ABSTRACT:

Objectives – The primary goal of this study is to investigate the new social practices in the context of service as regards the violation of the ethical norms during the Covid-19 pandemic. It also aims to educate the public on behavioral changes during the epidemic by utilizing the Health Belief Model (HBM), particularly in banking activities.

Methodology – This study was carried out among banking customers in one of East Java’s major cities. A total of 257 questionnaires were distributed to the respondents and a 23-statement instrument was created for the design. The data were collected electronically and then analyzed with AMOS 22.0 using an internet-based computer, assisted with a web interviewing system.

Findings – The results showed that: firstly, health beliefs had a significant impact on unusual social norms. This is because most consumers recognized the new normal in the context of service during the epidemic and did not regard it as a breach of societal standards. Secondly, the unusual social norms influenced both the skills of the employees and the morality of customers’ experience. Finally, intimacy and human nature also had an impact on the client’s satisfaction.

Conclusion – During the unprecedented Covid-19 outbreak, this study merges the Health Belief Model with the theory of service quality and satisfaction to serve as a new guide for institutions, especially banks.

KEYWORDS: Health Belief, Unusual Social Norms, Competence, Humanness, Customer Satisfaction.

INTRODUCTION

Globally, the Covid-19 pandemic has caused economic contraction and instability in financial institutions and this directly impacts the increased risk of debts in both corporate and retail sectors (Global banking M&A outlook H2, 2020). This financial turmoil caused a decline in global industries, for example, 13.5% of retail sales in China fell by 20.5% in the first two months of 2020, the U.S. stock market lost trillions of dollars, GDP collapsed, and all countries faced recession, including India (14%), Singapore (5%), and Indonesia (3.75%) (Pesek, 2020). World Health Organization (WHO) and countries affected by the coronavirus have adopted public health policies such as social and physical distancing, medicated masks and sanitizers, frequent hand washing, and staying at home. Some staff work from home and a regional lockdown is implemented. The WHO and government regulations on health protocols have eventually established new habits that have led to unique social norms (Söderlund, 2020). These new habits are considered by the people as impolite and unusual, such as abolishing greetings, hand-shaking, and distanced speaking, even though all of them do not have legal backing and they should be obeyed as new norms which are considered as defying social cultures (Buckholtz & Marois, 2012). Meanwhile, recent studies on societal norms showed that socializing is a basic human need (Söderlund, 2020). It has also shown that humans, as social beings, need one another to attain common goals (Buckholtz & Marois, 2012), hence limiting human interaction is seen as a breach of social norms, especially in the context of services.

People who work in service industries such as retail and banking, have to adjust to the new habits (van Kleef et al., 2015). Given the virus’s ability to spread through human-to-human transmission, the service model is being forced to adapt to the evolving behaviors, even when it is considered an excuse to maintain health and break the chain of infection (Tomassello, 2014; van Kleef et al., 2015). This spurred a fundamental and unique public reaction as well as a dilemma. During the pandemic, many shared an unpleasant experience of frequently receiving odd services, which most people perceive as a violation of social norms.
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norms (Söderlund, 2020). Customers and Frontline Employees (FLEs) have struggled to adopt the new habits that generate discomfort in the service process due to shifting assumptions regarding suitable policies and behaviors (Voorhees et al., 2020).

Given that the Covid-19 pandemic is an unprecedented occurrence with ramifications for service quality interactions. It is worthwhile to study unusual social norms more deeply in the context of services. Therefore, this study aims to test customers’ reactions to employees’ behavior in the banking sector that practiced health protocols throughout the outbreak. The financial service model during the pandemic changed drastically from no distance limit to service full of various requirements (health protocols) to interrupt the infection cycle. According to Bitner et al. (1990), the service changes reduce intimacy and competence, thereby reducing service quality. Previous studies stated that intimacy and competence are two universal human attributes (Söderlund & Berg, 2019). The former refers to friendship and mutual assistance, while the latter relates to intelligence, skills, and thoroughness (Fiske et al., 2007; Fiske, 2018). Both of these characteristics have been investigated specifically in service interactions which serve as the basis of customer evaluation as in Söderlund and Berg (2019).

With the pretext of preventing disease transmission, behaviors associated with unusual social norms transform intimacy and competence into a negative signal, implying that FLEs are unfriendly, incapable, unhelpful, and lack empathy leading to misperception of proficiency (Horberg et al., 2009). Service quality is critical for a long-term relationship between the organization and customers, therefore, they should adhere to a set of standards applied on the no outbreaks condition, such as greetings, handshakes, eye contact, speaking intimately and carefully listening to customers’ grievances. Given the dangerous risk of deadly Covid-19 infection, many organizations engaged in WHO-recommended protocols, which many regards as socially unacceptable activities that may diminish customer satisfaction (Söderlund, 2020). Although it is technically correct that it is a violation due to the pandemic, some people are willing to overlook it.

Emotions such as fears, anger and hatred frequently trigger behaviours that violate social norms (Ohbuchi et al., 2004; van Kleef et al., 2015). Individuals’ anxiety such as disgust and nausea, are biological signals that they tried to avoid being exposed to the virus (Curtis et al., 2011; Hodson & Costello, 2007). Therefore, services are delivered by faking emotions (Curtis et al., 2011; Oaten et al., 2011). This event is referred to as distaste over such social values such as distanced talking, less responsiveness, awkwardness and avoidance (Horberg et al., 2009), which leads to unfavorable consumer evaluation.

