ANALYSIS OF THE EFFECTS OF COVID-19 ON TRAVEL AND TOURISM PRODUCT PURCHASE DECISIONS

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Abstract

This study aims to determine the differences between behaviors of potential tourists by examining how the crisis perception of COVID-19 impacts tourism demand and what kind of attitudinal dimensions potential tourists bring to the fore in their travel requests. Data were collected from 685 local tourists living in Turkey. Explanatory Factor Analysis was performed, followed by a t-test and one-way ANOVA, to determine the differences between demographic features. In the face of the pandemic, the potential tourist will tend to isolate, avoid, and turn to alternative forms of tourism. In addition, the approach to traditional travel and accommodation activities is changing and has been altogether thrown into question. The differentiation of tourism preferences according to the demographic characteristics of participants reveals that the effects of the pandemic differ depending on personal characteristics. The effect of external environmental conditions on consumer behavior and demand in tourism is a topic studied in the literature. There are also studies on the impact of regional epidemics on tourism, such as SARS, Ebola, among others. However, empirical studies on the impact of a global pandemic such as the Covid-19 on consumer behavior and demand in tourism are limited. This study which determine the effect of Covid-19 on tourism demand and consumer behavior, will contribute to the literature. The results of this study can be a guide for tourism businesses in other countries. It can be a source for academically similar studies in terms of method and application.

Keywords: Crisis; Covid-19; Tourism demand; Consumer behavior in tourism.

ANÁLISE DOS EFEITOS DO COVID-19 NAS DECISÕES DE COMPRA DE PRODUTOS DE VIAGENS E TURISMO

Resumo

Este estudo tem como objetivo determinar as diferenças entre os comportamentos dos turistas potenciais examinando como a percepção da crise do COVID-19 impacta a demanda turística e que tipo de dimensões atitudinais os turistas potenciais trazem à tona em suas solicitações de viagens. Os dados foram coletados de 685 turistas locais que vivem na Turquia. Foi realizada uma Análise Fatorial Explicativa, seguida de um teste t e ANOVA unilateral, para determinar as diferenças entre as características demográficas. Diante da pandemia, o turista potencial tenderá a isolar, evitar e recorrer a formas alternativas de turismo. Além disso, a abordagem das atividades tradicionais de viagem e hospedagem está mudando e foi totalmente questionada. A diferenciação das preferências turísticas de acordo com as características demográficas dos participantes revela que os efeitos da pandemia diferem dependendo das características pessoais. O efeito das condições ambientais externas sobre o comportamento e a demanda do consumidor no turismo é um tema estudado na literatura. Também existem estudos sobre o impacto de epidemias regionais no turismo, como SARS, Ebola, entre outros. No entanto, os estudos empíricos sobre o impacto de uma pandemia global como o Covid-19 no comportamento do consumidor e na demanda turística são limitados. Este estudo, que determina o efeito do Covid-19 na demanda turística e no comportamento do consumidor, contribuirá para a literatura. Os resultados deste estudo podem servir de guia para empresas de turismo em outros países. Pode ser uma fonte para estudos academicamente semelhantes em termos de método e aplicação.

Palavras-chave: Crise; Covid-19; Demanda turística; Comportamento do Consumidor de turismo.

ANÁLISIS DE LOS EFECTOS DEL COVID-19 EN LAS DECISIONES DE COMPRA DE PRODUCTOS DE VIAJES Y TURISMO

Resumen

Este estudio tiene como objetivo determinar las diferencias entre los comportamientos de los turistas potenciales al examinar cómo la percepción de crisis del COVID-19 impacta la demanda turística y qué tipo de dimensiones de actitud los turistas potenciales ponen en primer plano en sus solicitudes de viaje. Se recopilaron datos de 685 turistas locales que viven en Turquía. Se realizó un análisis factorial explicativo, seguido de una prueba t y ANOVA de una vía, para determinar las diferencias entre las características demográficas. Ante la pandemia, el turista potencial tenderá a aislarse, evitar y recurrir a formas alternativas de turismo. Además, el enfoque de las actividades tradicionales de viaje y alojamiento está cambiando y se ha cuestionado por completo. La diferenciación de las preferencias turísticas según las características demográficas de los participantes revela que los efectos de la pandemia difieren según las características personales. El efecto de las condiciones ambientales externas sobre el comportamiento del consumidor y la demanda en el turismo es un tema estudiado en la literatura. También existen estudios sobre el impacto de las epidemias regionales en el turismo, como el SARS, el Ébola, entre otras. Sin embargo, los estudios empíricos sobre el impacto de una pandemia global como el Covid-19 en el comportamiento del consumidor y la demanda en el turismo son limitados. Este estudio, que determina el efecto de Covid-19 sobre la demanda turística y el comportamiento del consumidor, contribuirá a la literatura. Los resultados de este estudio pueden ser una guía para las empresas turísticas de otros países. Puede ser una fuente de estudios académicamente similares en términos de método y aplicación.

