proper refrigeration and freezer storage practices. They also have the perception that safety of food is not a crucial thing rather than delicious food even at some point, they still assume that checking the temperature, is unnecessary things to do. Hence, it proved that they lack awareness of food safety, especially towards the proper handling of temperature. Buccheri et al. (2007), indicated that about 78.3 % of respondents have a good perception that they raw food need to be separate, and 16.0 % denied the perception.

However, food handler's practices also associated with their knowledge and attitudes. Abdullah Sani and Siow (2014), reported that even 86.4 % wash their hand with soap, but there are still a few of them do not practice the knowledge. Especially for someone who is handling and preparing ready-to-eat food, they should wash their hand under hot running water with soap or any sanitizer and dry it with a clean towel instantly after finish handling the food. This practices should be emphasized daily by food handlers to avoid contamination from the pathogen. Also, based on the previous study, it proved that 29.3 % of food handlers do not separate their raw food with cook food (Egan et al., 2007). The contamination occurs according to two situations either they do not know about this knowledge, or they take it for granted.

According to that statement, it shows that most of the food handlers in orphanages are lack of educational background. Based on the previous study, it showed that about 3.6 % of food handlers have no formal education background and the highest percentage of education level among food handlers are an only secondary school which are about
63.4% (Abdullah Sani and Siow, 2014). Besides, the lack of exposure to food safety among local food handlers in orphanages also might be contributing to foodborne illness, especially to the children in the orphanages.

2. Materials and Methods

2.1 Participant sampling
The data were collected in three selected orphanages in Terengganu by using a semi-structured interviews. Based on the purposive type of sampling, the participants were selected based on two criteria; food handlers currently working in local orphanage and aged above 18 years old. The permission to conduct the research was obtained from the local authority MAIDAM (Majlis Agama dan Adat-Istiadat Melayu Terengganu) that manage certain orphanages, as well as from the Head Principal of the institution. The specific date has been arranged based on food handler schedules. Permission to record the interview sessions were also obtained from participants using a digital voice recorder.

2.2 Semi-structured Interview
Face-to-face interview approach has been adopted in this study. Permission to conduct the interviews were obtained from the head of principal and food handlers prior to data collection. The semi-structural interview conducted in the Malay language due to most of the food handlers are only proficient in Malay language. Interview guide were developed as outlined by Basit (2003). First set of questions of the in-depth interview were about socio-demographic characteristics such as their age, race, monthly income, level of education, working experience and marital status. Next, each of the respondents has been asked about personal hygiene, food hygiene, and environmental factor, management of the orphanages and resistance to change but in term of food safety. Besides, those elements also have been covered to investigate their food safety attitude at home. These were the items or the guideline that has been asked from them. This interview session has been conducted informally for each of the respondents.

2.3 Data Analysis
The interview conducted in qualitative research by using digital audio recording as an instrument to record the data. The data transcribed in the form of electronic format, which is via Microsoft Word. After all the data have been fully transcribed, the transcripts should be read line by line to obtain the keyword before assigning nodes. These nodes were then transferred into NVivo qualitative data software. Thematic analysis were used to analyze the data. The important of the codes was to allocate several set of meaning to inferential information (Basit, 2003). Each of the keyword from the transcripts coded based on the group of the data. A few columns were generated consisting of keywords, coding and theme. Thus, by coded every single keyword and making a few groups of coding, the theme developed based on the group were obtained from the coded data.
3. Results and Discussion

This research was conducted to determine factors from food safety culture that influenced the attitude and practices of local food handlers in the orphanages. The food safety factors determined by an interview session with an observation of visual data have been carried out.