Customer’s responses to perceived intimacy, waiter competency, and distaste are regarded as information which affects their view of the waiters’ character. This has to do with how much people think service providers are lacking empathy (Haslam, 2006; Haslam et al., 2008). Even though humans belong to the Homo sapiens species, they do not instantly become civilized (e.g., Bruneau et al., 2018). Consumer feelings (e.g., intentions, desires and emotions) cannot be fully grasped (Haslam et al., 2005). Considering intimacy and competence as human traits (Haslam & Bain, 2007; Johnson et al., 2006; Martini et al., 2016), lack of intimacy, low competence, and disgust are perceived as reducing empathy (Harris & Fiske, 2011; Valtorta et al., 2019).

During the pandemic, organizations face a difficult choice between maintaining service quality and being forced to follow standard health protocols with the consequence of reducing customer satisfaction (Parasuraman et al., 1988), such as lacking empathy, sociability and being less concerned. Marketing practitioners have tried to integrate social interactions with the health belief model (Gamma et al., 2017, 2020). The HBM is a theory that addresses health risks and was originally used to assess the efficacy of healthcare programs that describe an individual’s perception of severity and vulnerability to behavioral reactions (Ling et al., 2019; Sheeran & Abraham, 1996). An individual who understands the gravity of the risk of being exposed to the virus would be motivated to comply with the health protocols (Bish & Michie, 2010; Farooq et al., 2020). Given that service interactions during the COVID-19 pandemic are subject to the health protocols evaluation by their users as unusual and awkward, the level of quality and customer satisfaction is estimated to decrease. Applying the HBM theory to the dispute over either social norms are violated or not in service interactions would give clients an explanation which is acceptable to both the organization and users. This study deals with the most recent research expected to address the empirical gap in the discourse over social norms violations in service interactions (Söderlund, 2020). Individuals who are fearful of being exposed to coronavirus are more sensitive to self-protection measures, leading them to intentionally comply with health regulations that are deemed a breach of societal standards (Söderlund, 2020). Therefore, individuals who consciously take actions to protect themselves due to the perceived severity and vulnerability of their condition (Ling et al., 2019) would attempt to adapt to health protection measures such as keeping a safe distance, wearing masks and washing their hands frequently (Farooq et al., 2020).

This study is ideal for aiding the implementation of health protocols and gaining a better understanding of new retail service models. Health risks, attitudes, norms, capabilities, and self-regulation should all be considered when analyzing
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consumer behaviour during the pandemic (Mosler, 2012). The HBM believed that people became more aware of the importance of self-protection from infectious diseases due to social interactions in the context of service (Laato et al., 2020).

Collaboration with HBM on service interactions during the COVID-19 pandemic has not received attention. Prior HBM studies focused solely on the impact of self-protective behaviours such as voluntary isolation and panic buying (Laato et al., 2020; Leung et al., 2020). Meanwhile, there have not been many studies into the tolerance for service interactions that adopt health protocols as an ideal customer experience. Given the unexpected nature of this event, which necessitates the implementation of health protocols in all interactions, including banking services. It is believed that socializing how severe and vulnerable people are when exposed to coronavirus, should enhance the adaptation to new habits. Service providers are expected to have standard guidelines regarding customer experience during the COVID-19 pandemic.

The study is started by conducting reviews and formulating hypotheses, then the methodology, the empirical findings, management implications, limitations and future study directions were presented consecutively.

THEORETICAL FRAMEWORK AND HYPOTHESIS DEVELOPMENT

Health Belief Model (HBM) and Service Interactions

Health risk factors are taken into account while analyzing the new social norms in the context of services during the COVID-19 pandemic thereby adopting the relevant theory, the Health Belief Model (HBM). The HBM stemmed from a study on the effectiveness of health education programs in the 1950s that linked demographic variables and psychological characteristics to an individual's affective and cognitive states (Sheeran & Abraham, 1996). Furthermore, Sheeran and Abraham (1996) argued that emotions such as perceived vulnerability and severity, health motivation, and benefits influence behavioral responses.

When an individual is psychologically close to risk, they experience a higher degree of threats, which leads to behavioral actions such as social distancing, and the appearance of being less compassionate and intimate.

HBM has been frequently used in health behavior change studies and cybersecurity (Eldredge et al. 2016; Ng et al. 2009; Orji et al., 2012). During the pandemic, everyone is encouraged to protect themselves by washing their hands, keeping a safe distance, wearing a mask, and getting vaccinated. Therefore, the perceived threat of Covid-19 is the primary motivator of unusual social behaviors in service interactions (Bish & Michie, 2010). Previous studies also showed that HBM is a strong predictor of the motivation of self-protection against health risks during the pandemic (Farooq et al., 2020). Perceived severity is defined as an individual's assessment of a scenario that relates to health consequences. Perceived vulnerability is an evaluation of the possibility of being vulnerable in a given situation (Ling et al., 2019). When an individual feels vulnerable and understands how serious the virus is, more awareness of unusual social behaviors would be recognized by all parties. Previous studies argued that in a pandemic situation, everything will run abnormally, including service context, making FLEs seemingly incompetent, less intimate and less humane (Fiske, 2018; Söderlund & Berg, 2019; Söderlund, 2020).

H1: Customers who are aware of the vulnerability and severity of health risks associated with exposure to the virus are more likely to understand when FLEs serve them in a manner that defies social norms.

H2: Customers who believed the coronavirus poses serious health threats have a beneficial impact on FLEs’ perceived competence.

Unusual Social Norms in Service Competence

The FLEs should adhere to health regulations when delivering services during the Covid-19 pandemic, which is considered a violation of social norms since they perform unique service norms. Therefore, unusual behaviour is assumed to affect quality and customer emotional states (Parasurman et al., 1988; Söderlund, 2020).