Palabras clave: Crisis; Covid-19; Demanda turística; Comportamiento del consumidor turístico.



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1 INTRODUCTION

One of the natural consequences of societal psychology affected by crises is the drop in demand for non-essential activities, especially travel and tourism (Senbeto & Hon, 2020). Floyd et al. (2004) reported that the first week after 9/11 saw a direct loss of \$10 billion in airline transportation due to cancellations in the USA alone. Subseqent research further revealed that there was a serious loss of consumer trust. Again, it was observed that the 2001 United Kingdom footand-mouth outbreak led to a 9% decrease in the number of visitors to the country (Frisby, 2003). During the SARS crisis, which saw its peak in 2003, the Asia-Pacific region likewise experienced a 9% loss in tourism demand (Wilder-Smith, 2006).

Although the existence of a crisis-resistant tourist typology is emphasized (Hajibaba et al., 2015), crises cause the tourism and travel market to shrink rapidly and complicate the already-complex tourism product purchase decision process (Garg, 2015). In the purchase of travel and tourism products, many factors can create a crisis effect and reduce the demand for visits. Political instabilities, conflicts (Alvarez & Campo, 2014), hostilities (Sanchez et al., 2018), natural disasters (Wang, 2017), and epidemics (Wang, 2009) are just some of them.

The crisis literature in tourism has focused mainly on issues of communication, information sharing at the destination level, and developing the infrastructure(s) of the destination in a crisis-sensitive manner. Options are also suggested to increase the rate of visits in times of crisis.

For example, Pappas (2017) emphasized the importance of the sharing economy for Athens during the recession, using the example of Airbnb, among others. Ryu et al. (2013) discussed the post-Katrina image of New Orleans and stated that image-related elements should be included in crisis management plans. Wang (2017) recommended that decision makers should investigate risk factors in destinations experiencing crises and make choices that will alleviate risk perceptions regarding these factors. Wang (2009), on the other hand, concluded that income and exchange rates must be addressed in order to prevent the contraction in tourism demand and suggested that health and safety issues are more effective than financial crises.

That said, the fundamental effects of crises, such as a global pandemic, that have multidimensional and severe effects on consumer behavior are underresearched. The present study is designed to fill this gap in the field.

The pandemic is not just a health crisis, it is a social fact, in the sense that it convulses the meaning

of social relations and shocks all actors, institutions and values (Dachary et al., 2020). The current pandemic named Coronavirus (Covid-19) has affected every industry including travel and tourism (Faisal and Dhusia, 2021).

COVID-19 has led to a dramatic decrease in tourism demand all over the world with its comprehensive risk perception. The lockdown has seen the hotel chains and industry analysts cut back on their growth forecasts for the second quarter of 2020 (Kumar, 2020). The global pandemic seems to have encouraged a different perception compared with previous crises. Its transmission rate is higher than previous epidemics and, as a result, it has affected a much wider geography.

Therefore, the scope of the COVID-19 pandemic on tourism needs to be evaluated on its own terms. On the other hand, Law (2006) points out that although destinations are perceived as risky when taking necessary precautions, they can quickly mitigate the effects of the crisis by changing this perception in a short period of time, proving that more studies are needed to understand the touristic mindset within the scope of risk perception for effective crisis management.

The problem of COVID-19 evinces a serious methodological limitation to tourism research because the industry is fully paralyzed or what is worse, constantly changing (Korstanje, 2021). Under the conditions produced by a global pandemic, it is necessary to understand the perspectives of societies who have the potential to participate in tourism and to determine their current attitudes toward tourism and its constellation of components (Wang, 2009).

The purpose of this study is to determine how the crisis perception of COVID-19 impacts tourism demand and what kind of attitudinal dimensions potential tourists prioritize in their desire to travel. The study was conducted on a sample with a strong potential to participate in tourism in an attempt to determine their attitudes toward different components of the travel experience during the epidemic process.

