MALAYSIAN GENERATION Y'S ACCEPTANCE LEVEL TOWARDS COSMETIC SURGERY

KEE CIA HEE

MASTER OF BUSINESS ADMINISTRATION
(CORPORATE GOVERNANCE)

UNIVERSITI TUNKU ABDUL RAHMAN

FACULTY OF ACCOUNTANCY AND MANAGEMENT

AUGUST 2017

KEE CIA HEE   COSMETIC SURGERY   MBA (CG)   AUGUST 2017

Malaysian Generation Y's Acceptance Level Towards
Cosmetic Surgery

Kee Cia Hee

A research project submitted in partial fulfillment of the
requirement for the degree of

Master of Business Administration (Corporate Governance)

Universiti Tunku Abdul Rahman

Faculty of Accountancy and Management

August 2017

Malaysian Generation Y's Acceptance Level Towards Cosmetic Surgery

By

Kee Cia Hee

This research project is supervised by:

Ms Yeong Wai Mun
Lecturer
Department of International Business
Faculty of Accountancy and Management

DECLARATION

I hereby declare that:

(1) This Research Project is the end result of my own work and that due acknowledgement has been given in the references to all sources of information be they printed, electronic, or personal.

(2) No portion of this research project has been submitted in support of any application for any other degree or qualification of this or any other university, or other institutes of learning.

(3) The word count of this research report is   11,513   .

Name of Student   :   Kee Cia Hee

Student ID   :   16UKM6145

Signature   :

Date   :   30 August 2017

ACKNOWLEDGEMENTS

I would like to take this opportunity to thank a number of people that have been helping me on this journey and in completing this research project.

Firstly, I would like to express sincere gratitude to my wonderful supervisor, Ms Yeong Wai Mun, for sparing her time in providing me with advice and support from the very start to the end. Without her guidance and encouragement, I would not have been able to complete this research project.

Also, I want to thank my family for their overwhelming love, support, and encouragement throughout this course. Additionally, I must thank all the respondents and friends who devoted their time in taking part in this research project. It would not have been completed without you. Last but not least I would like to thank the staff of Institute of Postgraduate Studies and Research.

DEDICATION

This dissertation is specially dedicated to:

Ms Yeong Wai Mun

and

My family, friends, and loved ones

Thanks for the continuous guidance, assistance, and support throughout the journey

of this research project

TABLE OF CONTENTS

LIST OF TABLES

LIST OF FIGURES

Page

LIST OF APPENDICES

Page

PREFACE

This study is conducted as part of the course requirements for the Master of Business Administration (Corporate Governance) programme in Universiti Tunku Abdul Rahman (UTAR). The objective of this research being conducted is to understand the acceptance level of Malaysian Generation Y (Gen Y) towards cosmetic surgery. As a matter of fact, the main concentration of this study is to identify how every factor affects the degree of acceptance level towards cosmetic surgery among Malaysian Gen Y.

ABSTRACT

Cosmetics procedures have become very common among Malaysians with the increasing number of Malaysians paying for cosmetic surgery to enhance their features, be more attractive or to improve their body shape. Cosmetic surgery is concerned with the maintenance, restoration or enhancement of one's physical appearance through surgical and medical techniques.

This research paper employs questionnaire as the research instrument to achieve the general research objective. In the questionnaire, the acceptance level of Malaysian Generation Y (Gen Y) towards cosmetic surgery will be explored. The sample consists of 260 Malaysian Gen Y. Eventually, statistical results of the study are reported based on the analyses conducted.

Throughout the study, the findings have clearly revealed that the acceptance level of Malaysian Gen Y towards cosmetic surgery will be influenced by conformity as well as gender. However, self-esteem and self-access attractiveness was found insignificant in influencing the acceptance level towards cosmetic surgery.

CHAPTER 1

INTRODUCTION

1.0   Introduction

This chapter will be discussed by a few parts. Firstly, the research background and its problem statement will be discussed. Next, the overview of the research such as research objectives, research questions and research hypotheses will be listed as guidance of this research. Significance of study and scope of study will be further explained in the last part of this chapter which the gap of researches identified and target respondents will be mentioned.

1.1   Background of Study

Cosmetics procedures have become very common among Malaysians with the increasing number of Malaysians paying for cosmetic surgery to enhance their features, be more attractive or to improve their body shape (Yuen, 2015). Cosmetic surgery is concerned with the maintenance, restoration or enhancement of one's physical appearance through surgical and medical techniques (Swami V. P., 2009). Dr. Hew Yin Keat who is the president of Malaysia Society of Aesthetic Medicine (MSAM) said many aesthetic clinics were being set up not only in the Klang Valley but also in many major cities in Malaysia such as Penang, Johor Bahru, Malacca, Sabah and Sarawak (Hew, 2015). In fact, cosmetic surgery is increasingly popular

globally. The preliminary survey done by The American Society for Aesthetic found from its procedural statically data for the 2015 calendar year suggest that cosmetic procedures are on the rise (ASAPS, 2016). Plastic Surgery's (ASAPS') found the idea of having the beauty ideals popularised by dominant groups has caused an increased in consumers carrying out cosmetic surgery. Cosmetic surgery is now globalised and has become normalized.

Based on the past researches, researches are mainly focused on western countries, which all the results are based on western samples which different results may be get from the non-western samples. Alexandra Kanters (2015) commented in his research that cosmetic surgery has become one of the the most extreme ways for one to improve appearance or body, the rate of undergoing cosmetic surgery has risen sharply and it is important for researchers to understand the consumer behaviours and attitude towards this new opportunity. Besides that, the current trend has shown that the decision making of an individual will be affected by the television program, particularly programs geared towards elective cosmetic surgery (Alexandra Kanters, 2015).

According to researches did on non-western samples, it is reported that the body appreciation scale has in the population does not change. Studies stated that the body appreciation scale of female population in Malaysia can be conceptualized to be influenced by two factors, which are the general body appreciation and body image investment (Swami V. &.-P., 2008). General body appreciation consists of eight items which is used to measure the self-esteem and self image scale whereas body image investment is a study to understand the willingness of one to spend to improve body image (Swami C. B., 2011).

In line with all the social factors and market developments, a huge amount of research has been emerging into the market in order to understand the attitude and behaviour of consumers in the market. In short, researchers and marketers are wishing to understand the factors, influence and acceptance of consumers towards cosmetic

surgery, as this precious information will be a strong base for business to continue surviving in the market. For instance, past researches have been served as evidences to show that women tend to have a higher acceptance towards cosmetic surgery and greater likelihood to go for it (Swami V. &.-P., 2008). Generation Y defined as those born between year 1980 to year 2000 which has constituted 44 percent of the population in Malaysia (Country Metres, 2017), hence this research will also focus on determining will gender of Gen Y in Malaysia affect the acceptance towards cosmetic surgery.

1.2   Problem Statement

A country report has been done by Euromonitor (2016) found that women tend to be more participating in today's workforce with an earning of middle to high incomes, and several male grooming products were introduced and being considered as large players in the market. This has indicated that the beauty industry market is booming in the recent years and consumers are getting more and more aware about their personal appearance and outlook. Wilson (2015) stated that the beauty industry has become the most important trends in year 2015 and special consumer research findings will be required now and in the future due the demographics of current spenders have changed as new generation are now taking over the market.

Desirability to change and improve one body has increase in the recent years and analysis clearly shows that the desire to change one's body has now getting more and more common in the market (Karupiah, 2012). "Higher disposable incomes among patients, advances in surgical procedures particularly in terms of safety and the lower cost of treatments have also served to reduce patient anxiety about cosmetic procedures" (Edmonds, 2007). During the past decade, there has been a dramatic increase in media that coverage and create awareness for cosmetic surgery among the public (Crockett, 2007). Tait (2007) mentioned that widely available social media has

now large create public awareness of cosmetic surgery procedures and is encouraging consumers to undergo such procedures.

As cosmetic surgery is increasingly popular globally, soon the trend will reach Malaysia and what is the acceptance level of consumers in Malaysia about cosmetic surgery? (Yuen, 2015) Factors of one decided to go for cosmetic surgery and how cosmetic surgery patients are socially evaluated is largely unknown. Research suggests that public's exposure to reality makeover shows will affect the attitudes of an individual towards cosmetic surgery. The popularity of such procedures have been increased, these implied that cosmetic surgery is associated with little pain and risk. So, what does Malaysians think about self or others who pursue cosmetic surgery?

This research focuses mainly to determine the attitudes, level of acceptance towards cosmetic surgery, perception of Malaysians towards cosmetic surgery in the current society and the likeability of populations in Malaysian to go for cosmetic surgery. Besides, the research is also trying to look several interesting about cosmetic surgery in Malaysia such as which gender, races and age range tend to have a higher desirability to carry out cosmetic surgery in Malaysia.

1.3   Research Questions

In order to achieve the purpose and objectives of this research, the following research questions will be answered:

1)   Is there a significant positive relationship between self-esteem and acceptance of cosmetic surgery?

2)   Is there a significant positive relationship between conformity and acceptance of cosmetic surgery?

3) Is there a significant positive relationship between self-accessed attractiveness and acceptance of cosmetic surgery?

4) Will demographic influence acceptance of cosmetic surgery?

1.4   Research Objectives

The five main objectives that this research attempts to accomplish are as follow:

1) To examine the acceptance level of Generation Y in Malaysia towards cosmetic surgery.

2) To investigate the relationship between self-esteem and acceptance of cosmetic surgery.

3) To investigate the relationship between conformity and acceptance of cosmetic surgery.

4) To investigate the relationship between self-accessed attractiveness and acceptance of cosmetic surgery.

5) To investigate the influence of gender towards acceptance of cosmetic surgery.

1.5   Scope of Study

In order to reduce bias in the findings of this research, the amount of respondents to participate the data collection process will be divided equally by genders. This research focus mainly on the gender of respondents as gender will affect the acceptance of cosmetic surgery (Swami V. P., 2009). All the questionnaires will be given out to students who are currently studying in University and young working adults as the age range nowadays strongly represent the Generation Y in Malaysia. Besides that, as Klang Valley has the most population among all the other cities in Malaysia, the data collection process will be carried out within Klang Valley so that the target sample can represent the target population more significantly.

1.6   Significance of the Study

Generation Y has been described as an enigma to most marketers, hence there is a need to study more on them (Dawn B. Valentine, 2013). Several researches have been done to study the attitudes towards cosmetic surgery, the acceptance level of cosmetic surgery or the factor that influence to carry out cosmetic surgery in other foreign countries, and none of the research was carried out within Malaysia to study what is the acceptance level of population that are currently staying in Malaysia. By carrying out this research, the beauty industry can then have a better understanding about the current main consumers in the market, which is the Generation Y. Due to the aging population. Gen Y is strongly believing to be consumers who have the highest spending power in the market followed by Generation X (Dawn B. Valentine, 2013).