The customers’ perception of employees has been widely debated by previous studies. According to Söderlund (2020), intimacy and competence are two universal characters that are evaluated by others (service users). Intimacy is defined as the manifestation of friendship, tolerance, empathy and mutual aid, while competence is related to people's evaluation of their capabilities, intelligence, skills, and job carefulness (Fiske et al., 2007; Fiske, 2018). These two characteristics have been discussed specifically in the context of social norms, with an employee as the object and the service recipient as a customer. A previous study suggested that the two traits contribute to improving the customer’s opinion of the staff (e.g., Söderlund & Berg, 2019). Servers’ competence is important information for customers in terms of social behaviour during the Covid-19 pandemic, because unexpected social behaviors indicate a lack of proficiency (Söderlund, 2020). Unusual societal standards connected with the ‘new norms’ in the service environment are regarded as incompetent during an encounter. Intimacy and competencies are essential for high-quality operation, in which capability, intelligence, and creativity are required to complete tasks according to established guidelines (Fiske, 2018).
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The study anticipated that uncommon social rules observed by waiters as a pretext for preventing coronavirus transmission would have an impact on reducing intimacy and competence. Specifically, unusual social norms are adopted relating to the health protocol to protect others from the dangerous virus which led waiters to be perceived as unfriendly, lacking empathy and unhelpful, thereby reducing intimacy and leading to low competence. Therefore, the below hypothesis was proposed:

H₂: A FLE’s ability to provide customer service is impacted when unusual social norms are embraced.

Unusual Social Norms with regard to FLEs Humanness

Consumers typically perceived the new social norms as strange, which led to undesirable emotions such as being disappointed, angry and irritated (van Kleef et al., 2015; Ohbuchi et al., 2004). During the Covid-19 pandemic, there were numerous public announcements emphasizing the importance of maintaining cleanliness, stamina to make immunity strong, seeing a doctor immediately for people with symptoms such as fever, flu, or cough, and when found positive, immediately isolating themselves either in a hospital or independently. When the virus’s mutations became more unpredictable, even people without symptoms test positive for Covid-19 which led them to be on high alert when anybody appeared to be suffering from the virus symptoms by keeping their distance, feeling disgusted and being avoidance, as though they lacked humanity (Curtis et al., 2011; Hodson & Costello, 2007; Kavaliers et al, 2018; Oaten et al., 2009). Such attitudes represent a reflex system designed to protect themselves to avoid the dangerous virus. This is extremely sensitive which disrupts the interaction’s process, giving the impression of providing false responses (pretending emotions) in service delivery (Oaten et al., 2011). Objects held by an infected individual can act as transmission media and contaminants such as urine, vomit, blood and saliva which led to disgust responses (Oaten et al., 2009). These events affect social behavior within the society which in turn led to the perceived unusual social norms (Curtis et al., 2011; Horberg et al., 2009). This means that dissatisfaction triggers strange behaviours, such as staying away, being unresponsive and keeping a safe distance out of fear of contracting the virus. The odd attitudes aimed to prevent the spread of the virus have the potential to increase disgust. Currently, little is disclosed about the extent to which the various elements of commercial services arouse customers’ dissatisfaction, while there has been empirical evidence that a restaurant not cleaning up after being used by visitors or a motel not changing guest room bedding causes discontentment (Rozin et al., 1994).

Overall, perceptions of intimacy, competence and disgust would reduce waiters’ humanness. The term ‘humanness’ refers to an entity that shares similar qualities as humans (Haslam, 2006; Haslam et al., 2008). Employees who reduce the intensity of their services would be evaluated by consumers as inhumane (Söderlund, 2020). Previous studies on the perception of social dimensions claimed that humans belong to the Homo sapiens species, but people do not always acknowledge the full value of humanity among them (see Bruneau et al., 2018). One argument is that the recipient does not fully understand some aspects of mankind, such as those in their minds (e.g., intentions, goals and emotions) (Haslam et al., 2005). The reciprocal relationship has long been a component of human behaviour, especially among waiters (Haslam & Bain, 2007; Johnson et al., 2006; Martini et al., 2016) which represents unique traits, thereby considering them inhumane when unresponsive (Harris & Fiske, 2011; Valtorta et al., 2019). A reaction of disgust is influenced by the state of humans themselves, for example, being exposed to contagious and embarrassing diseases, such as homelessness and drug addiction, HIV, and leprosy, which frequently produces distaste in others (Harris & Fiske, 2011). Due to their status as a potential source of disease transmission, this group is often dehumanized, leading to moral deterioration (Horberg et al., 2009), given that a decent person is capable of distinguishing between right and wrong (Gray et al., 2007). Those who act strangely and are considered odd reduce their morality. Therefore, the hypothesis was proposed with regard to service encounters:

H₃: An FLEs who behaves in unusual social norms can dehumanize service interactions.

Competence in Consumer Satisfaction

Competence is the ability to use experience and learning to integrate the knowledge, skills, capabilities and personal beliefs to perform duties in a professional, effective and efficient manner (Spencer & Spencer, 1993). Fiske et al. (2007) and Fiske (2018) argued that it is related to an individual’s capacity to execute a task in terms of intelligence, skills, and prowess. It is a universal necessity for waiters, and it influences customer evaluation (e.g., Söderlund & Berg, 2019). Employees with sufficient competence are expected to provide consumers with maximum services. The level of waiters’ intelligence in customer interactions is positively related to the evaluation results, such as satisfaction or dissatisfaction (Söderlund, 2020).