2. LITERATURE REVIEW

2.1. COVID-19 and tourism demand

Outbreaks have sudden and very negative effects on tourism demand. For example, due to the SARS outbreak seen in early 2003, the number of tourists coming that year to Thailand from abroad by air and sea decreased by 9% and 20%, respectively (Rittichainuwat & Chakraborty, 2009). In addition, the ebola and zika viruses negatively affected tourism

development in West Africa (Maphanga & Henama, 2019) and other countries.

The World Bank estimates that the short-term impact of the zika virus outbreak for 2016 in Latin America and the Caribbean was about US\$3,5 billion primarily in countries where tourism is significant (Hall et al., 2020). Alongside the impact of the economic crisis, according to Page, Song, and Wu (2012), the swine flu outbreak had a significantly negative impact on UK tourism demand in all 14 resource markets in the second quarter of 2009.

During this period, people suspended their travel decisions due to the ease with which the virus was transmitted. British tour operators canceled certain flights and package tours (Garg, 2013). Sharangpani et al. (2011) revealed that d the H1N1 influenza pandemic, travelers' behavior was affected by access to information about the characteristics of the epidemic, the severity of the disease, and screening operations. Mizrachi and Fuchs (2016), researching the impact of Ebola on tourism in Africa, revealed that even destinations without Ebola in Africa led to many risk perceptions among potential tourists and that social media was quite influential in this regard.

COVID-19 first appeared in Wuhan, the capital of China's Hubei Province, in late December 2019. In the early days of the epidemic, it was mostly unaccounted for. Two features made it different and led to deep anxiety and fear in all segments: namely, its bidirectional negative effect on supply and demand and its rapid and wide spread (Loayza & Pennings, 2020).

As Furman (2020) mentioned in his study, companies will produce, people will work, consumption will be realized, and new investments will follow. COVID-19 has sequentially eliminated all of these actors. Lack of supply for production, travel restrictions, and curfews in response to potential demand have led to a *lack* of demand and, as a result, a block against new investments.

Initially imposed transportation restrictions also negatively impacted the global tourism industry through the reduction of leisure and business travel and the delay of capital investment (Pine & Mckercher, 2003; Garg, 2013). Guerrieri et al. (2020) showed the damage to the supply chain in terms of business closures, while Eichenbaum et al. (2020) drew attention to the decrease in demand for areas such as shops and restaurants. Even when restrictions on economic activity are lifted, demand can lead to a recession that will continue after the pandemic ends (Andersen et al., 2020).

Sudden reservation cancellations in all areas of tourism due to COVID-19 have actually been the first sign of future demand loss. For example, travel restrictions are started on 18 March, 2020 in some

region in Brazil (Aquino et al., 2020) and Brazil closed its land borders for foreigners on March 19, 2020, and air borders on March 27, 2020 (Golets et al., 2020) and tourism demand there stopped.

According to OECD report (2020), demand for domestic flights fell by 50% and international bookings were 85% down in the second half of March in 2020 in Brazil. On 16 March LATAM Airlines Group, South America's largest carrier, cancelled 90% of its international flights as demand collapsed and countries shut down borders leaving the region increasingly isolated.

In a study conducted by Karim et al. (2020), it is stated that in the first weeks of the epidemic, flights were canceled on reciprocal flights between Malaysia and China, and a total of 61.859 reservation cancellations were made in hotels in Kuala Lumpur only in the first week. In the research conducted by Evelina et al. (2020), it is emphasized that Namibia, which provides 5% of its gross national product from tourism, will completely lose the demands especially from Europe. Rasheed et al. (2020). Approximately 12-18 million people will lose their jobs in Pakistan due to COVID-19; predicts a sharp decrease in tourism demand.

COVID-19 has clearly demonstrated its rapid and severe effects on tourism with the closure of all touristic businesses to groups and individual tourists within two months. According to the study of Dinarto et al. (2020), it is emphasized that the decrease in the number of tourists from China due to the COVID-19 outbreak is reflected in hotels, souvenir shops and businesses such as restaurants.

According to another study, the pandemic process will lead to a large decrease in both domestic and international travel and tourism activities, and the Jamaican tourism industry will decrease by 56.3% (Guan et al., 2020). Many of the Caribbean and Pacific islands, whose economy is based on tourism and especially accommodation services, have been seriously affected by COVID-19 and it is stated that the situation will take a long time to improve, given the nature of such services.

With this in mind, the UN has called for a \$ 2.5 trillion global aid package primarily for tourism-heavy economies. The shrinkage in demand due to COVID-19 will also affect other economic activity areas from which affected sectors provide input (Shingal, 2020).