Table 3.1 Socio-Demographic profiles of the participants

<table>
<thead>
<tr>
<th>Sociodemographic Profile</th>
<th>n= 20</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Frequency (n)</td>
</tr>
<tr>
<td><strong>Gender</strong></td>
<td></td>
</tr>
<tr>
<td>Male</td>
<td>0</td>
</tr>
<tr>
<td>Female</td>
<td>100</td>
</tr>
<tr>
<td><strong>Age</strong></td>
<td></td>
</tr>
<tr>
<td>20-29</td>
<td>25</td>
</tr>
<tr>
<td>30-39</td>
<td>20</td>
</tr>
<tr>
<td>40-49</td>
<td>30</td>
</tr>
<tr>
<td>50-59</td>
<td>25</td>
</tr>
<tr>
<td><strong>Races</strong></td>
<td></td>
</tr>
<tr>
<td>Malay</td>
<td>100</td>
</tr>
<tr>
<td>Indian</td>
<td>0</td>
</tr>
<tr>
<td>Chinese</td>
<td>0</td>
</tr>
<tr>
<td><strong>Marital Status</strong></td>
<td></td>
</tr>
<tr>
<td>Single</td>
<td>10</td>
</tr>
<tr>
<td>Married</td>
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</tr>
<tr>
<td><strong>Monthly Income</strong></td>
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</tr>
<tr>
<td>&lt; RM1000</td>
<td>55</td>
</tr>
<tr>
<td>RM 1000- RM 1500</td>
<td>45</td>
</tr>
<tr>
<td>RM 2000- RM 2500</td>
<td>0</td>
</tr>
<tr>
<td>&gt;RM 2500</td>
<td>0</td>
</tr>
<tr>
<td><strong>Educational level</strong></td>
<td></td>
</tr>
<tr>
<td>Primary School</td>
<td>0</td>
</tr>
<tr>
<td>Secondary School</td>
<td>75</td>
</tr>
<tr>
<td>Certificate/Diploma/ Degree</td>
<td>25</td>
</tr>
</tbody>
</table>

A total of 20 food handlers participated in this semi-structured interviews, which resulted from the total number of orphanages involved in this study. Based on Table
4.1, it shows that mostly female (100%) and Malay (100%) food handlers participated in this research. This reflect the majority of Malay community surrounding and living near these orphanages. About 25% of the food handlers were at the age of 20-29, and 30% were at the age of 40-49 years old. Other 45% were totally at the range of 30-39 and 50-59 according to their capabilities to accomplish their work at food premise.

Most of the food handlers were married (90%) and only one participant (10%) single due to their prior experience of work before they decided to work at that orphanage. Meanwhile, most of them have a monthly income between RM 1000 – RM 1500 (55%) and only nine food handlers (45%) has monthly income below than RM1000 since most of them worked at that orphanage food premises due to their cost of living. Furthermore, majority of them were from secondary school (75%), and only five people. A small percentage of them (25%) were from certificate and diploma which shows that most of them have obtained low level of knowledge before their work at the orphanages.

Theme obtained for this study have been transcribed and coded into the same topics. The main themes that should be discussed were:

i) Inconveniency issues
ii) Challenge to change new attitude and practices
iii) Assertive towards new knowledge

3.1.1 Inconveniency Issues
The main theme of "inconveniency issues" referred to the three subthemes emerge in this theme "comfortability", "internal conflicts" and "lack of facilities" provided by management. These issues were focusing on food handlers only.

i) Comfortability
Comfortability was one of the crucial issues that always mentioned by the participant. According to the interview session, the majority of the participant not comfortable to follow the guidelines or the safety rules needed while handling food. Most of them mentioned that they have trouble and discomfort while following all the safety rules that required while preparing food. This issues may affect their quality of work and the needed time that they should be spent to complete their work.

"Not comfortable using hand glove, it can make me complete my work slowly." [Orphanage A]

"I don't like to use hand glove while handling raw materials. I feel so discomfort. It can make my work more difficult" [Orphanage A]

However, inconveniency issues also related to participants' personal hygiene when they were having a wound while handling the food. Majority of them indicate that they were facing with discomfort issue, especially when they were required to use plaster while having wound at that time. Some of them mentioned that, sometimes, they might be comfortable to use the application, while most of them denied.
"I am not comfortable with using plaster; it can make my wound worse than before" [Orphanage C]

Moreover, the using of standardized attire also can influence the inconveniency issues among them. Based on the interview and observation session, it shows that even half of them were comfortable of using the suggesting new standardized attire, but still, have some of them preferred to use the normal daily attire that they wear to work. Some of them mentioned that the comfortability to wear the new attire also influenced by the type of material used for producing the attire. Comfortability of the attire has taken as the crucial thing for them while handling and preparing food. According to that statement, most of them decided to wear what they feel comfortable while working at the premise. Several of them also pointed that, they wear slippers to the working place and some of them wearing rubber shoes. Figure 3.1 illustrates the visual photo of the food handlers that were not wearing proper attire while working on the premise.