Customers’ perceptions of employee personal behavior include appearance, respect, and attempts to resolve their problems (Schoefer & Diamantopoulos, 2008), as well as the orientation, which focuses on understanding the needs and maintaining satisfaction levels (Dean, 2007) and increasing client loyalty. Previous studies found that customer views of different types of staff interpersonal attitudes, including familiarity, attention, business friendship, listening behaviour, and orientation,
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affect customer satisfaction (Dagger et al., 2007; Dean, 2007; de Ruyter & Wetzel, 2000). As a key component of employee relationships, waiter competence is considered to have a direct impact on customer satisfaction.

Customers would be less critical in judging service interactions and feel more satisfied when personnel is induced affectively by their expertise (Forgas, 1995). The process of high-contact services in the connection between customers and employees is characterized by competence, intimacy, exchange of content-rich information, extensive interaction time and sometimes accompanied by intense emotions (Kellogg & Chase, 1995; Parasuraman et al., 1988). Customer emotions influence the evaluation of their encounters with this type of service and provide useful information regarding their needs and desires (Mattila & Enz, 2002), whereas competence has an impact on customer perceptions of service quality. However, waiters’ performance of unusual social norms would affect customer satisfaction, because the standard health protocol makes them seem sluggish, distant, less responsive, and incapable of delivering services naturally and comfortably. Such attitudes become customers’ focus of evaluation that waiters are less proficient. Previous studies also stated that competence is positively associated with service assessment (see, Bruneau et al., 2018; Aggarwal & McGill, 2007). Therefore, the hypothesis below was proposed:

H5: Customer satisfaction is influenced by FLE’s competence.

Humanness in Service Interactions

In general, humanness is defined as an entity with distinct human qualities (Haslam, 2006; Haslam et al., 2008). Previous studies on the perception of social dimensions claimed that, despite being Homo sapiens, humans do not automatically acknowledge the full value of humanity among mankind (see, Bruneau et al., 2018). One viewpoint is that some aspects of people’s inner lives including intents, ambitions and emotions, are not fully understood by others (Haslam et al., 2005). However, interactions among humans have been a feature of human behavior, notably in the context of services (Haslam & Bain, 2007) and mutual (Johnson et al., 2006; Martini et al., 2016). When the relationship is considered to be less friendly, servers’ are perceived as inhuman (Harris & Fiske, 2011; Valtorta et al., 2019). People’s disgust reactions are influenced by their circumstances, such as being exposed to infectious or embarrassing diseases, for example, homelessness and drug addiction, HIV, and leprosy which provoke revulsion in others (Harris & Fiske, 2011). Those who are afflicted with these disorders are viewed as a source of contagious diseases, therefore the group is frequently dehumanized, leading to a deterioration in social values (Horberg et al., 2009).

![Figure 1. Conceptual Model](image-url)

Given that a moral person is capable of differentiating between right and wrong (Gray et al., 2007), those who act strangely and are perceived as odd are less human. Previous studies suggested that humane interactions have an impact on service evaluation (see, Aggarwal & McGill, 2007; Bruneau et al., 2018). Other studies also stated that dehumanizing is negatively related to project assessment (Hodson & Costello, 2007). Therefore, the hypothesis below was proposed:

H6: The humanness of FLEs has a great impact on customer satisfaction.
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RESEARCH METHODOLOGY

Procedure and Samples

Banking customers in one of the major cities in East Java, Indonesia, were surveyed by last semester’s consumer behavior students and data was obtained by using a cross-sectional study. Using a prior study on service marketing, a total of 300 questionnaires were delivered to the respondents (e.g., Bitner et al., 1990; Gwinner et al., 1998). Given that the study was conducted during the Covid-19 pandemic, data were collected online with an Internet-based computer, assisted with a web interviewing system. During the interview process, the questionnaire was equipped with instructions to help respondents react more quickly.

Sample Characteristics

A total of 257 responses were eligible from the 300 questionnaires distributed via e-mail, representing 85.6% success rate. There were 175 women (68.1%) and 82 men (31.9%) participated in the survey. All of the respondents had at least one social media account (see Table 1).

Table 1

<table>
<thead>
<tr>
<th>Table 1: Sample (N=257)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Frequency</strong></td>
</tr>
<tr>
<td><strong>Age</strong></td>
</tr>
<tr>
<td>Age Less than 24</td>
</tr>
<tr>
<td>25-35</td>
</tr>
<tr>
<td>36-44</td>
</tr>
<tr>
<td>45 and above</td>
</tr>
<tr>
<td><strong>Gender</strong></td>
</tr>
<tr>
<td>Male</td>
</tr>
<tr>
<td>Female</td>
</tr>
<tr>
<td><strong>Geographic backgrounds</strong></td>
</tr>
<tr>
<td>Megapolitan</td>
</tr>
<tr>
<td>Metropolitan</td>
</tr>
<tr>
<td>Small City</td>
</tr>
<tr>
<td><strong>Education</strong></td>
</tr>
<tr>
<td>High school or less</td>
</tr>
<tr>
<td>Vocational/technology</td>
</tr>
<tr>
<td>Some college</td>
</tr>
<tr>
<td>Bachelor’s degree</td>
</tr>
<tr>
<td>Master’s degree</td>
</tr>
<tr>
<td>Doctoral Degree</td>
</tr>
</tbody>
</table>

Measures

Based on previous studies, an instrument of 23 statements (Table 2) was developed to measure the unusual social norms adopted (e.g., Curtis et al., 2011; Horberg et al., 2009; Söderlund, 2020; Söderlund & Berg, 2019). Measures from Bish and Michie (2010), Farooq et al. (2020), and Ling et al. (2019) were used to assess health beliefs. To analyze service competence, metrics from Fiske et al. (2007), and Fiske (2018) were adopted. In measuring humanness, measures from Harris and Fiske (2011), and Valtorta et al. (2019) were employed, while for customer satisfaction, approaches from Epley (2018), Söderlund (2020), Aggarwal and McGill (2007), and Bruneau et al. (2018) were leveraged. The seven-point likely scale (1 – strongly disagree, 7 – strongly agree) was utilized for all instruments.