2.2. COVID-19 and Consumer Behavior

Consumer behavior is defined as the sum of decisions made by people regarding the acquisition, consumption, and disposal of goods, services, activities, experiences, and ideas. People choose

products that will meet their needs and desires by influence of internal and external factors (Mothersbaugh & Hawkins, 2016: 24).

The buying behavior of tourists is heavily influenced by external factors beyond the control of themselves or tourism businesses. These external effects include weather, strikes, war, and epidemics. Epidemic diseases cause tourists to stop traveling to places where risk of contamination is high (Swarbrooke & Horner, 2007: 52-233).

Epidemics not only cause declines in tourist numbers but can also have profound effects on the consumption behavior of tourists (Senbeto & Hon, 2020). Risk perception and security concerns in tourism are primary factors that change the context of traditional decision-making models and cause tourists to alter their travel plans (Sönmez & Graefe, 1998). Because tourism is an optional leisure activity and people generally want to be safe while participating in tourism activities, they do not want to take risks (Yang & Nair, 2014).

The anxieties surrounding COVID-19 are difficult to ignore. Quarantine practices, restrictions placed on work and going out, and fear of getting sick are just a few of those anxieties (Fardin, 2020). Thus, COVID-19 has brought about not only physical health problems but also mental health problems (Duan, 2020). Yang et al. (2020) have drawn attention to the fact that psychological problems occur in almost every segment of society.

According to Osland et al. (2017), risk perception is determined by several factors such as risk type, culture/nationality, proximity to source, and visibility in international media. During the first phase of the COVID-19 outbreak in China, Wang et al. (2020) found that more than half of the participants in their study had suffered psychological impacts of moderate to high severity, and that approximately one-third experienced moderate-to-high anxiety. We can therefore expect that such feelings will negatively affect tourism demand and choices of potential tourists (Cao et al., 2020).

It seems that the effects of COVID-19 on tourist behavior will continue even as overall circumstances begin to improve. According to a study conducted in China, even if the pandemic is completely controlled, people's insecurity is expected to persist for a long time (Leade & Singleton, 2020). Anxiety surrounding the decision to travel does not seem to disappear easily.

In addition, any decline in earnings or loss of job resulting from the pandemic may prevent travel decisions. Even in the absence of health-related problems, many people face serious consumption challenges due to the virus (Yang et al., 2020). On the other hand, tourists who do decide to travel after COVID-19 will continue to face associated risks and will be forced to travel under strict measures. Better

knowledge of the disease and the pandemic, personal hygiene practices during travel, compliance with social distancing, avoiding suspicious people or places, and monitoring personal health before and after the journey (Nicholl, 2006) will become the norm for all travelers.

It is estimated that COVID-19 will also impact tourist preferences when purchasing travel producst. It remains a matter of debate whether people will decide to vacation in their own country or in another country. For example, inspiring trust among cruise ship passengers will be difficult, given that cruise ship ventilation systems will spread the virus (Thams, et al., 2020). Consequently, people's preferences may shift from luxury hotels to rental residences suitable for individual use (Katsoni & Sheresheva 2019), as is already the trend among young tourists, who tend to prefer independent holidays (Thams et al., 2020).

On the other hand, potential tourists may prefer businesses that take a transparent approach toward adopting measures that can break risk perception. For tourists with high-risk perception, the most important factor is security (Bodosca, Gheorghe, & Nistoreanu, 2014: 81), and the tendency toward safe businesses and destinations should be strengthened, because the intensity of the epidemic in a given destination also negatively affects crisis perception and preference (Henderson, 2007: 187).

Consumer purchasing decisions are basically considered to be problem-solving behaviors and when it comes to products with high-risk perception, the consumer shows an expanded problem-solving behavior. Under-informed, infrequently purchased, expensive, and high-interest products require extended problem-solving behaviors. It is predicted that the potential tourist who makes a purchasing decision will conduct more research, evaluate comprehensive information gathered from different sources due to perceived risk, and choose between alternatives (Solomon, 2011: 309).

In general, it is possible to address tourist behavior in three stages: pre-holiday, during, and after-holiday. Tourists in a cultural context show community-oriented, risk-oriented, and socially oriented travel behaviors (Manrai & Manrai, 2011: 25). Consumers' attitude toward risk can be defined at different risk levels and is determined by comparing perceived risk with expected benefits.