CHAPTER 2

LITERATURE REVIEW

2.0   Introduction

This chapter is divided into few main parts. For the first part, the basic paradigm and research philosophy used as guidance of this research will be discussed. The second part will discuss about the sample selection criteria for this research.

2.1   Review of Literature

Under this subsection, definition of Gen Y, character of Gen Y, spending behaviour of Gen Y, and spending pattern of Gen Y will be discussed based on the past research studies.

2.1.1   Acceptance of Cosmetic Surgery

Cosmetic surgery is understood to be part of the individual's reflexive construction of self-identity, and leads to a focus on issues such as self-determination, self-esteem, and the relationship between body and identity (ElhamFakhriTomalieh, 2015). Acceptance is a choice, which individual made to determine what kind of actions will be taken and it is acknowledgement of facts of a situation (Kane, 2015). High degree

of acceptance meaning that individuals have addiction or dependence on a certain behaviour which is hard to define whether is good or bad. It can be a form of self-deception. Acceptance of cosmetic surgery can be explained by using the Maslow's Hierarchy of Needs motivational model theory, which include social motivation and interpersonal motivation and self-actualization (Donna Henderson-King, 2005). Motivation are used to explain why people do what they do. A motive is what drives a person to act in a certain way or at least develop a desire for specific behavior. Maslow (1943) stated that people are motivated to achieve certain needs. When one need is fulfilled a person seeks to fulfill the next one, and so on. The earliest and most widespread version of Maslow's hierarchy of needs includes five motivational needs, often described as hierarchical levels within a pyramid.

Social motivation can be defined as the belongingness of individual to be accept by work group, family, affection or relationships (Shelly L Gable, 2012). Belongingness needs can also relate to desires for love, friendship within one's given community (Barnet, 2015). Acceptance of cosmetic surgery underlies on one's concern about their appearance which it serves as a mean to boost own self-esteem and enhance social or career potential (Bill Thornton, 2013). Figure 2.1 shows the Maslow's hierarchy of needs model which consists of 5 stages. This model was developed by Abraham Maslow which suggests that "individual needs exist in a hierarchy consisting of physiological needs, security needs, belongingness needs, esteem needs and self-actualization needs" (Barnet, 2015). According to the model, physiological needs include some basic requirements such as food, water and other factor that required for one to survive; safety needs are the safety need one required in a physical environment; belongingness needs come as the third stage which stated that individual need the sense of belonging and love from one another; esteem needs are those associated with one's self respect and others and finally self actualization is the last stage which mentioned that individual need to feel the achievement of own potential and capacities (Maslow, 1943). As mentioned by Henderson-King and Henderson-King (2005) one's acceptance level can be measure through belongingness needs and esteem needs, which this research will focus more on the

social influence and self reported information to test on the acceptance level of cosmetic surgery.

Figure 2.1: Maslow's Hierarchy of Need Model

Self-Actualization

Personal Growth and Fulfillment

Esteem Needs

Achievement, Status, Responsibility, Reputation

Belongingness and Love Needs

Family, Affection, Relationship, Work Group, etc

Safety Needs

Protection, Security, Order, Law, Limits, Stability, etc

Biological and Physiological Needs

Basic Life Needs – Air, Food, Drink, Shelter, Warmth, Sex, Sleep, etc
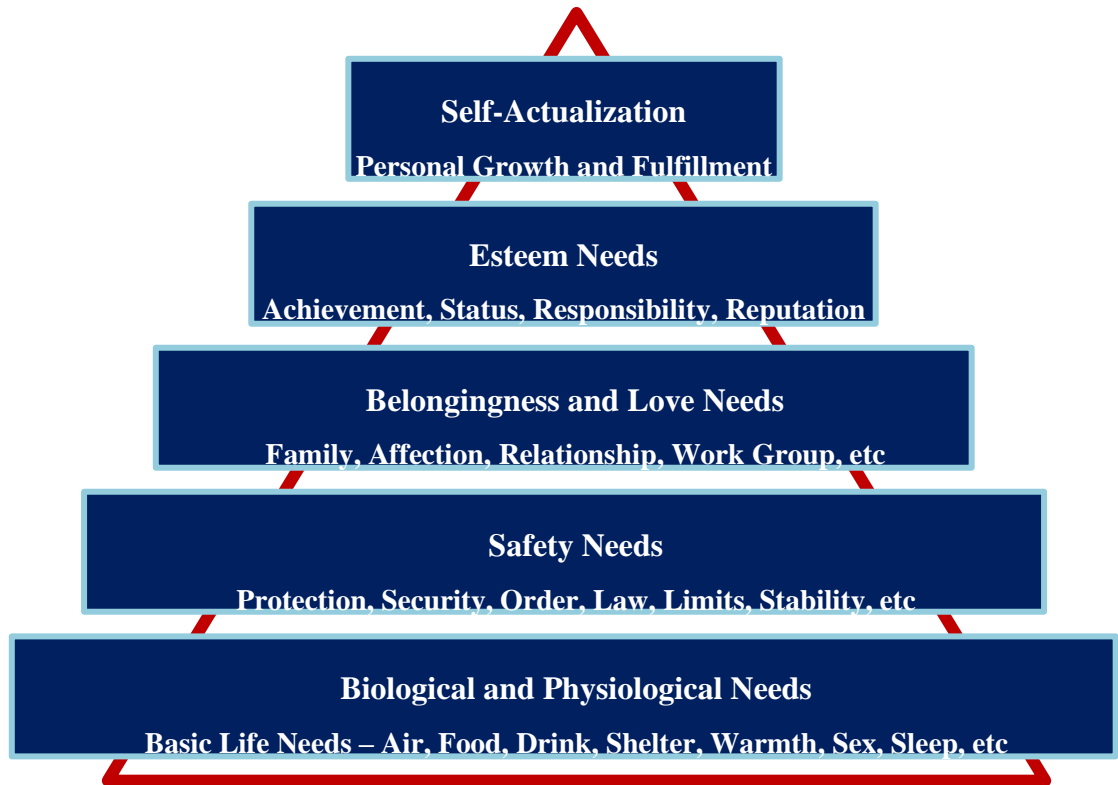
How do consumers think about cosmetic surgery? Do consumers feel bad about their bodies? What kind of attitudes will be given by consumers towards the others who had cosmetic surgery before? All these questions examine the acceptance of cosmetic surgery and the outcome will come along with a short narrative about the future behaviour of consumers towards cosmetic surgery (Fuzzell, 2010). Acceptance of cosmetic surgery may be correlated with body image (Swami V. P., 2009).

All the explanation above can be further proved by objectification theory which stated that as with women, men (and boys) may come to internalize these standards and engage in self-objectification (McKay, 2013). Dawn M. Szymanski (2011) wrote that

"objectification theory posits that girls and women are typically acculturated to internalize an observer's perspective as a primary view of their physical selves". In another word, objectification theory provides an illumination that female tends to have higher acceptance towards actions that can lead to better improvement on their body. Objectifying occurs within actual interpersonal, social encounters, visual media and lastly culture (Rachel M.Calogero, 2016). Women are gazed at more than men and they tend to have more conscious about the body appearance more than male. Secondly, objectification theory proposed that sexually objectifying gaze will influence female to be more aware of their attractiveness as males are pictured looking or staring directly on female often. At a psychological level, objectification theory suggested that individual who adopt a peculiar view of self and perceived themselves as objects to be looked at and evaluated tends to accept, believe and carry out actions that they perceived to be right and increase their attractiveness (Dawn M. Szymanski, 2011). This indicates that the acceptance of cosmetic surgery which is believe to help consumers to improve appearance may be influenced by the degree of self-esteem, approval or influence of others and self-accessed attractiveness, which again formed the theoretical framework as proposed beforehand.

Research was carried out in order to understand the top reasons for consumers to undergo cosmetic surgery and the outcome was self-esteem, better attractiveness, appearance improvement and conformity to the others. Research also reported that the acceptance of cosmetic surgery is completely personal and hardly related to the external environment as the decision made for cosmetic surgery was socially constructed (Bill Thornton, 2013). Additional exploratory analysis showed that education level will influence the acceptance level of cosmetic surgery. Research done Swami C. B. (2011) reported that acceptance level of cosmetic surgery can be determined by measuring the personality of consumers, level of consumers' self esteem, degree of conformity, self-accessed attractiveness and demographics such as gender and education level. By summarizing all the past research, the theoretical framework of this research was generated as shown in Figure 2.2 which the dependent variable, Acceptance level of cosmetic surgery is believed to be influenced

by three independent variables such as Self-Esteem, Conformity and Self-Accessed Attractiveness and Gender will be used as a moderator for this research.

2.1.2 Self-Esteem

Self esteem refers to aspects of the way we view ourselves, the thoughts we have about ourselves and the value we place on ourselves as people" (Fennell, 2016). When one felt themselves as a person of worth, the self-esteem value within the one is high. When one is with positive self-esteem, they tend to be more confident, self-directed, aware of personal strengths, optimistic, good self-care and have high trust towards self (Rosenberg M. , 1965). When one felt themselves as a person of worth, the self-esteem value within the one is high. High self-esteem individuals tend to be more positive and believe that they have the ability to take charge of own life without any aid or changes in their life, which tend believe to have a lower acceptance level towards cosmetic surgery (Viren Swami J. L., 2012).

For individuals who are low self-esteem, they tend to feel unworthy, incapable, and in fact feel poorly within self and often feel like there is a need to improve self by enhancing own appearance or figure. Low self-esteem may cause one to have feelings of mistrust people, fear of taking risks, perfectionist attitude towards people and self and fear of being ridiculed (Tam, 2012). One with lower self-esteem will more likely to accept cosmetic surgery as they are eager and aggressive in enhancing and improving own self. Besides, Tam (2012) also reported that individuals who have lower self-esteem tends to have stronger concern about their appearance which then led to higher acceptance of cosmetic surgery. Self-esteem is the general feelings of one have for themselves.

2.1.3 Conformity

As "conformity is the degree of an individual's behaviours, attitudes or belief that will be adjusted to meet another group or someone else's expectation" (Makan Amini, 2010), conformity can also be indicates as an agreement to the majority. Conformity can occur as social pressure to one. Social pressure is a measure that examine the tendency of one to compare self with the group, the images showed by the media, the perception of the peers and families or even the look of models and actors (Swami V. P., 2009). There are several types of conformity, for example Mann (1987) identified that there are three types of conformity which are Normative, Informational and Ingratiation. For this research, the degree of conformity will be mainly focus on the ingratiation conformity which is influential of peers, family members and partners influence. H_2 shows the hypothesis proposed for this independent variable and the dependent variable.