Figure 3.1: Participants prefer to wear rubber slippers while working in the kitchen

"I am not comfortable with using safety shoe while doing work. The shoes quite heavy."  
[Orphanage A]

"My feet easy to sweat when I wear shoes. My feet easy to sweat, and my foot will hurt."  
[Orphanage B]

Based on all issues mentioned, it showed that most of the participant was struggling to avoid inconveniency issues while working in that orphanages. Thus, due to their
struggle, most of them tend to sustain their unfair practices as long as they feel convenient and comfort while doing work.

These can be shown by their practices of using a glove while handling food which most of the participants not wearing glove due to the lack of comfortability. WHO, (1999) reported that, by using clean tongs, forks, spoons or disposable gloves, food should preferably be handled. Participant supposedly used this kind of utensils and gloves to avoid contamination. Based on the previous study, it also showed that, to oneself as well as to others, the disease could be transmitted from contaminated hands (Alwis et al., 2012).

Besides, other preferred findings also exposed that most participants tend to avoid using plaster when having a wound while handling food. They prefer to let their hand exposed to the environment without covering it. Kashha et al., (2017) indicated that bacteria from other parts of the body or the outside environment and bacterial colonization, initiating either from the normal flora on the skin were the causes of the most wound infections. It showed that a wound could be the reason for the food contamination.

Moreover, the interview session also proved that the attire also could affect the comfortability of the participants. Most of them choose t-shirt and slippers as their preferred attire while working in the orphanage. According to key messages from Health and Safety Executive (1992), mentioned that, through slips and trips, people working in kitchens and food service are more likely to be injured. Therefore, it showed that, instead of to keep good personal hygiene, proper attire also could help the participant to avoid an accident from their working place.

ii) Internal Conflict

Internal conflicts also one of the main reasons for the inconveniency issues from participants. Most of the disputes focused on the workers and the management. Some of the participants told that problem with other workers also could affect the attitude and practices, especially while working in the premise at the orphanage. According to the data from the interview obtained, some of them have internal conflicts with other workers in their working place. This issue probably affects their quality of works and concentration while they attended to work. Some of them dissatisfied with each other and had a misunderstanding among them. Some of them might be unsatisfied with their working partner or with the other staff in the orphanages.

"It is quite interrupted. Throw rubbish is not my work. But when cleaner didn't throw it, I have been forced to do others works" [Orphanage A]

"Sometimes, I think I have been completed my work, but the other workers deliberately taking the pictures which shows that I am not doing works so that that management can scold me" [Orphanage A]

However, participant also exposed that they are even unsatisfied with their management system. One of the participants from Orphanage A mentioned that she
felt challenging to take early maternity leave because of their old management. That management did not approve their maternity leave at that time. According to that difficulties, they feel angry and unsatisfied with a management decision, and for her, their management was difficult to tolerate.

“I want to take early maternity leave before this, but management not approved. I said to them I don't care because I want to take an early leave” [Orphanage C]

Internal conflicts were one of the factors that influence the inconvenience of the participants. According to the interview's data, most of them indicated that they have problems within their groups of workers, or otherwise with the management of the working the orphanage itself. This factor contributed to the inconvenience issues of the participants.

According to the findings, it showed that most participants feel unsatisfied with the other workers. Some of the unsatisfaction begin from a misunderstanding among the workers. The problem also started when they should complete other workers work. Clark (1997) reported that some of them, uncertain with the factors such as workers' rights, unsafe working condition, uncooperative co-workers, lack of respect from supervisor and lack of consideration of decision-making process, due to unsatisfied task that were assigned to them. It proved that unsatisfaction of the workers and the task could contribute to the conflicts among them in the orphanage.

However, the internal conflict with management also one of the important things that should emphasize in this study. Some of the participants mentioned that they have internal conflicts with management. For example, a participant in Orphanage A exposed that, she felt unsatisfied with management when she applied for her maternal leave early. Based on Devamaindhan (2014) indicated that it was crucial to listen to the employees and spend time with them. Therefore, due to that statement, participant morale and motivation improved well. Supported by Raziq and Maulabakhsh (2015), showed that, workers performance could reflect the high of employee morale and if they make lesser effort to improve, it might be due to low morale of the workers. Therefore, it shows that conflict with management can affect the participant morale and contribute to inconvenience issue towards the management.

iii) Lack of facilities and support on occupational health and hazard by management