Acceptance of risk may differ according to individuals. People's attitudes toward risk can be divided into three levels: risk aversion, risk taking, and staying neutral (Zhu & Deng, 2020: 6-7). All of which menas that personal differences are sure to affect destinations in pandemic conditions. Determinants of risk perception in tourism have been widely studied conducted prior to COVID-19. In addition to personal

and psychological factors such as personality, lifestyle, and motives, nationality and cultural differences have been identified (Seddighi, Nuttall, & Theochaous, 2001).

Existing studies have made changes in tourist behavior and reshaping of preferences due to COVID-19 visible. In a study conducted in China, the country where the epidemic started, the negative effect of tourists' risk perception on their holiday decisions was revealed. Participants in the study stated that COVID-19 causes anxiety at a global level, leading to cancellation of vacation plans-especially to large and crowded citiesdue to insecurities around traveling. They also stated that in the event they do go on vacation, they will do so with family members rather than tour groups and will keep their stay short.

Another result of the study was the increased importance ascribed by participants to hygiene and safety, especially with regard to public transportation, recreational areas, and accommodation facilities, and that these are determining factors in their holiday decisions (Nazneen, Hong, & Din, 2020).

3. METHODOLOGY

3.1. Instrument

In this study, a questionnaire was used as a data collection tool. The first part of the questionnaire was related to the general impact of the COVID-19 pandemic and its effect on touristic attitudes and behaviors. Demographic information was included in the second part of the questionnaire. A scale consisting of 32 statements was used to measure tourist attitudes and behaviors during the pandemic.

In the design of the survey, together with 17 statements prepared by tourism experts with a consensus to measure the impact of COVID-19 on consumer attitudes and behaviors, 3 statements from the SARS pandemic scale developed by Wen, Humin, and Kavanaugh (2005) were adapted. All statements were measured using a Likert scale ranging from 1 (strongly disagree) to 5 (strongly agree).

3.2. Sampling

The population of the survey consisted of domestic tourists in Turkey. Turkey was chosen as the universe for this study because it is a leading country in terms of tourist arrival numbers and tourism revenues. Local tourists were chosen because it was thought that tourism destinations would need to give priority to local tourists due to global travel restrictions. And yet, it was not possible to reach the entire universe due to temporal, financial, and pandemic constraints. Therefore, the number of samples to represent the

universe was calculated as 384 (Christensen et al., 2015: 173). Data were obtained from 685 online participants between May 8 and June 1, 2020-one of Turkey's busiest tourist seasons. Thus, the sample is sufficient in number and is representative as it reflects the characteristics of the research universe in general.

3.3. Data analysis

In the study, a two-step path was followed when analyzing the data. First, *explanatory factor analysis* (EFA) was performed to establish reliability, validity, and structure, followed by a t-test and oneway ANOVA to determine the differences between demographic features. Statistical Package for Social Sciences (SPSS) software was used for data analysis.

In order to prepare the data set for analysis, Mahalanobis distance was first checked to determine whether there were any outliers (Mahalanobis df (31) > 61,1, p < 0,001). As a result of the Mahalanobis distance analysis, 45 questionnaires were found to produce extreme values, so they were excluded from the analysis. Of the 640 questionnaires included in the analysis, the skewness values were between -1,726 and 0,317 and the kurtosis values were between -1,195 and 1,814, thus showing a normal distribution (George & Mallery, 2012).

3.4. Index verification

EFA with varimax rotation was used to determine the construct validity of 32 expressions determined during the design phase of the questionnaire (Table 1).

Table 1: Explanatory Factor Analysis Results

FACTORS	Factors Loading		S.D.
1. ISOLATION	_oaag	3,80	0,85
(Eigenvalues: 21,746		Í	,
Variance Explained: %13,263)			
After COVID-19, I do not plan to eat in	,735	4,51	0,76
restaurants on my touristic trips.			
After COVID-19, I prepare the meal with	,732	4,25	0,97
my own means on my touristic trips.			
After COVID-19, if I travel with a tour group,	,725	4,03	1,09
I will prefer to have a separate dinner on my			
touristic trips.			
After COVID-19, I avoid contact with local	,644	3,69	1,30
people on my touristic trips.			
After COVID-19, I hesitate to go to	,636	3,66	1,22
entertainment venues on my touristic trips.			
After COVID-19, I withdraw from crowded	,592	3,45	1,24
environments in destination centers during			
my touristic trips.			
2. AVOIDANCE		4,21	0,70
(Eigenvalues: 8,393			
Variance Explained: % 12,449)			
I will greatly reduce my tourist travel plans	,774	4,55	0,78
in the next 12 months.			