1)   Normative Conformity

It comes in as a form of group pressure where individual feel like fitting themselves in as a group with the others. However, marketer may have to be careful as this form of conformity may involves compliance which some individual accepts the view of the group publicly while rejecting it privately (McLeod S. , 2007).

2)   Informational Conformity

Informational conformity occurs when individual is lack of knowledge and information and seeking for guidance and help from the group. This type of conformity often involves an individual accepts the views of groups and adopt them individually, hence group influence only comes in the first few stage and self decision making comes later.

3)   Ingratiation Conformity

This occurs when an individual trying to gain acceptance from other people such as friends, families or partners. Unlike normative influence, ingratiation conformity comes in when group pressure is just part of the decision to conform and individual is seeking the need for social rewards.

For this research, the degree of conformity will be mainly focus on the influential of peers, family members and partners influence. H_2 shows the hypothesis proposed for this independent variable and the dependent variable.

2.1.4   Self-Accessed Attractiveness

Self-accessed attractiveness in this research refers to the degree to how an individual rate themselves as pleasing or attractive based on the physical appearance, body size, height, weight and figure (Teresa Rzepa, 2014). The term physical appearance somehow being implied as sexual attractiveness or desirability of one. It can be evaluated by both gender, in other word, both male and female can evaluate their own physical traits in order to determine whether or not they are attractive for themselves and the others (S.Koziel, 2013). Research found that normally attractiveness is more commonly be found in new relationships, which individual tends to have higher conscious about their own and be more aware about their attractiveness for the new partner. This implies that when individuals are in a relationship, they tend to take care of their appearance and physical attractiveness more, which tend may lead to higher likeability towards cosmetic surgery, and higher acceptance of cosmetic surgery.

2.1.5   Gender Influencing Acceptance Level

Adrian Furnham (2014) mentioned that females are expected to go for cosmetic surgery in British than males given that the majority of cosmetic surgery patients are women. Women will undertake cosmetic treatment in order to obtain bodies that meet the ideal feminist look regardless of the cosmetic surgery, which is often painful and risky, and each operation involves its own potential complication. These women appear to be very obsessed with their physical appearance (ElhamFakhriTomalieh, 2015). The increase of cosmetic surgery is a result of fighting signs of aging. It is an attempt to reproduce the body's youth and to make general corrections of what is perceived as bodily problems, even among very young consumers which has made cosmetic surgery one of the fastest growing industries (Haiken, 2015).

Aimini Makan (2010) also reported that due to different sex may have different practical implications on the information and norm influences, sex differences are particularly a moderator towards conformity. Fuzzell (2010) mentioned that women tend to have a lower body image than men which then have a higher acceptance towards cosmetic surgery and hence gender will definitely have an effect on acceptance of cosmetic surgery. The immediate past president of MSAM, Dr. Chin Shih Choon also commented that there were more female than male clients (Chin, 2015), hence there is a need for this research to take gender as a moderator towards the relationship between conformity and acceptance level.

2.2   Hypotheses

Hypotheses are statements which illustrate the predicted relationship between events and variables, and the hypotheses of this research will be as follow:

H_1: Self-esteem will have a direct positive effect on the acceptance level towards cosmetic surgery.

H_2: Conformity will have a direct positive effect on acceptance level towards cosmetic surgery.

H_3: Self-accessed attractiveness will have a direct positive effect on the acceptance level towards cosmetic surgery.

H_4: Gender will affect the relationship between conformity and acceptance level towards cosmetic surgery.

2.3   Theoretical Framework

Figure 2.2: Theoretical Framework
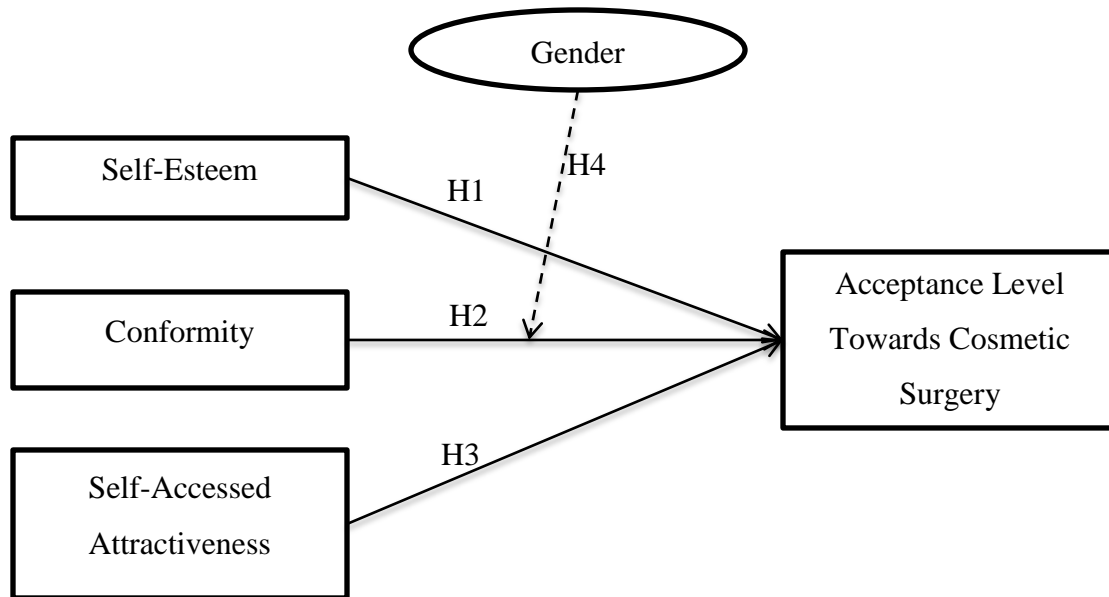
Source: Developed for the research.

CHAPTER 3

RESEARCH METHODOLOGY

3.0   Introduction

This chapter is divided into few main parts. For the first part, the basic paradigm and research philosophy used as guidance of this research will be discussed. The second part will discuss about the sample selection criteria for this research. Methods used to carry out to collect data for this research will be discussed in part three and lists of analysis tests for this research will be determined in part four.

3.1   Research Paradigm

This study applies the positivism paradigm to guide the research design. For positivists, knowledge about the social world can be obtained objectively, what we see and hear is straightforwardly perceived and recordable without too many problem (Edirisingha, 2012). All the information and data required for this research can be observed, measured and studied scientifically. Variables can be isolated, measured the ways they varied, look at the relationships between variables, develop hypotheses about these relationships and draw conclusions on the basis of these studies. (Creswell, 2014) stressed out that a positivism research was started with a theory, which this research will be aided by the Objectification Theory and Motivation Theory.

3.2   Research Design & Approach

The theoretical perspective most often associated with quantitative researchers is phenomenology (Gray, 2013). As for this research, only quantitative methods will be used. A descriptive study primarily focused on determining the "cause-effect" relationship between variables. It is used to obtain information with methods that trying to describe what is existing with respect to the situational variables. Based on (Williams, 2011),developing different techniques in a quantitative research able to produce data in the form of numbers, for example, a quantitative research method provides precise, quantitative, and numerical data. In this research, questionnaires were given out to collect analytical data and several tests will be carried out to provide more interesting information. Questionnaires will be given to working adults and university students whom aged between eighteen to thirty-seven.

3.3   Sampling Method

This research is using non-probability sampling method. Quota sampling is useful for data collection without a probability sample as it will create a sample that is as representative as possible for the target population being studied (Creswell, 2014). "The quota sample improves the representation of particular strata (groups) within the population, as well as ensuring that these strata are not over-represented" (Mettle L. Baran, 2016). Rada and Martin (Vidal Diaz de Rada, 2014) mentioned that quota sampling is the best method to collect data for better representation of categorical variable attainment distribution. Quota samplings is a cheap and convenient method to generate a sample when a probability sample is not available for data collection process (Mettle L. Baran, 2016). Quota sampling can well control respondents in a selected cluster in order to define the ultimate survey units. The research can have a higher degree of representative when it has a well controlled samples (Jae W. Song, 2011). Quota sampling method give a better way to represent a population more

realistically and it can obtain results close to conventional probability sampling (Gergely Szolnoki, 2013).

As gender will be focus for the forth hypothesis and test for moderation effect towards relationship, quota sampling increases the reliability of the test and reduce maximum bias (Creswell, 2014).

3.3.1   Respondents' Profile

Two hundred and sixty questionnaires were given out to undergraduates who currently stays in Malaysia for the data collection process. All the respondents are equally divided into 50% male and 50% female, age ranging between eighteen to thirty-seven years old. These participants are selected carefully in order to make sure there will be minimum biases for the data collected. In order to reduce the biasness of this research, all respondents will be asked several screening questions before they were given the questionnaire to answer. Questions such as "Are you currently staying in Malaysia for long term?" and "Are you aged between eighteen to thirty-seven?" the answer from respondents will need to be "yes" and the age will need to fall into the age within target sample in order for the questionnaires being take into account.

3.4   Construct Measurement

Majority of the items in the questionnaire used 7 point Likert scales. "7-point Likert scale is more likely to reflect a respondent's true subjective evaluation of a usability questionnaire item than a 5-point item scale" (Finstad, 2017).

3.4.1 Acceptance of Cosmetic Surgery Scale (ACSS)

The acceptance of cosmetic surgery scale was found in Henderson-King & Henderson-King (2005) which is a method specifically designed to measure the elements towards consumers' attitude of cosmetic surgery. For the purpose of the current study, the ACSS consists of nine statements to which respondents indicates their level of agreement. Response options are ranged from 1 (strongly disagree) to 7 (strongly agree).

Respondents were required to answer questions such as "Cosmetic surgery is a good thing because it can help people feel better about themselves.", "In the future, I could end up having some kind of cosmetic surgery.", "If it would benefit my career I would think about having cosmetic surgery." and "I have sometimes thought about having cosmetic surgery." To examine respondents' acceptance level of cosmetic surgery. The higher the mean, the higher the acceptance level of cosmetic surgery.

3.4.2 The State Self-Esteem

The State Self-Esteem Scale is a modified scale comprised of 20 items from Pliner et. al (1990) and Fleming & Courtney (1984) modified Janis-Field scales (Heatherton, 1991). However, only six items were used for the questionnaires in this research after factor analysis. SSE Scale assesses self-esteem in five elements: academic, performance, social, appearance, and general self-esteem. Each item in scored on a 7-point Likert scale with response options ranging from Strongly Disagree (1) to Strongly Agree (5).