Table 2. Instrument Items and Their Sources

<table>
<thead>
<tr>
<th>Items</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Unusual Social Norms (Curtis et al., 2011; Horberg et al., 2009; Söderlund, 2020; Söderlund &amp; Berg, 2019)</strong></td>
<td></td>
</tr>
</tbody>
</table>
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During the Covid-19 pandemic, service interactions are limited by transparent glass.

During the Covid-19 pandemic, service interactions are distant from each other.

During the Covid-19 pandemic, service interactions are conducted with the face covered by a mask.

During the Covid-19 pandemic, service interactions are carried out with people seemingly suspicious of each other.

**Health belief (Bish & Michie, 2010; Farooq et al., 2020; Ling et al., 2019)**

1. I believe that the coronavirus is a high-risk infectious disease.
2. Given that my condition is highly susceptible to disease, I need to protect myself from infectious viruses.
3. I feel how badly coronavirus-exposed people are.
4. Given that the virus is contagious, I dutifully implement the health protocol.

**Competence (Fiske et al., 2007; Fiske, 2018)**

1. During the Covid-19 pandemic, waiters look slow.
2. During the Covid-19 pandemic, waiters are hesitant.
3. During the Covid-19 pandemic, waiters are less skillful.
4. During the Covid-19 pandemic, waiters are less careful in work.
5. During the Covid-19 pandemic, waiters are less responsive.

**Humanness (Harris & Fiske, 2011; Valtorta et al., 2019)**

1. During the Covid-19 pandemic, waiters are not humane.
2. During the Covid-19 pandemic, waiters humanize humans.
3. During the Covid-19 pandemic, waiters seem to give a pretend response (pretending emotions).

**Customer satisfaction (Aggarwal & McGill, 2007; Bruneau et al., 2018; Epley, 2018; Söderlund, 2020)**

1. During Covid-19 pandemic, customers are satisfied with intimacy.
2. During Covid-19 pandemic, customers are satisfied with competence.
3. During Covid-19 pandemic, customers are not satisfied with waiters’ attitude.

### RESULTS

**Confirmatory factor analysis (CFA)**

According to Anderson and Gerbing (1988), there are two stages of analysis: Firstly, the hypothesized construct is tested for the overall model and the results showed that the framework is accepted, with a goodness-of-fit-index (GFI) of 0.918, comparative fit index (CFI) for 0.914, no residual standard of higher than 2.0, and Chi-square of 614.312 (100 df, $p = 0.000$). Table 3 shows the assessment of the adequacy of each scale, which consists the number of statement items required to cover each component.

Residuals and scales show unidimensionality satisfactory and the standard on all statement items is significant, implying convergent validity. Each concept has a reliability level greater than 0.76, indicating internal consistency. Furthermore, the Average Variance Extracted (AVE) ranges from 0.75 to 0.87 as shown in Table 4, indicating that the variance covered by the construct is greater than that generated by measurement errors (Fornell & Larcker, 1981).

| Table 3. CFA Correlation matrix (Fornell-Larcker criterion) |
|----------------|----------------|----------------|----------------|----------------|----------------|
|                | Unusual norm   | Health belief  | Competence     | Humanness      | Satisfaction   |
| Unusual norm   | 0.77           |                |                |                |                |
| Health belief  | 0.24           | 0.87           |                |                |                |
| Competence     | -0.02          | 0.11           | 0.77           |                |                |

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The second test is the Common Method Variance (CMV) on the data and there are two approaches to this assessment. The first is to perform a well-known single-factor test.

Table 4. Means, standard deviations, cronbach's alpha and AVEs, item loadings of constructs