Table 1: Explanatory Factor Analysis Results (continued)

Table 1: Explanatory Factor Analysis		(continu	ied)
Because of COVID-19, I believe tourist travel will not be safe.	,760	4,53	0,79
After COVID-19, I will avoid traveling to	,754	4,33	0,97
densely populated cities for tourism. I will avoid areas heavily affected by	,634	4,23	1,00
COVID-19 when choosing tourist destinations			
If I go after COVID-19, I will shorten my	,523	3,91	1,20
participation in travel and tourism activities.	440	0.70	4.40
After COVID-19, I prefer short distance places for leisure travel.	,449	3,73	1,18
3. ALTERNATIVE TOURISM CHOICE		3,59	1,11
(Eigenvalues: 6,325 Variance Explained: % 6,363)			
Due to COVID-19, my interest in	,801	3,64	1,29
participating in eco-tourism has increased.	004	2.52	4.04
Due to COVID-19, my interest in outdoor activities has increased.	,801	3,53	1,24
4. TRAVEL EFFECT		4,11	1,16
(Eigenvalues: 5,659 Variance Explained: % 6,280)			
All my non-business travels have been	,858	4,29	1,22
canceled during the COVID-19 period. All my business travels have been	,838	3,93	1,41
canceled during COVID-19.	,000		
5. IMPACT OF LIFE		4,30	0,80
(Eigenvalues: 5,070 Variance Explained: % 5,645)			
COVID-19 has greatly affected my	,807	4,51	0,77
business.	,687	4,10	1,17
COVID-19 has greatly affected my life. 6. FOOD AND BEVERAGE	,007	3,79	0,78
PREFERENCE		3,73	0,70
(Eigenvalues: 4,516			
Variance Explained: % 5,572) After COVID-19, I prefer to stay in hotels	,708	4,13	1,15
with COVID certification on my touristic	,700	4,13	1,13
trips.	500	4.05	4.44
After COVID-19, I prefer local restaurants for my touristic trips.	,583	4,05	1,14
After COVID-19, I prefer packaged food	,509	3,21	1,20
and drinks for my touristic trips.		4,16	0,78
7. TRANSPORTATION PREFERENCE (Eigenvalues: 4,212		4,10	0,70
Variance Explained: % 5,434)			
After COVID-19, I prefer to travel with my family and relatives.	,726	4,18	1,06
I do not plan to join tour groups after	,550	4,01	1,33
COVID-19.		,	
After COVID-19, I do not prefer to go public	,468	3,45	1,24
I transportation (plane bus train etc.) on	,+00	0,70	1,27
transportation (plane, bus, train, etc.) on my touristic trips.	,+00		
my touristic trips. 8. ACCOMMODATION CHOICE	,400	3,27	1,05
my touristic trips. 8. ACCOMMODATION CHOICE (Eigenvalues: 4,138	,400		
my touristic trips. 8. ACCOMMODATION CHOICE (Eigenvalues: 4,138 Variance Explained: % 5,053) After COVID-19, I prefer to stay in rental	,805		
my touristic trips. 8. ACCOMMODATION CHOICE (Eigenvalues: 4,138 Variance Explained: % 5,053) After COVID-19, I prefer to stay in rental houses on my touristic trips.	,805	3,27 3,88	1,05
my touristic trips. 8. ACCOMMODATION CHOICE (Eigenvalues: 4,138 Variance Explained: % 5,053) After COVID-19, I prefer to stay in rental		3,27	1,05
my touristic trips. 8. ACCOMMODATION CHOICE (Eigenvalues: 4,138 Variance Explained: % 5,053) After COVID-19, I prefer to stay in rental houses on my touristic trips. After COVID-19, I prefer to stay in my secondary residence (summer house) during my touristic trips.	,805 ,435	3,27 3,88 2,67	1,05
my touristic trips. 8. ACCOMMODATION CHOICE (Eigenvalues: 4, 138 Variance Explained: % 5,053) After COVID-19, I prefer to stay in rental houses on my touristic trips. After COVID-19, I prefer to stay in my secondary residence (summer house) during my touristic trips. Total Variance Explained (%):	,805 ,435	3,27 3,88 2,67	1,05
my touristic trips. 8. ACCOMMODATION CHOICE (Eigenvalues: 4,138 Variance Explained: % 5,053) After COVID-19, I prefer to stay in rental houses on my touristic trips. After COVID-19, I prefer to stay in my secondary residence (summer house) during my touristic trips.	,805	3,27 3,88 2,67	1,05 1,28 1,43

Source: own elaboration from the research data.