Respondents are enquired questions such as "I take a positive attitude towards myself", "I am able to do things as well as most other people do" and "I feel that I have a number of good qualities" in order to understand further about the self-esteem level of the target sample.

3.4.3   Conformity

To access participants' conformity to the others, respondents are required to complete six statement using the Martin-Larsen Approval Motivation Scale (Martin, 1984). MLAM-sf was created to measure the desirability of respondent towards receiving evaluations and approval from the society, friends and families. It contains some counter-balanced statements to which required respondents to answer based on 7-point Likert scale ranging from Strongly Disagree (1) to Strongly Agree (1) in order to further express their inner thoughts. Higher scores reflect a higher need for acceptance or social approval.

In order to examine the degree of conformity, respondents were given questions such as "I often rely on, and act upon, the advice of others.", "I change my opinion in order to please someone else.", "In order to get along and be liked, I tend to be what people expect me to be." And "It is important to me that I behave "properly" in social situations."

3.4.4   Self-Accessed Attractiveness (SAA)

Respondents are required to provide self-estimates of their overall physical attractiveness, overall facial attractiveness, overall attractiveness of body weight and higher, and overall perceived self-attractiveness. The questions included in the questionnaire are modified and the original scale consists of twenty questions which required respondents to grade various body parts using a normal distribution curve. It was modified to become six simpler statements in order to make sure that respondents will not get too confused in answering the questionnaire (Swami et al., 2009).

All the respondents were required to grade themselves by strongly disagree or strongly agree about statements such as "I think my overall physical attractiveness is

high", "I think myself overall facial is attractive", "For me, my body weight and size are attractive" and "I find my overall body weight and size is attractive."

3.5   Research Instrument

Several scales were adapted from past researches in order to build the questionnaire for this research.

Table 3.1: Questionnaire Design

Items	Adopted from
Part A	
1. It makes sense to have minor cosmetic surgery rather than spending years feeling bad about the way you look.	
2. Cosmetic surgery is a good thing because it can help people feel better about themselves.	Acceptance of Cosmetic Surgery Scale (Swami, V., Premuzic, T. C., Bridges, S., and Furnham, A., 2009)
3. In the future, I could end up having some kind of cosmetic surgery.	
4. People who are very unhappy with their physical appearance should consider cosmetic surgery as one option.	
5. I have sometimes thought about having cosmetic surgery.	
6.I would seriously consider having cosmetic surgery if my partner thought it was a good idea.	
7. If it would benefit my career I would think about having plastic surgery.	
8.I would seriously consider having cosmetic surgery if I thought my partner would find me more attractive.	

9. If a simple cosmetic surgery procedure would make me more attractive to others, I would think about trying it.	
Part B	
10. On the whole, I am satisfied with myself.	Self Esteem Scale (Resenberg, M., 1965)
11. At times, I think I am no good at all.	
12. I feel that I have a number of good qualities.	
13. I am able to do things as well as most other people do.	
14. I feel I do not have much to be proud of.	
15. I take a positive attitude towards myself.	
Part C	Conformity Scale (Swami, V., Premuzic, T. C., Bridges, S., and Furnham, A., 2009)
16. I often rely on, and act upon the advice of others.	
17. I would rather be myself than be well thought of.	
18. I change my opinion (or the way that I do things) in order to please someone else.	
19. In order to get along and be liked, I tend to be what people expect me to be.	
20. It is important for me that I behave "properly" in social situations	
21. If there is any criticism or anyone says anything about me, I can take it.	
22. I am careful at parties and social gatherings for fear that I will do or say things that others won't like.	
Part D	The Estimating Physical Attractiveness Scale
23. I think my overall physical attractiveness is high.	
24. I find myself overall facial is attractive.	
25. For me, my body weight and size are attractive.	
26. I find my overall body shape and figure is attractive.	

| 27. I am satisfied with my current height. | (Talbot, T. L., |
| 28. I will grade myself as an attractive person. | Lenzo, C. B., 2012) |

Source: Developed for the research.

3.6   Data Analyses

For the data analysis process for this research project, Statistical Package for the Social Science (SPSS) software was used. All the data were key in after data collection process and several tests were carried out to generate the findings of this project. For example, Reliability test was carried out to determine the reliability of this research, Descriptive Frequency Test was carried out to measure the frequency of certain useful data collected via the questionnaires, multiple linear regression was used to test the relationship between dependent variable and independent variables and also moderation effect of gender towards the relationship and lastly, coefficient correlation test was carried out to determine the pattern of relationship between all variables.

Table 3.2: Types of Test

Types of Test	Purpose
1. Descriptive Frequency	- To outline the demographics of respondents
2. Reliability Test	- To investigate the reliability of the current study, cronbach alpha must be >0.7 to be reliable
3. Normality Test	- To ensure all the data are normally distributed, value of skewness must be at sig. level of <0.05

4. Factor Analysis	- To retain only useful items for variables, value of grouped items must be >0.35
5. Multiple Linear Regression	- For hypotheses testing and to test for moderation effect, sig. value must be <0.05 to be significant

A pilot study was a final preparation for data collection, in order to refine the data collection plan in terms of content and procedure to be followed (Baškarada, 2014). Pilot test provide researcher with interviewing experience and feedback regarding the interview guide and improve skills in writing field notes. Fifty pilot tests were carried out on target participants through online survey. All the data collected from pilot tests were used to pre-test the validity and reliability of variables that are going to be used in this research. Respondents were enquired about their understanding of the questionnaire upon completion and were allowed to provide useful comment or further improvement about the questionnaire.

Reliability test will be carried on the 50 results collected from respondents and the results shown must have all variables to have a cronbach alpha of more than 0.6. The research items are reliable as long as the cronbach alpha is 0.7 or greater. The purpose of carrying out reliability test before hand is to clean all the data and make sure that this research is worth and correct to carry out further.

CHAPTER 4

RESEARCH RESULTS

4.0   Introduction

Within this chapter, it is divided into few main parts. For the first part, the research background, research problem statement will be discussed. Next, the overview of the research such as research objectives, research questions and research hypotheses will be listed as guidance of this research. Significance of study and scope of study will be further explained in the last part of this chapter which the gap of researches identified and target respondents will be mentioned.

4.1   Response Rate

Table 4.1: Rate of Return of Questionnaires

Questionnaires Distributed	300
Total Response	260
Total Response Rate (%)	86.7%

Source: Developed for the research.

In this study, a total of 300 sets of questionnaires are distributed to the working adults and postgrads students in Klang Valley, Malaysia. The researcher received 260 sets of complete questionnaires which indicated a response rate of 86.7%.

4.2   Descriptive Analysis

Descriptive analysis was used to determine frequency and percentage to all the responses by the respondents. The 260 responses collected were explained in this section.

Table 4.2: Statistics

		Gender	Nationality	Monthly Allowance	Race
N	Valid	260	260	260	260
	Missing	0	0	0	0
Mean		1.50	1.15	1.68	1.44
Mode		1[a]	1	1	1
Std. Deviation		.501	.447	.948	.870
Skewness		.000	3.003	1.070	1.879
Std. Error of Skewness		.151	.151	.151	.151
Percentiles	25	1.00	1.00	1.00	1.00
	50	1.50	1.00	1.00	1.00
	75	2.00	1.00	2.00	1.00

Source: Developed for the research.

Table 4.3: Gender

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Male	130	50.0	50.0	50.0
	Female	130	50.0	50.0	100.0
	Total	260	100.0	100.0	

Source: Developed for the research.

Table 4.4: Monthly Allowance

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	RM1000 and below	158	60.8	60.8	60.8
	RM1001 - RM2000	42	16.2	16.2	76.9
	RM2001-RM3000	46	17.7	17.7	94.6
	RM3001 AND ABOVE	14	5.4	5.4	100.0
	Total	260	100.0	100.0	

Source: Developed for the research.

Table 4.5: Race

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	CHINESE	196	75.4	75.4	75.4
	MALAY	28	10.8	10.8	86.2
	INDIAN	21	8.1	8.1	94.2
	NON-MALAYSIAN	15	5.8	5.8	100.0
	Total	260	100.0	100.0	

Source: Developed for the research.

Table 4.2 to 4.5 shows the demographic profile of all 260 respondents who are all stay in Malaysia currently. All the questionnaires are equally distributed to 130 male respondents and 130 female respondents. The income group were categorised to two groups which are the high income and low income group. 76.2% of the respondents have monthly allowance of not more than RM2,000 and they are considered as the low income group which 23.1 % of the respondents were renamed as high income group as they have income of more than RM20,001.

The dependent variable of acceptance level towards cosmetic surgery has a mean of 3.90 with standard deviation of 1.572. The mean of independents variables, Self-Esteem is 5.14 with a standard deviation of 1.026, Conformity 4.50 with standard deviation of 1.115 and Self-Accessed Attractiveness has a mean of 4.44 with standard deviation of 1.211.

4.3　Reliability Test

Table 4.6: Reliability Test

Cronbach's Alpha	Cronbach's Alpha Based on Standardized Items	N of Items
.820	.823	3

Source: Developed for the research.

Table 4.7: Reliability Statistics I

Cronbach's Alpha	Cronbach's Alpha Based on Standardized Items	N of Items
.703	.712	7

Source: Developed for the research.

Table 4.8: Reliability Statistics II

Cronbach's Alpha	Cronbach's Alpha Based on Standardized Items	N of Items
.925	.926	5

Source: Developed for the research.

Reliability test were carried out again to measure the reliability of variables after collecting all the data from 260 respondents. The results showed that Cronbach's alpha obtained from the second tests are higher than the first reliability test, and hence result from second analysis is used. The dependent variable scored 0.952 without any items to be deleted, and Self-Esteem scored 0.820 with 3 items deleted, Conformity scored 0.703 without any items to be deleted and Self-Accessed Attractiveness scored 0.925 with 1 item deleted. This research will proceed based on the results from

second test as the Cronbach's alpha of all variables are higher and items to be deleted are lesser.

4.4   Normality Test

A normality test has been carried out to make sure that all the data were distributed normally that it is suitable to generate statistical results for this research (Cash, Duel & Perkins, 2002). Skewness and the Kurtosis variable are used to evaluate the normality of the data.

Table 4.9: Normality Test

Variable	Mean	Std. Deviation	Skewness		Kurtosis	
			Statistic	Std. Error	Statistic	Std. Error
Acceptance Level	3.90	0.098	-0.037	0.151	-1.012	0.301
Self-Esteem	5.16	0.060	-0.587	0.151	0.323	0.301
Conformity	4.53	0.069	-0.148	0.151	-0.239	0.301
Self-Accessed Attractiveness	4.44	0.075	-0.321	0.151	0.096	0.301

Source: Developed for the research.