<table>
<thead>
<tr>
<th>Construct</th>
<th>Mean</th>
<th>Std.</th>
<th>Cronbach's Alpha</th>
<th>AVE</th>
<th>Loading</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Unusual Social Norms</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>USN 1</td>
<td>2.92</td>
<td>1.54</td>
<td>0.78</td>
<td>3.14</td>
<td>0.75</td>
</tr>
<tr>
<td>USN 2</td>
<td>2.51</td>
<td>1.66</td>
<td></td>
<td>3.25</td>
<td>0.74</td>
</tr>
<tr>
<td>USN 3</td>
<td>2.48</td>
<td>1.58</td>
<td></td>
<td>3.13</td>
<td>0.77</td>
</tr>
<tr>
<td>USN 4</td>
<td>2.08</td>
<td>1.57</td>
<td></td>
<td>3.06</td>
<td>REMOVED</td>
</tr>
<tr>
<td><strong>Health belief</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>HB 1</td>
<td>5.86</td>
<td>1.44</td>
<td>0.81</td>
<td>3.25</td>
<td>0.81</td>
</tr>
<tr>
<td>HB 2</td>
<td>5.85</td>
<td>1.76</td>
<td></td>
<td>3.25</td>
<td>REMOVED</td>
</tr>
<tr>
<td>HB 3</td>
<td>5.72</td>
<td>1.59</td>
<td></td>
<td>3.46</td>
<td>0.76</td>
</tr>
<tr>
<td>HB 4</td>
<td>5.65</td>
<td>1.75</td>
<td></td>
<td>3.67</td>
<td>0.82</td>
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<tr>
<td><strong>Competence</strong></td>
<td></td>
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<td></td>
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</tr>
<tr>
<td>CPC 1</td>
<td>5.15</td>
<td>1.62</td>
<td>0.76</td>
<td>4.59</td>
<td>0.97</td>
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<tr>
<td>CPC 2</td>
<td>5.21</td>
<td>1.17</td>
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<td>4.26</td>
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<tr>
<td>CPC 3</td>
<td>5.20</td>
<td>1.19</td>
<td></td>
<td>3.73</td>
<td>0.94</td>
</tr>
<tr>
<td>CPC 4</td>
<td>5.11</td>
<td>1.27</td>
<td></td>
<td>3.12</td>
<td>0.95</td>
</tr>
<tr>
<td>CPC 5</td>
<td>5.71</td>
<td>1.23</td>
<td></td>
<td>3.19</td>
<td>REMOVED</td>
</tr>
<tr>
<td><strong>Humanity</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>HMS 1</td>
<td>5.86</td>
<td>1.31</td>
<td>0.81</td>
<td>3.55</td>
<td>0.75</td>
</tr>
<tr>
<td>HMS 2</td>
<td>5.85</td>
<td>1.28</td>
<td></td>
<td>3.54</td>
<td>0.77</td>
</tr>
<tr>
<td>HMS 3</td>
<td>5.72</td>
<td>1.32</td>
<td></td>
<td>3.56</td>
<td>0.91</td>
</tr>
<tr>
<td><strong>Customers Satisfaction</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>CS 1</td>
<td>2.91</td>
<td>1.78</td>
<td>0.76</td>
<td>3.61</td>
<td>0.91</td>
</tr>
<tr>
<td>CS 2</td>
<td>2.50</td>
<td>1.75</td>
<td></td>
<td>2.50</td>
<td>0.93</td>
</tr>
<tr>
<td>CS 3</td>
<td>2.56</td>
<td>1.71</td>
<td></td>
<td>3.26</td>
<td>0.94</td>
</tr>
<tr>
<td>CS 4</td>
<td>2.09</td>
<td>1.52</td>
<td></td>
<td>3.65</td>
<td>0.89</td>
</tr>
</tbody>
</table>

Observation shows that no single factor accounts for a significant fraction of the total variance in the data and the second test is to apply the general method. The result shows that the technique variable is insignificant when compared to substantive...
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variance (ratio of 57:1). A low method of variations implies that CMV is not a major problem in the data. Furthermore, the control variable, namely gender (1 = male, 2 = female), does not affect unusual social norms, whereas age has a substantial effect.

Post-hoc Analysis
Post-hoc Analysis was used to test in case age and gender have a different impact and mitigate the relationship between the health belief model and unusual social norms which allowed them to interact with all predictors of odd morals. Except for one term, the forecast of uncommon behavioral interaction is significant. The unusual social norms and age relation (p <0.05) has a major effect on the relationship between health belief and odd norms. The unusual social norms and the gender interaction term (p <0.05) has no significant effect. This shows that age moderates the relationship between the parameters, though gender does not; but the effect of unusual social norms decreases for youngsters.

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This demonstrates that when younger ones are exposed to the coronavirus, they feel vulnerable and severe. Hence, youths tend to be oblivious to the health protocol or unwillingly adopt unusual social norms. One explanation for this finding is that older people have a better self-regulatory ability and feel vulnerable and severe when exposed to the virus (see, Gwyther & Holland, 2012), leading them to believe in the health risks, thereby indicating that age has a significant impact on unusual social norms (p <0.05). The relationship between the health belief model and unusual social norms is in accordance with the hypothesis. As a matter of health belief, age describes the extent to which an individual believes in the risk of exposure to the virus. The older an individual, the more disciplined the health protocol and more aware of the new norms.

Table 5. Interaction effects of age and gender on unusual social norms

<table>
<thead>
<tr>
<th>Predictors</th>
<th>Predicting unusual social norms</th>
</tr>
</thead>
<tbody>
<tr>
<td>Health Belief</td>
<td>0.040*</td>
</tr>
<tr>
<td>Gender</td>
<td>0.07*ns</td>
</tr>
<tr>
<td>Age</td>
<td>0.01*</td>
</tr>
<tr>
<td>$R^2$</td>
<td>34%</td>
</tr>
</tbody>
</table>

Structural Model and Hypothesis Testing
The proposed model was measured in accordance with the data where hypotheses were tested using Amos by the use of covariance matrix. According to Hypothesis 1, customers who believe in the vulnerability and severity of the health risks which are associated with exposure to the virus are more likely to understand when FLEs serve them in manners that defy social norms. During the Covid-19 pandemic, there was increased anxiety in activities due to the possibility of being exposed to the disease (Li et al., 2020 ), hence everyone realizes how dangerous the risk of infection is. Furthermore, activities outside the home are linked to health problems during the same time (Gao et al., 2020). Overall, the issue of anxiety caused them to interact which hinders their freedom to connect with many people and being forced to adhere to health protocols thereby accepting hypothesis 1.