According to Table 1, eight factors were extracted: isolation, avoidance, alternative tourism preference, travel effect, life effect, food and beverage preferences, transportation preference, and accommodation preference. Impacts on life and travel fall under general impacts. Isolation and avoidance were considered as an attitude.

Alternative tourism preference, food and beverage preference, transportation preference, and accommodation preference were summarized as preferences. These eight dimensions explain the relevant phenomenon to a great extent. Six expressions were excluded from the scale for reasons such as disrupting the factor structures, loading on two different factors at the same time, and having differences below the critical value between factor loads.

4. FINDINGS

Reliability analysis was applied in order to determine the reliability of the study scale. As a result of said analysis, performed for the whole scale consisting of 26 statements, the Cronbach's alpha coefficient was found to be 0,800. When the Cronbach's alpha coefficients regarding the dimensions of the scale were examined, isolation was found to be 0,822, avoidance 0,792, alternative tourism preference 0,695, travel effect 0,698, life effect 0,496, food and beverage preference 0,384, transportation preference 0,288, and accommodation preference 0,336.

The average and standard deviations of the responses of domestic tourists participating in the study to the dimensions of isolation, avoidance, alternative tourism, travel effect, life impact, food and beverage preference, transportation preference, and accommodation preference are also shown in Table 1.

The answers were divided into dimensions in line with the literature review and EFA. Visitors' responses were generally close to "agree" (4) for these propositions. In light of these findings, tourist perceptions for travels after COVID-19 are identified as avoidance of crowded environments in the destination, worry over travel safety, cancellation of all non-business travels throughout the pandemic period, substantially impacted personal lives, preference for hotels certified safe from COVID-19, preference for packaged meals and drinks, avoidance of public transportation vehicles (planes, buses, trains, etc.), and preference to stay at secondary residences.

In response to COVID-19, we note a rise in preference to stay in secondary residences (summer houses) during tourist travel. According to the averages of the dimensions, life effect is the most observed dimension (a.m. = 4,30), followed by

avoidance with an average of 4,21, travel effect with an average of 4,11, and insulation with an average of 3,80. According to these values, the effect of COVID-19 on tourist behavior is pirimarily due to life impact and avoidance dimensions in Turkey. However, it has been determined that the dimensions of accommodation preference and alternative tourism preference are slightly behind other dimensions.

Demographic information of the participants is given in Table 2. Of those surveyed, 55,9% were women and 61,1% were married. In terms of age, the "35-44" age group constituted the highest percentage at 34,1%, while the "55 years and older" group was the lowest at 5,6%. In terms of education, those who have received an undergraduate education constituted the highest percentage at 43,9%, while those with an associate degree were the lowest at 12,8%.

Table 2: Descriptive Statistics

Table 2: Descriptive Statistics.		
Gender	N	%
Male	282	44,1
Female	358	55,9
Total	640	100
Age	N	%
18-24	105	16,4
25-34	185	28,9
35-44	218	34,1
45-54	96	15,0
55 years and older	36	5,6
Total	640	100
Marital Status	N	%
Single	249	38,9
Married	391	61,1
Total	640	100
Education Status	N	%
High School and Below	90	14,1
Associate Degree	82	12,8
Undergraduate	281	43,9
Postgraduate (Master's/Doctorate)	187	29,2
Total	640	100
Monthly Personal Income	N	%
Very Low (0-2500 TL)	162	25,3
Low (2501-5000)	139	21,7
Middle (5001-7000 TL)	134	20,9
High (7001-9000 TL)	96	15,0
Very High (9001 TL and over)	109	17,0
Total	640	100
Amount for Annual Holidays	N	%
Very Low (0-2500 TL)	256	40,0
Low (2501-5000)	162	25,3
Middle (5001-7000 TL)	88	13,8
High (7001-9000 TL)	58	9,1
Very High (9001 TL and over)	76	11,9
Total	640	100

Source: own elaboration from the research data.

When the monthly personal incomes of participants were examined, the highest percentage (25.3%) was found to belong to the Very Low (0-2500

TL) monthly income group, while the lowest percentage (15%) belonged to the High (7001-9000 TL) monthly income group. When the amounts allocated by participants for vacations were examined, the highest percentage (40%) belonged to the the Very Low (0-2500 TL) group and the lowest percentage (9,1%) to the High (7001-9000 TL) group.