As shown in Table 4.9, the values obtained from the normality test by all variables are ranged between -0.587 and 0.323. Normality test evaluate the data collection process which if the kurtosis index is below 10 and the skewness index is less than 3, the data collected is normally distributed (Myers et al., 2003). The results show that the data collected for this research were normally distributed and collected, and hence this research is a valid research.

4.5 Coefficient Correlation

Coefficient correlation test has been conducted to measure the correlation relationships between all dependent and independent variables. Table 4.7 shows the value for Pearson Correlation and significant value.

Table 4.10: Coefficient Correlation

Correlations			
DV	IV1	IV2	IV3
1	.179**	.446**	.219**
	.004	.000	.000
260	260	260	260
.179**	1	.375**	.492**
.004		.000	.000
260	260	260	260
.446**	.375**	1	.308**
.000	.000		.000
260	260	260	260
.219**	.492**	.308**	1
.000	.000	.000	
260	260	260	260
**. Correlation is significant at the 0.01 level (2-tailed).			

Source: Developed for the research.

Table shows the value for Pearson Correlation and significant value. Result showed that the relationship has scored a beta of 0.446 with significant value of 0.000, indicating that conformity has a positive relationship towards acceptance level with a significant value of 0.000.

4.6   Multiple Linear Regression

Table 4.11: Model Summary

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate	Change Statistics					Durbin-Watson
					R Square Change	F Change	df1	df2	Sig. F Change	
1	.455[a]	.207	.198	1.40825	.207	22.287	3	256	.000	1.440

Source: Developed for the research.

Table 4.12: Coefficients[a]

Model	Unstandardized Coefficients		Standardized Coefficients	t	Sig.	95.0% Confidence Interval for B	
	B	Std. Error	Beta			Lower Bound	Upper Bound
1 (Constant)	.845	.500		1.691	.092	-.139	1.830
IV1	-.048	.102	-.031	-.471	.638	-.248	.152
IV2	.601	.086	.426	7.016	.000	.432	.770
IV3	.134	.084	.103	1.594	.112	-.032	.299

Source: Developed for the research.

Table 4.13: ANOVA I

Model		Sum of Squares	df	Mean Square	F	Sig.
1	Regression	132.600	3	44.200	22.287	.000[b]
	Residual	507.694	256	1.983		
	Total	640.294	259			

*** *Significant value <0.01 **Significant value <0.05 *Significant value <0.1*

Source: Developed for the research.

Table shows the value of R-Square generated from the multiple linear regression tests. When there is no relationship between independent and dependent variables, the r-square will be 0 and if there is a perfect relationship between dependent and independent variables, then the r-square will be 1. The result shows that the r-square value is 0.207 which indicates that all the independent variables used in this research explain 20.7% of the variability of the dependent variable. The result of F-test shows in table determines that the model is a good fit for the data by having a p-value of 0.000 which is less than 0.05.

Table shows the coefficient between independent variable and dependent variable to see relationship between. The significant value for the first variable, Self Esteem is more than 0.01 with a beta of -0.048, meaning that hypothesis null is not rejected. Conformity is the second variable and it has a beta of 0.601 with significant value of 0.000, which is lower than 0.01, hence hypothesis null 2 is rejected. Hypothesis null for the third variable, Self-Accessed Attractiveness is not rejected as it has beta of 0.103 with significant level more than 0.01.

From the result generated, it enables us to make an equation for the regression line which is:

$$Y = a + b1 *X1 + b2 * X2 + \ldots + bp*Xp$$

$$Y = 0.0845 + 0.601 \text{ (Conformity)}$$

This equation explains that:

- Conformity will influence the acceptance level towards cosmetic surgery by 0.601 ph constantly.

4.7   Linear Regression

Table 4.14: ANOVA II

Model		Sum of squares	df	Mean square	F
1	Regression	132.600	3	44.2	22.287**
	Residual	507.694	256	1.983	
	Total	640.294	259		

*significant at the 0.1 level, ** significant at the 0.01 level*

Source: Developed for the research.

The result of F-test shows in table 4.14 determines that the model is a good fit for the data by having a p-value of 0.000 which is less than 0.05. The F-value is determined to measure the potential that there will be at least one relationship appear by conducting the linear regression analysis (Aaker et al., 2003). The F value for this research is recorded at 22.287 and the p-value indicates that it is significant, thus the null hypothesis is rejected.

Table 4.15: Model Summary of MLR Test

Model	R	R²	Adjusted R-Square	Std. Error	Durbin-Watson
1	0.455	0.207	0.198	1.4082	1.440

Source: Developed for the research.

The model summary showed in table 4.15 is obtained from linear regression test to assess the variance explained by the construct within the study. R-Square, also known as the Coefficient of determination is a commonly used statistic to evaluate model fit. R-square is 1 minus the ratio of residual variability. When the variability of the residual values around the regression line (Field, 2009). The result from the test showed that a total of 20.7% of the variance of the outcome has been explained by the model adopted by this study. The lower the R^2 indicated that there are more factors may be relevant towards the outcome of the independent variable of this study are not included. Durbin-Watson with value of 1.440 showed that there is absence of autocorrelation from the regression analysis (Montgomery, Peck and Vining, 2001), in another word there is no relationship between values separated from each variables and no pattern shown in error of this research.

Table 4.16: Collinearity Statistics

Variables	Collinearity Statistics	
	Tolerance	VIF
Self Esteem	0.703	1.423
Conformity	0.842	1.191
Self-accessed attractiveness	0.740	1.351

Source: Developed for the research.

The variation inflation factor (VIF) of each variable suggest that there are association recorded between variables which proposed the potential existence of multicollinearity in this study (Craven & Nash, 2009). As proposed by Bowerman & O'Connell (1990), the acceptable threshold in defining the absent of multicollinearity is proposed with the tolerance values of more than 0.1 and the VIF value of less than 10. As shown in the table that all variables have fulfilled the requirement proposed, hence the current study hereby present a zero multicollinearity within the model and the tolerance level is acceptable.

Table 4.17: Coefficient

Hypothesis	Unstandardized Coefficients		Standardized Coefficients	t-statistic	Sig. (p-value)	Decision
	Beta	Std. Error	Beta			
(Constant)	0.845	0.500				
SE -> AL	-0.048	0.102	-0.031	-0.471	0.638	Not Supported
C -> AL	0.601	0.086	0.426	7.016**	0.000	Supported
SAA -> AL	0.134	0.084	0.103	1.594	0.112	Not Supported

Notes: SE = self esteem; AL = Acceptance level; C = Conformity; SAA = Self-accessed attractiveness

*significant at the 0.1 level, ** significant at the 0.01 level*

Source: Developed for the research.

Table 4.17 shows the coefficient between independent variable and dependent variable to see relationship in between. All the independent variables were tested individually on the dependent variable to understand the relationship in between. This method was carried out in order to make sure that there is no overlapping in the data

which will affect the p-value that identify the significant level of each relationship (Leech, Barret & Morgan, 2005).

According to the result obtained, the first proposed hypothesis which is the causal relationship between acceptance level of cosmetic surgery and self-esteem is not significant. The relationship between self-esteem and acceptance of cosmetic surgery has scored a beta of -0.048 and t-stats of -0.471 with a p-value of 0.638 which is higher than 0.05. Hence, the decision of not supporting H_1 is made.

H_2 which proposed that conformity will influence the acceptance level of cosmetic surgery has a beta value of 0.601 and t-stats value of 7.016 with a p-value of less than 0.01. This indicates that the relationship between acceptance level and conformity is significant and supported at 95% confidence interval of the construct. In another word, H_2 is supported.

Self-accessed attractiveness is the third variable which proposed that there is a relationship between acceptance level of cosmetic surgery and self-accessed attractiveness is not supported as well due to the p-value scored for the relationship is more than 0.01. H_3 has a beta of 0.134 and t-stats of 1.594, but the p-value scored in this test is 0.103, which is higher than 0.01. Hence the decision of not supporting H_3 is made for this research.

4.8   Moderation

In order to test whether or not gender will moderate the relationship between conformity and acceptance level, the moderation test was carried out by using multiple linear regression analysis. The technique and steps used to investigate the moderation relationship were showed below.

Step 1: Recode categorical variable > Dummy Variable

Step 2: Centered both dependent and independent variable > Centered Variable

Step 3: MLR test on dependent, independent and categorical variable

Table 4.18: Moderation Effect

Model	R	R Square	Std. Error	t-stats
1	0.463	0.215	1.399	2.259**
2	0.974	0.949	0.356	60.948**

*significant at the 0.1 level, ** significant at the 0.01 level*

Source: Developed for the research.

Moderation effect occurs when R-Square of one model increase in another interaction relationship (Dujin, 2011). Table 4.18 showed the results obtained through multiple linear regression and r square scored in model 1 did increase in model 2, indicating that moderation effect does exist on the relationship between acceptance level and conformity. R Square for model 1 increase from 0.215 to 0.949 in model 2, it stated that there is potentially significant moderation between these two variables. The p-value for both model in this test are 0.000 which is less than 0.01 indicates that this relationship is significant. ModGraph was used in order to further understand how gender moderate the relationship.

Figure 4.1: Mod Graph
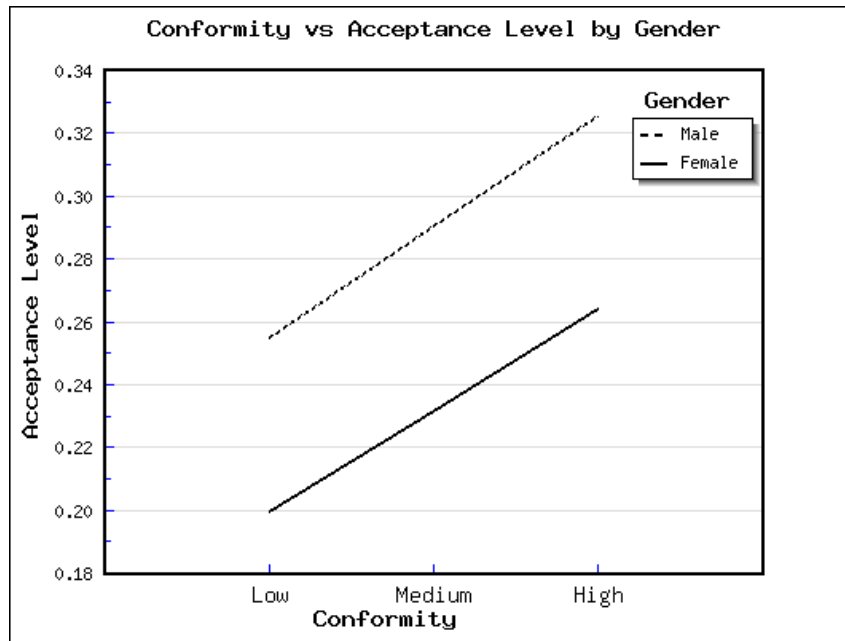
Source: Developed for the research.