According to HBM, human behaviour in the face of health risks is primarily driven by perceptions of vulnerability and severity (Sheeran & Abraham, 1996). An individual who is increasingly aware of self-protection would be more receptive when others (FLEs) adopt the new norms, despite the sense of incompetence. Farooq et al. (2020) stated that perceived severity and vulnerability throughout the Covid-19 pandemic had a substantial impact on self-protection (Farooq et al., 2020) thereby accepting hypothesis 2. Hypothesis 3 showed that unusual social norms have a detrimental impact on competence, such that an employee who implements the health protocol is regarded to be less effective (Fiske, 2018; Söderlund & Berg, 2019; Söderlund, 2020). FLEs who are disciplined in the application of health protocols seem rigid in their interaction with customers. The attitude of being less flexible due to having to comply with health protocols appears to reduce service quality dimensions such as empathy and reliability, which reduce waiters’ competence, thereby accepting hypothesis 3.
Hypothesis 4 implies that irregular social norms has a significant impact on humanness, in which a waiter who implements the health protocol is seen as less humane (Harris & Fiske, 2011; Valtorta et al., 2019). Unusual morals contribute to feelings of insecurity and awkwardness, as well as suspicion of one another since they are perceived as a possible source of contagious disease. The group that adopted these principles is often dehumanized, which leads to a decline in morale due to the Covid-19 pandemic (Horberg et al., 2009) thereby accepting hypothesis 4. The fifth hypothesis states that FLEs’ competence influences customer emotions regarding service quality (Mattila & Enz, 2002).

Employees’ performance of unusual social norms affects consumer satisfaction, considering that FLEs’ application of standard health protocols causes them to be viewed as less responsive. Furthermore, they serve customers by putting on fake faces since everyone is on high alert to prevent being infected with the virus which led FLEs to be perceived as incompetent and reduces customer satisfaction, thereby accepting hypothesis 5.

Hypothesis 6 states that FLEs’ humanness has a significant impact on consumer satisfaction. Other study has shown that warmth is a part of human behavior, particularly in service interactions (Haslam & Bain, 2007; Johnson et al., 2006; Martini et al., 2016), and that when a relationship is considered as less warm, FLEs are perceived as inhumane (Harris & Fiske, 2011; Valtorta et al., 2019) which impacts customer satisfaction thereby accepting hypothesis 6. (see, Table 6 and Figure 2).

Table 6. Hypothesis testing

<table>
<thead>
<tr>
<th>Structural path</th>
<th>Standardized estimate</th>
<th>t statistic</th>
<th>p values</th>
</tr>
</thead>
<tbody>
<tr>
<td>$H_1$ Health belief – Unusual social norms</td>
<td>0.372</td>
<td>7.625</td>
<td>0.040 *</td>
</tr>
<tr>
<td>$H_2$ Health belief – Competence</td>
<td>0.571</td>
<td>6.115</td>
<td>0.010**</td>
</tr>
<tr>
<td>$H_3$ Unusual social norm employee – Competence</td>
<td>0.162</td>
<td>9.721</td>
<td>-0.002**</td>
</tr>
<tr>
<td>$H_4$ Unusual social norm employee – Humanness</td>
<td>0.274</td>
<td>11.476</td>
<td>-0.001**</td>
</tr>
<tr>
<td>$H_5$ Competence – Customer satisfaction.</td>
<td>0.331</td>
<td>13.231</td>
<td>-0.002**</td>
</tr>
<tr>
<td>$H_6$ Humanness – Customer satisfaction</td>
<td>0.531</td>
<td>19.511</td>
<td>-0.030 *</td>
</tr>
</tbody>
</table>

* Significant at * $p < 0.05$; ** $p < 0.01$; *** $p < 0.001$.
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DISCUSSION AND CONCLUSIONS

Discussion

The structural model’s results show a clear relationship between health beliefs and perceived aberrant social norms observed during the Covid-19 pandemic in August 2020, as well as the government’s recommendation to adapt to the new normal. Consequently, an individual who believes in how vulnerable and severe the people are when exposed to coronavirus would be more aware and accept that unusual social norms are prevalent in such abnormal situations as the current epidemic. Despite the changes in all service features, such as keeping distance, acrylic barriers between FLEs and customers, and outdoor waiting space, are all satisfactory to the clients. This is in line with Harper et al. (2020), who claim that excessive fear of coronavirus infection constitutes the major reason all the countries globally change their daily habits to adapt to the new normal throughout the Covid-19 pandemic. To avoid the transmission of contagious diseases, changes in behaviours are considered unusual social norms. In addition, uncommon morals also have an impact on retail service excellence (Souderland, 2020). An employee’s compliance with health protocols, such as wearing a mask, maintaining social distance, and being separated by a glass or acrylic barrier from the buyer, is perceived as interfering with the previously good service quality. Many customers stated that throughout the pandemic, FLEs were frequently viewed as breaches social norms, and the Asians considered them strange and impolite. Health beliefs during Covid-19 increased people’s awareness of their medical status. Given that this virus is transmitted through close contact, following health guidelines such as social distancing, wearing a mask, washing hands often and staying away from crowds (Wilder-Smith & Freedman, 2020), is considered to be the most effective protective activity (Farooq et al., 2020).

Meanwhile, the past study suggested that behavior related to unusual social norms can reduce intimacy and competence. This is in line with previous studies that every human being requires intimacy in every relationship, particularly in service interactions (Souderland, 2020; Forgas, 2011), and FLEs should demonstrate the expertise in customers’ sight. Given that competence is the object of customers’ evaluation (Fiske et al., 2002), changes in behavior and service qualities due to certain situations (Covid-19 pandemic) would diminish their satisfaction.

Many banks, because of adhering to the health protocol to prevent transmission of the virus, have to change their service model, such as turning off the air conditioners, opening their outlets at noon, and limiting service hours. Certain large retail service industries prohibit customers from using dressing rooms. Furthermore, clients should pass through multiple health checkpoints before entering retail outlets, resulting in long queues. In banking services, waiting rooms and lines are set up outside with no AC, and there are restrictions on the number of branches and customers attended to every day.