Lack of facilities also referred to incomplete facilities provided by management as well the facilities that showed the support from management towards occupational health and hazard. Some of the food handlers in several orphanages mentioned that their working place did not have enough facilities to fulfil their needs while doing work. Their management did not prepare their need, such as first aid and other personal hygiene properties. Some of them had to prepare medication on their own and used their saving money to buy the medicine needed by them. This problem occurs due to lack of support on occupational health and hazard by management. Some of them feel so heavy to use their saving money due to their background family, which come from a low-income family.
"We required to add our own 'minyak gamat' because there is no first aid provided here." [Orphanage A]

"Sometimes, if the equipment broke, we need to buy the equipment by our self" [Orphanage B]

Instead of buying the things on their own, some of them had to use only the available facilities in the orphanage. Due to lack of handwash that prepared by management in the orphanages, some of them took action by not washing their hand or replace the hand wash with dish wash.

"No hand wash is prepared here. We wash our hand by using 'axion' only." [Orphanage B]

Management support towards providing facilities and occupational health and hazards were the important key that can affect participant attitudes and practices. This statement proved by the interview session obtained from several of the participants in some selected orphanages. Most of them complaining about their management responsibility to provide their right as an employee in that orphanage. Providing first aid kit was one of the crucial problems that have been told by participants. They felt so difficult to get emergency medication when they were injured until they need to provide it by themselves. It should not occur because providing medication was one of the management responsibility. Irresponsibility from management can cause participant felt inconvenient with their work. Leggat et al. (2003) indicated that limiting infection, prevent further injury and saving lives were the objectives of the first aid. Besides, according to OSHA (2006), There are 4.3 million total workplace injuries and illnesses reported in 2004. Thus, this showed that there were no excuses that should exist to provide the occupational health and hazards facilities to the participant in that orphanages.

Furthermore, based on the interview, most of the participant also complaint about the lack of personal hygiene facilities that should be provided by management in the orphanage. They felt so inconvenient when they should buy and offer it on their own. This statement was strongly supported by Aziz and Dahan (2013), which indicated that time constraints and lack of facilities identified by participants as the barrier to comply with the behaviour of food safety. Besides, most of them also mentioned that management did not provide hand wash in the orphanage. Therefore, it proved that lack of facilities could contribute to the inconveniency issue to the participant.

3.1.2 Challenge to change new attitude and practices

For the theme of "challenge to change new attitude and practices ", there were several subthemes that were categorized which were "acting when inspection" and "lack of implementation of knowledge after attended training". This theme focused on the challenge that has been faced by the participant to change their attitude and practices.

i) Participants playing ‘actors’ during health and food safety inspection
Majority of the food handlers in the orphanage selected have exposed that, they felt afraid to confront Officer from the Ministry of Health Malaysia (MOH). Most of them experienced with an inspection that done by MOH due to food poisoning case in that premise. They mentioned, at that time, they had been directed to close the premise after the general inspection throughout the premise completed. They have been scolded by MOH's Officer about the level of hygiene in the premise. MOH has checked general parts such as storage of raw materials, expired items and their personal hygiene. They decided to pretend in front of MOH and the other organization that check their premise because they don't want to take a risk anymore.

"We have prepared the proper shoes in the store. If MOH comes, we change the slippers to proper shoes that are required in this working place."

[Orphanage C]

"After MOH check, this premise has been closed for a few weeks. Now we are so afraid if they come again" [Orphanage C]

This study showed that inspection from the Ministry of Health Malaysia (MOH) could give a significant impact to participants in that orphanages. According to the interview session, most of them have experience of facing unexpected inspection while preparing food in the orphanages. Based on their story, most of them might be traumatized or afraid when they need to be confronted with MOH.

The challenge began when they started to take an unexpected action. This statement was verified by the result of the interview session from the participants. The participant admitted that they began to pretend in front of the MOH when they were making an inspection. They prepared all the required things early in-store so that MOH assumed that they followed the instructions that have given to them. However, Food Standard Agencies (2000), indicated that foreseeable incidences of food poisoning or injury as a consequence of consumption of food could be identified by inspection. Besides, that agencies also mentioned that, to secure compliance with food safety legal requirements, appropriate enforcement action, (proportionate to risk) will be considered. Thus, it showed that this might be the reason why most of the participant was acting when inspection.