Figure 4.1 showed the ModGraph generated by inserting the beta and mean of each variables. The graph showed that both gender tend to have a higher acceptance level when conformity goes higher, which male has a higher influence compared to female.

Table 4.19: Moderation Effect Slope Conformity Acceptance Level by Gender

|	Low	Med	High
Male	0.25448	0.29	0.32552
Female	0.19931	0.2315	0.26369

Source: Developed for the research.

Table 4.19 showed the value scored by the slope shown in ModGraph which representing the acceptance level for each gender in different conformity stages.

Conformity was divided into three categories, low, medium and high and value were plotted to show the relationship. As we can see, the value of slope for both gender increase when conformity increase, which again proved the relationship between acceptance level and conformity. Moderation effect occurs when male tends to have a higher acceptance level compared to female at the same level of conformity. The acceptance level of female towards cosmetic surgery is just 0.19931 when conformity is low while male has a score of 0.25448.

4.9   Results from Hypotheses Testing

Figure 4.2: New Theoretical Framework
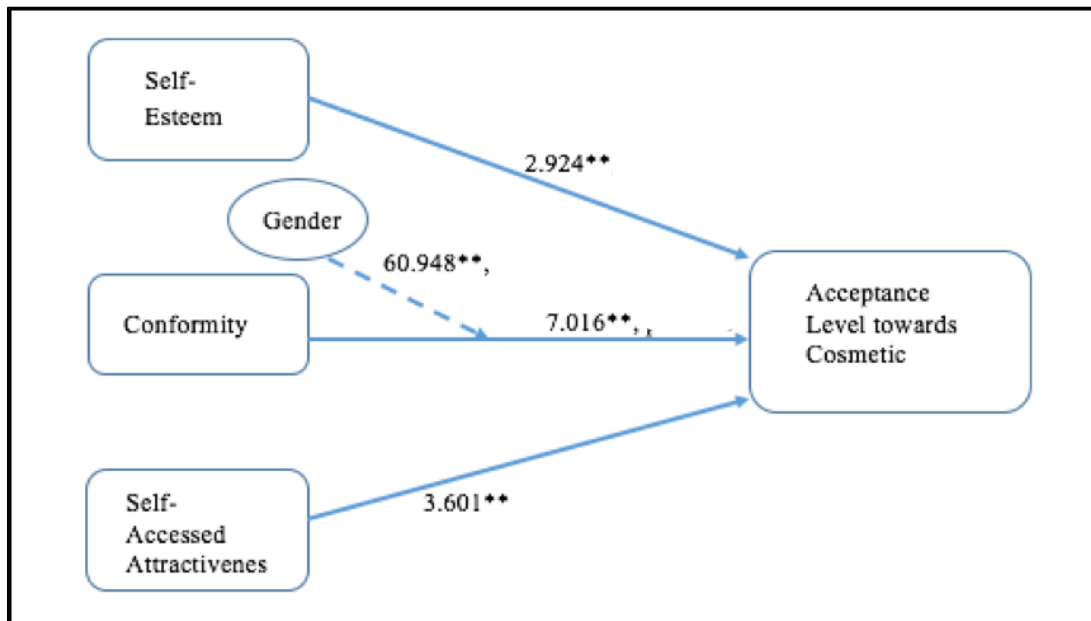
Notes: ⟶ Direct relationship ‑‑‑► Moderation effect
*significant at the 0.1 level, ** significant at the 0.01 level

Source: Developed for the research.

Figure 4.2 showed the new theoretical framework generated after conducting all the analysis to validate the causal relationships between all the predictor variables and

acceptance level of cosmetic surgery of Gen Y in Malaysia. The findings suggest that all the proposed relationship are significant and self-esteem, conformity and self-accessed attractiveness do have direct relationship towards acceptance level of cosmetic surgery. As seen, H_1, H_2 and H_3 are supported with a significant value of 0.000. Besides, the proposed moderation effect of gender will influence the relationship between conformity and acceptance level was tested and the result is significant. All the hypothesized relationship for this study are entirely supported as proposed.

CHAPTER 5

DISCUSSION AND CONCLUSION

5.0   Introduction

For this chapter, the overall discussion about the whole research project will be discussed. Hypotheses proposed will be discussed one by one based on past researches and possible assumptions of insignificant relationship among variables will be examined and elaborated in the later part.

Besides, the conclusion of this whole research is presented followed by several recommendations proposed to marketers in the market. The managerial implications of this research will be discussed after the limitations and future research is listed in the earlier parts.

5.1   Discussion on Findings

Table 5.1: Hypotheses and Results

Hypothesis	t-stats	Decision
H_1: There is a positive relationship between self-esteem and the acceptance level towards cosmetic surgery.	-0.471	Not Supported

H$_2$: There is a positive relationship between conformity and the acceptance level towards cosmetic surgery.	7.016**	Supported
H$_3$: There is a positive relationship between self-accessed attractiveness and the acceptance level towards cosmetic surgery.	1.594	Not Supported
H$_4$: Gender will affect the relationship between conformity and acceptance level towards cosmetic surgery.	60.948**	Supported

*significant at the 0.1 level, ** significant at the 0.01 level*

Source: Developed for the research.

This research sought to determine the acceptance level of cosmetic surgery among Gen Y in Malaysia, as well as examine the relationship between the self-esteem, conformity and self-accessed attractiveness towards acceptance level. The data indicated that, based on the current sample comprised of diverse ethnic groups and gender, self-esteem and self-accessed attractiveness has direct influence towards acceptance level of cosmetic surgery which conformity does. Besides, there were significant differences in acceptance level of cosmetic surgery across gender and monthly allowance.

The finding of this research is consistent with the results of the study by Swami and Premuzic (2009) that had found that acceptance of cosmetic surgery is associated with participants' sex, conformity, self-esteem, self-accessed attractiveness. However, findings also showed that the acceptance of cosmetic surgery among Gen Y in Malaysia is low and the mean for the dependent variable of this research is 3.90 which indicated that most of the respondents do not agree and think cosmetic surgery is a good thing and will not consider of having cosmetic surgery in the future. Overall, the current participants endorsed the value of cosmetic surgery low and 18.1% of the respondents strongly disagree about having cosmetic surgery and 22.7% of the

respondents strongly disagree about consideration for cosmetic surgery in the future. Current research suggests that a generational effect that reflects a somewhat narcissistic and hyper-individualized young cohort may influence the degree of acceptance of cosmetic surgery by participants to enhance their appearances (Twenge, Konrath, Foster, Campbell & Bushman, 2008).

5.1.1   Findings on the Hypotheses

<u>Relationship between self-esteem and the acceptance level towards cosmetic surgery</u>

H_1: There is a positive relationship between self-esteem and the acceptance level towards cosmetic surgery.

The t-statistic of hypothesis 1 for this research is not significant with a p-value of 2.924 and coefficient correlation of 0.182. This indicates that self-esteem has a positive and direct relationship towards acceptance of cosmetic surgery and the relationship is significant at a significant level 95% confidence interval. Hence hypothesis 1 is not supported.

The decision made indicated that there is no direct relationship between self-esteem and acceptance of cosmetic surgery. From the findings of this research, we can understand that the self-esteem level of Gen Y in Malaysia is high with a mean of 5.25 for male and 5.04 for female. This indicates that the target sample of this research in Malaysia have high esteem with themselves which then having a lower acceptance towards acceptance level of cosmetic surgery. Results show that 39.2% of the respondents agree that they have a number of good qualities in them, 32.3% of the respondents agree that they believe their capabilities to do things are as well as most other people do and 33.1% of the respondents take a positive attitude towards themselves. The self-esteem variable scored a mean of 5.14 for this research, which indicated that Gen Y in Malaysia have high self-esteem within themselves and there

is not significant relationship between self-esteem value and acceptance level of cosmetic surgery within this target sample.

Research found that women, or individuals who have lower self-esteem and stronger appearance concern tends to have higher acceptance of cosmetic surgery (Hender & Henderson, 2005). However, there is also research stated that low self-esteem was not correlated with higher likelihood of having cosmetic surgery and accept it (Kvalem et al., 2006). Tam et al. (2012) mentioned that individuals tend to define cosmetic surgery as a way or method to reshape a normal structure of body in order to boost self-esteem and improve appearance, which low self esteem may not be the main association to influence individuals to have high acceptance of cosmetic surgery. Moreover, Koff (1998) mentioned that individuals with low self-esteem may associate with a higher likelihood to go for cosmetic surgery, which tend increase their acceptance of cosmetic surgery, and individuals who are highly well perceived about self may have negative interactions with acceptance of cosmetic surgery. There are studies that pointed out individuals who have high esteem may have a higher acceptance towards cosmetic surgery (Sarwer et al., 2005). However, from the understandings of the findings from this research, acceptance level of cosmetic surgery of Gen Y in Malaysia may be influenced by other factors which are not studied by this research, hence future research may focus more on other factors such as body image, big 5 personality test or social influential (Swami et al., 2009).

The variable of self-accessed attractiveness which is not significant when it was analyzed together with the other variables, is significant again when it was tested alone with the dependent variable. This may be due to the strongly variation associated with other variable during the regression analysis which separately regress the dependent variable and independent variables will make the regression line more significant (Leech et al., 2005).

Relationship between conformity and the acceptance level towards cosmetic surgery

H$_2$: There is a positive relationship between conformity and the acceptance level towards cosmetic surgery.

The t-statistic for hypothesis 2 of this research is 7.016 with a significant value of 0.000, indicating that there is a relationship between conformity and acceptance level towards cosmetic surgery. Based on the result obtained through the coefficient correlation, conformity has a positive relationship towards acceptance level of cosmetic surgery, meaning that the higher the conformity level, the higher the acceptance level towards cosmetic surgery. The relationship is significant at a significant level 95% confidence interval, hence hypothesis 2 is supported.

The relationship between this variable and acceptance level of cosmetic surgery is supported. The mean obtained for this variable is 4.50, indicating that Gen Y in Malaysia have high conformity in making decision. Conformity is a degree to determine how dependent an individual is and it can be in the form of social influential such as friends, family, partner or the current society point of view. For this research, 28.8% of the respondents agree that they will often rely on and act upon the advice of others, 25.8% of the respondents agree that they will change their opinion in order to please someone else, 23.1% of the respondents agree that they tend to be what people expect them to be in order to get along and be liked and 29.6% of the respondents agree that they ae careful with their actions. This showed that there is a high degree of conformity within the target sample which make this variable more significant to be studied for this research.