Customers’ perceptions vary due to the change in behaviours; some are pleased, while others are dissatisfied (Fiske et al., 2002). Given that an emotional state of mind makes it impossible to produce a clear mind, service providers are vulnerable to social norm violations. No supervisor can intervene in real time and apologize to all customers for these behaviors. In a service encounter, the customer corrects the unusual social norm, which is most likely to be detrimental when the client is angry and hostile. Disgust is associated with behavior that violates uncommon societal norms, which is not surprising since it is seen as part of the human protection system to avoid transmission of the virus (Souderland, 2020). Previous study showed that hatred is associated with the avoidance and denial of objects that give rise to uncomfortable and suspicious sentiments (Curtis et al., 2001; Hodson & Costello, 2007; Oaten et al., 2011). An example is that when a customer reacts with disgust to behavior that deviates from the standards, the natural reaction is to withdraw from the situation, however, FLEs do not provide feedback by changing their behaviour into a pleasant one.

FLEs who act in manners that defy social standards are also seen as being dehumanized than before. Dehumanization has been found as a negative form of bias in the sense that it is perceived as anti-social behavior in previous studies (e.g., Bastian et al., 2013; Boudjemadi et al., 2017; Cameron et al., 2016). One explanation is that banking FLEs often become a means for customers to engage when behaving in unusual social norms is considered relatively callous which looks less humane (Epley, 2018). The vicious circle of less intimate attitude leads to a perception of incompetence and inhumane bias, as well as a reduction in social attitudes that influences customer satisfaction. Previous study showed that in service interactions, customers evaluate an organization by notifying other consumers about their satisfaction or dissatisfaction (Blitner et al., 1990). Customer contentment or displeasure has the capacity to generate and impact loyalty, and it is communicated through the word of mouth (Anderson & Sullivan, 1993). Therefore, the poor degree of consumer satisfaction tends to reduce the company’s profitability which in turn is not good for the business in the future, when waiters ignore appropriate behavior norms during the pandemic. This is because, in service interactions, the customer database played a crucial role as a source of evaluations for product quality throughout the Covid-19 pandemic.
CONCLUSIONS AND MANAGERIAL IMPLICATIONS

The result indicates that behavioral changes towards the new normal have an impact on the debate of either FLEs violate social norms or not when implementing health protocol-based standards, which affect perceived service quality. The HBM also stated that service users react in various manners when it comes to comprehending behavioral changes in the service context. The findings offered several managerial implications to the banking sector with regard to service interactions during the Covid-19 pandemic. Despite the outbreak, it is crucial to improve service quality and strictly implement health protocols to break the chain of transmission which is often perceived as reducing customers’ experience. Therefore, guidelines for implementing standard medical measures while preserving the substance of social norms should be formulated. Banks should provide various facilities to make customers feel safe and secure while making purchases, such as the provision of hand washing facilities, hand sanitisers, and masks. Employees should remain friendly, interactive, empathetic and responsive, and not discriminate against any group or ethnicity to eliminate the perceived unusual social norms. The latter can reduce staffs’ intimacy and competence when customers receive various information which leads to panic buying. Furthermore, waiters maintain the quality of their services on a constant basis (Farooq et al., 2020; Laato et al., 2020; Naeem, 2021).

Banks should strengthen online sales technical support to reduce service interactions while maintaining service quality. This can be achieved by improving the human-computer collaboration and the role of the business network in digital platform innovation to reduce fear during the Covid-19 pandemic (Berg, 2019; Damian & Manea, 2019; Höflinger et al., 2018; Lee & Trimi, 2018; Tran, 2021). The banking industry should also continue to build social values (intimacy, competence, humanness) in service interactions throughout the pandemic to avoid service quality aspects being reduced (Parasuraman et al, 1988). During the outbreak, major changes occurred in terms of social norms; hence, service providers should develop a new work ethic and become the frontline in shaping new norms without sacrificing present service quality (Xie et al., 2020).

LIMITATIONS AND RECOMMENDATIONS FOR FURTHER RESEARCH

The limitation of this study was the various types of human behavior, such as not paying attention to social distancing, wearing masks, diligently washing hands, and avoiding crowds that were the subject of social norm behavior. The effects of these unusual traits are precisely determined by a design in which every strange social norm is manipulated as a discrete factor. The sample was limited to Indonesian citizens, where the number of deaths were high during the data collection, many people lost their jobs, and several urban cities imposed large-scale social restrictions. This made respondents more sensitive and panicked towards employees who performed the recommended health protocols. Furthermore, more research is required to determine in case a similar impact would occur in participants from other nations, especially western countries whose cultures are different from those of Asian states that emphasize communalism.

Given the panic and compulsion in the transaction process due to the fear of being exposed to the virus, the study did not allow respondents to reply directly when an unusual social norm occurred (Naeem, 2021). It was speculated that in the face of a pandemic, employees would be considered as having low intimacy, competence, disgust, and dehumanization, leading to avoidance behavior and a reluctance to complain to staff who were perceived as breaking social norms which is speculation of customer behavior since it is in compulsion. Furthermore, more study is of importance to examine customer attitudes when unusual societal cultures become new norms, as well as the adoption of proper behavior as standard guidelines in service settings.

Another critical aspect to explore is “what happens when an employee follows normal social norms and is therefore considered neglectful in implementing health protocols during the pandemic; does this have an impact on customer behavior in the purchasing activities?” The public also hopes that during the lockdown, everyone, including service providers, would adjust their behavior towards the new normal, and it is expected to affect customers’ perceptions of service quality being part of its dimensions changes. Further studies need to examine the effects of changes in service quality on customer satisfaction during the Covid-19 pandemic.

REFERENCES


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