In this case, the system food service operation in the orphanage also categorized at the same level as boarding school because all of the orphans stayed in that orphanages, were the school students. According to the annual report from Ministry of Health Malaysia (2011), it showed that outbreaks continued to occur even food handlers have been trained of safe food handling practices and food premises also have been checked in school. Despite all of the inspection and training has been given, the foodborne disease still occur in Malaysia, and most of the affected persons do not seek treatment at the hospital, especially if the cases are not serious (Abdul-Mutalib et al., 2015).

**ii) Lack of input implemented due to daily habit at home**

Majority of the food handlers that worked in that specified orphanage obtained lack of input that implemented after attending food safety training from MOH. Most of
them received the certificate from the training, but only a few of them implement the knowledge. Besides, they also share that, due to daily habit at home, they do not implement the input from training. Most of them reveal, they still used broken chopping board even they have gained the knowledge about the handling of that type of broken type equipment from the training. Besides, they also admit they did the same practices of handling chopping board while they were at home.

"We wash the broken chopping board with dish wash and a steel brush. As long as it can be function well, we keep on using the chopping board unless the surface is too worst."

[Orphanage B]

"I'm doing the same thing at home, if the broken chopping board still can be used, I will use them" [Orphanage c]

Several of them mentioned that food safety training and personal hygiene practice were important for them, and all of the food handlers should involve in the training. It showed that some of them still have basic knowledge about food safety. However, that statement also has been supported by another statement from another food handlers from the same orphanage. Some of them reveal, they aware of the input of the training, but they did not practice it even at home.

"We paste the seven steps of washing hand here, but sometimes we did not follow the steps to wash hand" [Orphanage B]

"After the talk, we also check the temperature but sometimes not. It has been cold so no need to fix and check it again" [Orphanage A]

In this subtheme, a daily habit from home might influence their attitude and practices in the workplace even they have obtained the certificate of the training. Family played a pivotal role to develop a fair and better attitude in the workplace. Finding from Langiano et al. (2012) state that, the spread of pathogens responsible for foodborne diseases were from began from the home environment, which represents an important site of the pathogen spread. This related to this finding, which several participants mentioned that their quality of work based on their home practices every day.

However, training also important to develop participant attitude and practices while handling food, but in this research, some of the food handlers not fully adapted with the knowledge given. Based on Mcfarland et al. (2019), factors that influence behaviour might be missing due to the narrow focus by training. Training supposedly helps the participant to increase their knowledge about food safety, but in this research, the input contradicted different for some of the participant. It might occur because to influence the behaviour, focusing only on the facts and knowledge may not be enough (Chang et al., 2003). Implementing experience also obtained one of the challenges that might be facing by the participant due to their daily habit at home.

The previous study from Seaman, (2010) indicated that some of the food handlers could easily forget and ignoring the fact, even though they have been attended
training that highlighted the importance of using separate kitchen utensils. It showed that this attitude might be the barrier to be a better worker in that orphanage.

3.1.3 Assertive towards new knowledge
This main theme has been emphasized on some sub of categorizing such as "personal handling practice" and "cognitive belief "of the participants. This theme exposed on how the participant become too assertive for the selection of new knowledge.

i) Personal handling practices
This subtheme cover on the method or the way of participant handle their work and also the specific time to implement their proper handling. According to observation, each of the food handlers that interviewed explained that they have their way to handle their work. These attitudes make them more firm to their self and become more assertive to learn new knowledge.
In the other hand, they even feel more assertive when their practice suitable to use to accomplish their work. Based on the interview, most of the food handlers have their way while handling the storage of raw items and dry items. Probability, the quality of the food were affected by the storage of that item itself.
Figure 3.2 and 3.3 showed the storage of raw materials and dry materials stored by personal ways in the selected orphanages.

Figure 3.2: The improper storage of raw materials by using personal ways
"This premise have 2 chiller. If it have large space, we put all the raw materials together. But depends" [Orphanage c]
"I separate the materials for their storage. Half part for a dry item, half part for raw materials. Not eventually put together."

[Orphanage C]

The aspect of personal handling practice shows that most of the food handlers feel comfortable with their practice while doing work. These proved by the observation of visual data. Some of them decided to wash the chopping board by using their way which by using bleach. This attitude made them feel heavy to learn new knowledge even they know that knowledge was more beneficial to them compared to their previous knowledge. Figure 3.4 illustrates the chopping board that has been washed by the food handlers' ways.