This finding is consistent with the findings of Mehrabian (2005) which found that conformity is expected to associate with the acceptance of cosmetic surgery. Swami et al., (2008) reported that conformity will strongly affected the social factor which will have influence on the acceptance level of cosmetic surgery as individuals have a higher willingness to accept cosmetic surgery in order to satisfy their partners, family

or closest friends. It can also be said that high conformity within some individuals indicate that he/she has a higher acceptance to cosmetic surgery as long as it is perceived as the right thing to do.

<u>Relationship between self-accessed attractiveness and the acceptance level towards cosmetic surgery</u>

H_3: There is a positive relationship between self-accessed attractiveness and the acceptance level towards cosmetic surgery.

The t-statistic of hypothesis 3 for this research is not significant with a p-value of 3.601 and coefficient correlation of 0.265. All the findings are at a significant level of 95% confidence interval. This indicates that self-accessed attractiveness has a positive and no direct relationship towards acceptance of cosmetic surgery. Hypothesis 3 is not supported.

For this research, most of the respondents graded themselves neutral or high attractive to the others. The responses get from respondents through questionnaire reported that 26.5% of the respondents graded themselves as an attractive person, 23.5% of the respondents agree that they find their overall body shape is attractive, 24.2% find their body weight attractive and 29.6% of the respondents agree that their overall facial is attractive. The overall mean for this variable is 4.44 meaning that Gen Y involved in this research find themselves attractive to the others.

Previous findings showed that when self-accessed attractiveness is high, the acceptance towards cosmetic surgery will be influenced and tend to be lower (Eagly, Ashmore, Makhijani and Longo, 1991). This finding is consistent with the previous findings stating that prevalent physical attractiveness will cause stereotype in individuals and hold a negative evaluation towards cosmetic surgery, which then lead to lower acceptance of cosmetic surgery (Swami et al., 2008). Society emphasize and perceived the use of cosmetic surgery to enhance one's attractiveness and brings

social rewards to the individual (Davis, 1995), which tend lead to a higher acceptance of cosmetic surgery when the self-accessed attractiveness is at a lower level. Researches found that individuals who expected more experiences of sexual body shame will tend to have consider undergoing cosmetic surgery more in the future (Calogero et al., 2010). Kozee et al. (2007) mentioned that women who have graded themselves as lower attractive will closely tied to endorse strategies in order to improve how attractive they appear to others.

It is concluded that there is not significant relationship between self-accessed attractiveness and acceptance level of cosmetic surgery for this research. The variable of self-accessed attractiveness which is not significant when it was analyzed together with the other variables, is significant again when it was tested alone with the dependent variable. This may be due to the strongly variation associated with other variable during the regression analysis which separately regress the dependent variable and independent variables will make the regression line more significant (Leech et al., 2005).

Several factor may affect this decision such as the overlapping of variables or the existence of outliers within the analysis process. Most of the respondents in Malaysia mentioned that they have lesser desire to change their bodies, hence they will hardly consider about undergoing cosmetic surgery process (Karupiah, 2012). As Malaysia is a multi-ethnic and multi-cultural country, hence it make the country to be a rich environment for research and lots of area need to be handle carefully in order to satisfy the market. Culture may be one of the factors that influence the relationship between variables and the demographic provide more areas for further research.

5.1.2 Moderating Effect of Gender Towards Acceptance Level and Conformity

H$_4$: Gender will affect the relationship between conformity and acceptance level towards cosmetic surgery.

Multiple linear regression test was carried out in order to test for moderation effect of gender towards the relationship between acceptance level and conformity, and result showed that the moderation effect is significant. Amini and Stromsten (2010) reported that due to different sex may have different practical implications on the information and norm influences, sex differences is particularly a moderator towards conformity.

Overall, the findings and discussion provided by and from this research are significant and useful. Information obtained suggest that objectification theory does have utility for predicting the acceptance level of individual towards cosmetic surgery, and it is agreeable that objectification of Gen Y represents a negative context that influence individual to accept cosmetic surgery and likelihood to go for it.

5.2 Implications on the Study

Based on all the findings of this research manage to get, this study is strongly believed to provide useful information and solutions to the business in beauty industry, marketers of the industries involved, consumers who planning to undergo cosmetic surgery and entrepreneurs who are trying to enter the beauty industry. The implications of this research are mainly for those cosmetic surgery business that exist in the market and it allows consumer or wanted to take or already took cosmetic surgery to have a better understanding about the acceptance of their actions.

All the findings are important for these parties involved as they provide a better insight about how individuals think about cosmetic surgery. As the research was

conducted mainly on urban Gen Y, it has strongly represented the current major spender in the market which provide value information towards the organizations in beauty industry. This can help to reduce unnecessary advertising or marketing cost used by business to market to consumers. Moreover, since this research provide a general acceptance level of cosmetic surgery in the current market, this will boost the confidence and determination of those consumers who needed or wanted to carry out cosmetic surgery as they are now aware about how the population perceived about cosmetic surgery.

5.3   Limitations of the Study

Throughout this research, the researcher identified a few limitations.

First, the research was conducted in a short period of time. Time is significantly an important element. To ensure that meaningful and valid results could be gained, the researcher had to scale down the target population. Although this study met the objectives, it might be better if the researcher is provided with a longer time frame. This research could then be conducted with a bigger population, such as studying the various service industry in Malaysia.

Second, the researcher could only conduct the study in Klang Valley of Malaysia due to time constraint. Questionnaires were only distributed to the targeted respondents, therefore, the results are limit to the scope of the research which does not represent the population in Malaysia.

Third, the sample size for this study is relatively small due to insufficient funds and time constraint. 300 sets of questionnaires were distributed but only 260 sets were collected back to be used. A sample size that is small leads to higher margin of error and might render the study meaningless. Sampling errors could affect the interpretation and precision of the results.

Lastly, although the results generally showed that gender does moderate the relationship between conformity and acceptance level, there shall be more moderator which may influence the relationship between variables. As this research mainly required respondents to have self-report about their self-esteem value, degree of conformity and self-accessed attractiveness.

5.4   Recommendations for Future Research

In the view of the limitations mentioned above, there is possible improvement and recommended solutions to overcome the limitations are composed as below.

First of all, future researches can be conducted by focusing more on the possible moderators in this area. For example, the body mass index (BMI) may influence how an individual accessed their own attractiveness, and personality traits such as the Big 5 Personality (Openness, Conscientiousness, Extraversion, Agreeableness and Neuroticism) may influence one's self esteem value and more.

Secondly, future studies are recommended to target respondents from diverse range when conducting research such as other sectors in Malaysia and locations, for example other states in Malaysia. A sufficiently large sample size could limit the influence of outliers and is more representative of the population (Lenth, 2001). In addition, it is important to create results among significantly different variables. According to Lenth (2001), "*an under-sized study can be a waste of resources for not having the capability to produce useful results, while an over-sized one uses more resources than are necessary*".

Thirdly, it is strongly recommended to have a larger sample size in order to improve the accuracy of findings. Although it requires greater time commitments and sufficient funds, larger sample size helps in identifying better results. It also allows the researcher to determine the outliers more easily as the researcher is substantially studying more subjects. Hence, if outlier is shown in the sample, increasing in sample size could avoid misleading results.

Last but not least, the target sample of this research mainly compromised of working adults which some students who are also from Gen Y category were overlooked. Studies shows that 34% of the labour market in Malaysia are made up by Gen Y whereas the others are at higher education level (Shaliza, Irma and Mohamed, 2015). Future research may be conducted in order to study the spending behaviours of Gen Y in universities in order to fully understand and control this booming generation.

5.5   Conclusion

To conclude, the findings of the research have provided several implications in determining the acceptance level of cosmetic surgery, the degree of self-esteem, the level of conformity and the self-accessed attractiveness of Gen Y in Malaysia. By analysing all the data collected from the respondents, the result managed to meet the basic requirement of a reliable and valid research and answer all the research questions proposed in the earlier part of this research. From the findings, we understand that conformity is the only variable in this research that has direct relationship with acceptance level of cosmetic surgery among Gen Y in Malaysia. Correlation tests showed that all three independent variables have relationship with the dependent variable, and gender does moderate the relationship between conformity and acceptance level. All the research questions and objectives were met.

Based on the findings, it is clearly showed that the level of conformity affects the acceptance level of cosmetic surgery the most, followed by self-accessed attractiveness and self-esteem. As major findings indicated that acceptance level of male in cosmetic surgery tends to be influenced by conformity more than female, marketers may now target and focus more on marketing and influencing Gen Y male towards cosmetic surgery.

REFERENCES

Adrian Furnham, J. L. (2014). Factors that motivate people to undergo cosmetic surgery. *US National Library of Medicine National Institutes of Health* , 1.

Aimini Makan, F. S. (2010). Conformity, gender and the sex composition of the group. *Stockholm School of Economics* .

Alexandra Kanters, T. J. (2015). *The McGill Undersraduate Gender and Diversity* (Vol. 7). Quebec: The Insersections.

ASAPS. (2016). Newsroom. *Initial Data From The American Society for Aesthetic Plastic Surgery Points to 20% Increase in Procedures in 2015* , 1.

Barnet, T. (2015). *Motivation and Motivation Theory*. Retrieved 03 18, 2017, from Reference for Business: http://www.referenceforbusiness.com/management/Mar-No/Motivation-and-Motivation-Theory.html

Baškarada, S. (2014). *Qualitative Case Study Guidelines.*

Bill Thornton, R. M. (2013). Competitive Orientations and Men's Acceptance of Cosmetic Surgery . *4*, 1.

Chin, S. C. (2015, 09 13). Dr. (Y. Meikeng, Interviewer)

Country Metres. (2017, 3 4). *Malaysia Population*. Retrieved 3 4, 2017, from Country
Meters: http://countrymeters.info/en/Malaysia

Creswell, J. W. (2014). *Research Design - Qualitative, Quantitative and Mixed
Methods Approaches.* (4th, Ed.) Sage Publications.

Crockett, P. T. (2007). The influence of plastic surgery 'reality TV' on cosmetic
surgery patient expectations and decision making. *Plastic and Reconstructive
Surgery* , 316-324.

Dawn M. Szymanski, L. B. (2011). *Sexual Objectification of Women: Advances to
Theory and Research.* University of Tennessee, Knoxville, Department of
Psychology. SAGE.

Dawn B. Valentine, T. L. (2013). Generation Y values and lifestyle segments",
Journal of Consumer Marketing. *Consumer Marketing , 30* (7), 597-606.

Donna Henderson-King, E. H.-K. (2005). *Acceptance of cosmetic surgery: Scale
development and validation.* Grand Valley State University. USA: Science
Direct.

Edirisingha, P. (2012, 03 14). *Interpretivism and Positivism (Ontological and
Epistemological Perspectives).* Retrieved 03 29, 2017, from Research
Paradigms   and   Approaches:
https://prabash78.wordpress.com/2012/03/14/interpretivism-and-postivism-
ontological-and-epistemological-perspectives/

Edmonds, A. (2007). 'The poor have the right to be beautiful' : Cosmetic surgery in
Neoliberal Brazil. *Royal Anthropological Institute* , 363-381.

ElhamFakhriTomalieh. (2015). The Impact of Jordanian Women's Motives, on their Attitudes towards Cosmetic Treatment. *European Journal of Business and Management , 7* (11), 1.

Euromonitor, I. (2016). *Beauty and Personal Care in Malaysia.* London: Euromonitor International.

Fennell, M. (2016). *Overcoming Low Self-Esteem, 2nd Edition: A Self-Help Guide Using Cognitive Behavioural Techniques.* London: Robinson.

Finstad, K. (2017, 03 1). Response Interpolation and Scale Sensitivity: Evidence Against 5-Point Scales.

Fuzzell. (2010). *Cosmetic surgery pictures: does type of picture affect acceptance of cosmetic surgery and/or body image?* UNF Theses and dissertation.

Gergely Szolnoki, D. H. (2013). Online, face-to-face and telephone surveys—Comparing different sampling methods in wine consumer research . *2* (2), 57-66.

Gray, D. E. (2013). *Doing Research in the Real World.* Sage.

Haiken. (2015). *Venus envy: a history of cosmetic surgery.* Johns Hopkins University. Baltimore: Johns Hopkins University Press.

Heatherton, T. F. (1991). Development and Validation of A Scale For Measuring State Self-Esteem. *Personality and Social Psychology , 60*, 895 - 910.

Hew, Y. K. (2015, Sep 13). Dr. *Malaysians are pretty much going in for that perfect cut*. (Y. MeiKeng, Interviewer)

Jae W. Song, K. C. (2011). Observational Studies: Cohort and Case-Control Studies.

Kane, S. (2015, September 30). *What is acceptance?* Retrieved March 14, 2017, from Addiction: https://www.addiction.com/13597/what-is-acceptance

Makan Amini, F. S. (2010). *Conformity, Gender and the Sex Composition of the Group.* Department of Economics. Stockholm: Stockholm School of Economics.

Mann, L. L. (1987). *Social Psychology* (Vol. 20). New York: Elsevier.

Martin, H. (1984, 10). A revised measure of approval motivation and its relationship to social desirability.

Maslow, A. H. (1943). *A Theory of Human Motivation.* New York: Psychological Review.

McKay, T. (2013). Female Self-Objectification: Causes, Consequences and Prevention. *6* (1), 7.

McLeod, S. (2016, 1 1). *What is Conformity*. Retrieved 2 22, 2017, from SimplyPsychology: http://www.simplypsychology.org/conformity.html

Mettle L. Baran, J. E. (2016). *Mixed Methods Research for Improved Scientific Study.* Hershey: IGI Global.

Rachel M.Calogero, A. P. (2016, 11 30). ectification Theory Predicts College Women's Attitudes Toward Cosmetic Surgery.

Rosenberg, M. (1965). *Society and the adolescent self-image.* Princeton: NJ: Princeton University Press.

S.Koziel, A. (2013). Self-assessment of attractiveness of persons with body decoration. *Comparative Human Biology* , 2.

Shelly L Gable, E. A. (2012). *Approach and Avoidance Motives and Close Relationships.* University of California, University of Toronto Mississauga. BlackWell Publishing Ltd.

Swami, C. B. (2011). The Acceptance of Cosmetic Surgery Scale: Initial examination of its factorstructure and correlates . *Body Image* , 1.

Swami, V. &.-P. (2008). Factor structure of the Body Appreciation Scale among Malaysian women. *Elseview*.

Swami, V. P. (2009). *Acceptance of Cosmetic Surgery : Personality and Individual Differencs Predictors* (Vol. 6). Body Image.

Tait, S. (2007). Television and the domestication of cosmetic surgery. *Feminist Media Studies* (7), 119-135.

Tam, K. N. (2012). Attitudes towards cosmetic surgery patients: the role of culture and social contact. *Social Psychology* , 458-479.

Teresa Rzepa, W. G. (2014). *Physical Attractiveness and Self-Assessment Before and After Breast Augmentation* (Vol. 72). Poland: Annals of Plastic Surgery.

Traci L Talbot, C. B.-L. (2012, 03). Comparing Self-Perception of Attractiveness and Overall Life Satisfaction.

University of California, University of Toronto Mississauga. BlackWell Publishing Ltd.

Vidal Diaz de Rada, V. M. (2014). Random Route and Quota Sampling: Do They Offer Any Advantage over Probably Sampling Methods? *Statistic , 4*.

Viren Swami, T. C.-P. (2009). Acceptance of cosmetic surgery: Personality and individual difference predictors. *Body Image* .

Viren Swami, J. L. (2012). *Factor structure of the Body Appreciation Scale among Indonesian women and men: Further evidence of a two-factor solution in a non-Western population* (Vol. 9). Kuala Lumpur: Elsevier.

Williams, C. (2011). Research Methods. *Business & Economic Research , 5*.

Wilson, A. (2015, 01 16). *2015, 2016, 2017 Beauty Industry Global Market Trends, Sales, Statistics: Cosmetics Executive Women, NPD, Nielsen, Skincare/Makeup*. Retrieved 02 17, 2017, from Beauty Stat: http://beautystat.com/site/skincare/2015-2016-2017-beauty-industry-global-market-trends-sales-statistics-cosmetics-executive-women-npd-nielsen-skincaremakeup/

Yuen, M. (2015, 09 13). The Star Online. (Y. MeiKeng, Ed.) *Malaysians are pretty much going in for that perfect cut* , 1.

APPENDICES

Appendix A - Questionnaire

The purpose of this questionnaire is to examine more about the acceptance level of Malaysia's Generation Y towards cosmetic surgery, and this study is completely voluntary. Your participation in this study is greatly appreciated. Thanking you in advance for your participation.

All your responses will remain **ANONYMOUS** and all the data will be **KEPT PRIVATE** and **CONFIDENTIAL**. This research is conducted mainly for educational purposes only. Thank you.

This questionnaire consists of 32 questions which may take up 10-15 minutes to complete. Please answer all of the following questions on the 7-point scale ranging from 1 (Strongly Disagree) to 7 (Strongly Agree) as per below.

1=Strongly Disagree (SD); 2= Disagree (D); 3=Somewhat Disagree (SD); 4= Neutral (N); 5= Somewhat Agree (SA); 6=Agree(A); 7=Strongly Agree (SA)

Cosmetic Surgery are procedure and techniques focused on enhancing appearance whereas Plastic Surgery focused on repairing defects, to reconstruct a normal function & appearance.

	Part A	SD	D	SD	N	SA	A	SA
1	It makes sense to have minor cosmetic surgery rather than spending years feeling bad about the way you look.	1	2	3	4	5	6	7
2	Cosmetic surgery is a good thing because it can help people feel better about themselves.	1	2	3	4	5	6	7
3	In the future, I could end up having some kind of cosmetic surgery.	1	2	3	4	5	6	7
4	People who are very unhappy with their physical appearance should consider cosmetic surgery as one option.	1	2	3	4	5	6	7
5	I have sometimes thought about having cosmetic surgery.	1	2	3	4	5	6	7
6	I would seriously consider having cosmetic surgery if my partner thought it was a good idea.	1	2	3	4	5	6	7
7	If it would benefit my career I would think about having plastic surgery.	1	2	3	4	5	6	7
8	I would seriously consider having cosmetic surgery if I thought my partner would find me more attractive.	1	2	3	4	5	6	7
9	If a simple cosmetic surgery procedure would make me more attractive to others, I would think about trying it.	1	2	3	4	5	6	7

	Part B	SD	D	SD	N	SA	A	SA
10	On the whole, I am satisfied with myself	1	2	3	4	5	6	7
11	At times, I think I am no good at all.	1	2	3	4	5	6	7
12	I feel that I have a number of good qualities.	1	2	3	4	5	6	7
13	I am able to do things as well as most other people do.	1	2	3	4	5	6	7
14	I feel proud of myself.	1	2	3	4	5	6	7
15	I take a positive attitude toward myself.	1	2	3	4	5	6	7

	Part C	SD	D	SD	N	SA	A	SA
16	I often rely on, and act upon, the advice of others.	1	2	3	4	5	6	7
17	I would rather be myself than be well thought of.	1	2	3	4	5	6	7
18	I change my opinion (or the way that I do things) in order to please someone else.	1	2	3	4	5	6	7

19	In order to get along and be liked, I tend to be what people expect me to be.	1	2	3	4	5	6	7
20	It is important to me that I behave "properly" in social situations.	1	2	3	4	5	6	7
21	If there is any criticism or anyone says anything about me, I can take it	1	2	3	4	5	6	7
22	I am careful at parties and social gatherings for fear that I will do or say things that others won't like.	1	2	3	4	5	6	7

	Part D	SD	D	SD	N	SA	A	SA
23	I think my overall physical attractiveness is high.	1	2	3	4	5	6	7
24	I find myself overall facial is attractive.	1	2	3	4	5	6	7
25	For me, my body weight and size are attractive.	1	2	3	4	5	6	7
26	I find my overall body shape or figure is attractive.	1	2	3	4	5	6	7
27	I am satisfied with my current height.	1	2	3	4	5	6	7
28	I will grade myself as an attractive person.	1	2	3	4	5	6	7

Part E: Demographic

29) Gender

	Male
	Female

30) Nationality:

	Malaysian
	Other, please specify: _____

31) Monthly Allowance:

	RM1000 and below
	RM 5001 – RM 10000

	RM 1001 – RM 5000
	RM 10001 and above

32) Ethnicity:

	Chinese
	Malay

	Indian
	Others, please specify: _____

☐ I hereby confirmed that the interviewer has explained the study to me and answered all my questions. I have been told the risk and/or discomforts as well as the possible benefits of the study. I understand what the study is about, how the study is conducted and why it is being performed.

☐ I agree to take part in the above research project. I understand my rights as a research subject and I **voluntarily** consent to participate in this study. I am free to withdraw at any time without giving any reason and without there being negative consequences. In addition, should I not wish to answer any particular question or questions, I am free to decline.

☐ I agree for the data collected from me to be used in future research.

Subject
Signature : _____
Date: _____

---   Thank you for spending your time answering our questionnaire.   —