Figure 3.4: Chopping board that has been wash by bleach

"I always used bleach and hot water to soak and wash the chopping board, but I will use this way when students take leave for few months" [Orphanage C]

Also, several food handlers mentioned that they also have their own specific time and situation to practices personal hygiene. According to the interview session, the majority of them have the specification of time to wash hand and wear hand glove, especially while handling the food. These included in their way for handling their work. Some of them explained that even MOH had given their training about personal hygiene while work, they still did the same practice before they attend the training. Majority of them don't use glove while handling fruits and vegetables and just specifically wear the glove when they need to serve food for students only.

"I rarely wear the glove for vegetables. But when my turn to serve food, I wear it.'
All in all, this subtheme exposed the way of participant handling their work in the orphanages. The participants were assertive to learn new knowledge due to the habit that they have been practices day by day. Most of them felt that their way to handle work such as handling food, raw items and storage were correct and safe to practice.

While handling the storage of the raw and dry item, most of the participant explained that they separate the storage of dry and raw material. Kendall and Dimond (2012), explained that foodborne illnesses caused by harmful bacteria could be prevented by proper food storage. Despite, separation of the storage was a good practice. Still, according to visual data observation from Figure 4.2 above, it can be shown that, their actual practice not at the same line with the data from the interview session. After further discussion and explanation, eventually, they admit that the visual proved was their actual way of handling practices for storage.

However, they still firm with their practices by defending their way. It occurs due to daily habit every day. Instead of storage, according to the study, showed that the majority of them also did not use glove while handling fruits and vegetables and specifically wear the glove when they need to serve food for students only. This statement was well explained when they also admitted, and they only practice to use the hand glove by a specific time. Even though Akabanda et al. (2017) has indicated that the risk of food contamination can be minimized by using the protective glove and proper clothing, they still firm to use the glove just for specified time and situation only. However, Todd et al. (2010), indicated that, if gloves were punctured or improperly used, it might become a source of contamination. Besides, supported by Lynch et al. (2005), this literature also mentioned that, the use of glove by food handlers might even increase the risk of microbial contamination and does not reduce bacterial contamination of foods. According to this statement, it showed the reason why participant assertive towards new knowledge which is due to the doubting element to trust the knowledge.

**ii) Cognitive belief**
Cognitive belief referred to trusting perspective among the participants. Cognitive belief also takes a crucial role in this theme. According to the interview session, the finding showed that majority of the food handlers mentioned that, they tend to use the traditional way to heal wound such as "*minyak gamat*, margarine, soy sauce and egg". They believe that, instead of using plaster or any other medication, this traditional method also can use as the source of medication for them and have a better function compared to modern medication. Several cultural, socioeconomic and environmental factors, as well as psychological determinants such as knowledge, attitudes, beliefs and values, are considered to influence the health-related behaviours, such as those associated with food safety (WHO, 2000). These make them more assertive to use any other medication that has been suggested for them.

"*I prefer to use margarine and soy sauce to heal the wound*" [Orphanage B]
"I prefer to use ketchup and egg because they can heal the wound by cooling the burnt surface of the skin" [Orphanage C]

According to the interview session, most of the food handlers also exposed that they prefer to wash raw vegetable using salt water before using them as an item for cooking ingredients. They mentioned that by soaking raw vegetable with salt water can remove pests and chemicals from the vegetables. It showed that, according to their culture, cognitive belief could

"I will soak the raw vegetable in salt water for 15 minutes so that chemical and pest can be removed and avoided" [Orphanage B]

The cognitive belief was one of the factors that influence the attitude and practices of the participant while handling or preparing food in the orphanages. This belief comes out from the learning process that they have learned through their ancestor' culture. This present study exposed that, participant reveals their food safety culture based on their existing cognitive belief that they implement throughout the days.

However, this belief practised through several parts of their working environment in the orphanage. Most of them explained that they use traditional medication such as 'minyak gamat' and other cooking ingredients as their main remedies. Literature proved that, for those that were taking sea cucumber based remedies for the treatment of eczema and arthritis, pain and irritation could be relief their skin condition (Ridzwan et al., 2003). Besides, S. Hermanni (sea cucumber), also can contribute to wound healing and neuroprotection as an alternative source to synthetic ingredients (Pangestuti and Ari, 2017).

Furthermore, instead of modern remedies, participant prefers to use margarine, soy sauce and eggs as their source of medication. However, there was no strong evidence from a previous study to show that margarine and soy sauce can help to promote the wound healing process. However, even there was a lack of study about soy sauce, but, the research about the benefit of soy protein still existed. According to Egozi et al. (2015), in all relevant aspects, they chose to develop and study soy protein films as a platform for wound-dressing applications. Therefore, there was still had researched about the benefit of the soy protein as a medication source. However, Jahani et al. (2019) exposed that, second-degree burn wound can be effectively repaired by egg whites. Therefore, it showed that traditional medication has a higher impact on most of the participant belief.

Resilience

Resilience is a process
**Resilience**
Resilience is a process

**Resilience**
Resilience is a process

**Resilience**
Resilience is a process

Failed to meet expected outcomes

Failed to meet expected outcomes

**Mediating processes**
- Food Safety Training

**Adversity**
- Inconvenience issue
- Challenge to change new attitude and practices
- Assertive towards new knowledge

**Adversity**
- Inconvenience issue
- Challenge to change new attitude and practices
- Assertive towards new knowledge

**Adversity**
- Inconvenience issue
- Challenge to change new attitude and practices
- Assertive towards new knowledge
- Assertive
towards
new knowledge

- Adversity

- Inconveniency issue
- Challenge to change
new attitude and
practices
- Assertive
towards
new knowledge

- Adversity

- Inconveniency issue
- Challenge to change
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- Assertive
towards
new knowledge

- Adversity

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- Challenge to change
new attitude and

This conceptual model developed based on the pattern of the theme has been summarized into the form of organizing idea or structure. The conceptual model that has been referred to was adapted and modified from Van Breda (2018). In this study, qualitative approached was a help to identify the expected outcomes which were based on adversity and mediating process.

This present study finds that inconveniency issue, a challenge to change new attitude and practices as well assertive towards new knowledge, were the key elements of adversity that were closely related in this study. According to Toomey et al. (1993), having been part of a family which itself carries elements of risk, encountering adversity and come out from environment that was harsh and difficult, also can influence individual development. Thus, this present study indicated that the difficult experience and that kind of adversity that has been mentioned were the factors that can affect the outcome.

Moreover, this adversity can improve by providing training for participants. In term of food safety culture, food safety training was very suitable for the participant's development especially while they were in the working environment. Food safety training became a mediating process which might help to obtained better outcome come out from this study. Van Breda, (2014) proposed that, the mediating process also known as multilevel process system, where, to obtain better-than-expected outcomes in the face or wake of adversity, this multilevel processes system engaged into it. Besides, food safety training also matches with the process approached,
which can encourage and improve safe working practice at all times the practices should be carried out (Seaman and Eves, 2006).

However, the results from this mediating process not achieved an expected outcome. The outcome became vice-versa when the participant still resists changing after the food safety training has been conducted. Most of the participants mentioned that even most of them have attended food safety training and have a certificate from it, they still firm and stand with their own culture while handling the food. Therefore, this result shows that, the resilience as an outcome from this study.

**Conclusion**

For this research, the main objective that has been conducted was to determine the food safety culture factors that influence the attitude and practices of food handlers at the orphanages in Terengganu. Besides, a conceptual, theoretical model also has been developed from the food safety culture factors that have been obtained. Thus, all of the objectives archived.

The food safety culture factors in this research such as inconveniency issues, challenge to change new attitudes and practices as well as assertive towards new knowledge has been well discussed. These factors extracted based on a few subthemes for each of the factors. Eventually, all of the subthemes showed the relation between the main themes obtained. According to this research, most of the participants indicated that they had attended food safety training, but, they tend to sustain and practices their way of practices. Therefore, this study shows all of the factors determined, had influenced their attitude and practices while handling food.

Last but not least, conceptual, theoretical frameworks showed that the outcomes obtained from this study were different from the positive expected outcomes. Most of the food handlers indicated that they still firm with their own existing food safety culture even they had attended training and have a certificate from it. Therefore, it proved that their attitude and practices while handling food also influence from their existing food safety culture.

**Limitation and Suggestion for Further Research**

This research was only explored and conducted at the orphanages in Terengganu. Different states where the orphanages located might have different culture, level of knowledge about food safety and the working system that was set by management. Thus, other states also might influence their difference in the factors that influence their attitude and practices while working in the orphanages. Therefore, instead of researching the east coast of Malaysia, further suggestion, this research also can be conducted in the orphanages of the other states. Besides, research also can be explored from the different background of cultures such as Chinese and Indian. Moreover, it was very suggested to explore this research for other welfare homes such as an old folk home.

**References**