4.1 Differences in Levels of Participation in Terms of Demographic Features

The effects of demographic characteristics of the tourists participating in the study on participation were revealed through difference tests (t-test and one-way ANOVA). In Tables 3, 4, 5, 6, 7 and 8, the results of those tests are shown. Only significant differences are shown in the tables.

Table 3 shows us that the impact of COVID-19 on tourist behavior differs among gender groups of the domestic tourists participating in the study. When the arithmetic means of the answers were examined, it was found that the tendency of women to participate in isolation, avoidance, life impact, and accommodation preference was higher than men.

Table 3: The Differences of Research Variables According to Gender (t-test).

Factor	Gender	Mean	t	Sig.
Isolation	Male	3,71	-2,387	,017*
isolation	Female	3,87	-2,307	,017
Avoidance	Male	4,12	-3,006 ,0	,003**
	Female	4,29	-3,000	,003
Life Impact	Male	4,19	-3,132	,002**
Life impact	Female	4,39	-3,132	,002
Accommodation	Male	3,18	-1,976	.049*
Choice	Female	3,35	-1,970	,049

** Significant at p<0,01 level, * Significant at p<0,05 level **Source:** own elaboration from the research data.

Table 4 shows us that the impact of COVID-19 on tourist behavior differs among marital status groups of the domestic tourists participating in the study.

Table 4: Differences of Research Variables According to Marital Status (t-test).

Factor	Marital Status	Mean	t	Sig.
Travel Effect	Single	3,98	-2,208	,028*
Travel Effect	Married	4,19	-2,200	,020
Food&Beverage	Single	3,88	2,355	,019*
Preference	Married	3,74	2,333	,019
Transport	Single	4,03	060	,000**
Preference	Married	4,28	,968	,000

** Significant at p<0,01 level, * Significant at p<0,05 level. **Source:** own elaboration from the research data.

When arithmetic averages of the answers given were analyzed in Table 4, it was found that married people had a higher tendency to participate in travel

impact and transportation preference than singles, and that singles had a higher tendency to participate in food preference than married people.

Table 5 shows us that the impact of COVID-19 on touristic behavior differs among the age groups of local tourists participating in the study. When differences of the participants according to age groups are examined, it is seen that in the isolation dimension, the "18-24" age group participates more than the "35-44" and "45-54" age groups. In terms of travel effect, differences were found between the "25-34" and "18-24" age groups, the "35-44" and "18-24" age groups, and the "45-54" and "18-24" age groups.

Table 5: Differences of Research Variables by Age Groups (One-way ANOVA).

Factor	Age	N	Mean	F	Sig.
	18-24	105	4,01	3,724	
	25-34	185	3,87		
Isolation	35-44	218	3,69		,005*
	45-54	96	3,67		
	55 +	36	3,93		
	18-24	105	3,60		
Travel	25-34	185	4,14		
Effect	35-44	218	4,23	6,447 ,0	,000**
LIIECI	45-54	96	4,28		
	55 +	36	4,22		

^{**} Significant at p<0,01 level, * Significant at p<0,05 level **Source:** own elaboration from the research data.

Table 6 shows us that the impact of COVID-19 on tourist behavior differs among the educational status groups of domestic tourists participating in the study.

Table 6: Differences of Research Variables by Education Status One Way ANOVA).

Factor	Education Status	N	Mean	F	Sig.
	High School and Below	90	3,99		
Isolation	Associate Degree	82	3,96	3,811	,010 [*]
	Undergraduate	281	3,78		
	Postgraduate	187	3,68		
	High School and Below	90	4,61		
Life Impact	Associate Degree	82	4,46	3,869	,009*
	Undergraduate	281	4,29		
	Postgraduate	187	4,17		
Food and	High School and Below	90	3,98		
Food and Beverage Preference	Associate Degree	82	3,98	4,522	,004*
	Undergraduate	281	3,74		
	Postgraduate	187	3,70		

^{**} Significant at p<0,01 level, * Significant at p<0,05 level **Source:** own elaboration from the research data.

When these differences are examined, it is seen

that in the isolation dimension, the "High School and Below" group has a higher percentage than the "Postgraduate (Master's or Doctorate)" group in Table 6. Differences in life impact and food and beverage preference dimensions were found to be in the "High School and Under," "Postgraduate," "Associate Degree," and "Postgraduate" groups.

Table 7 shows us that the impact of COVID-19 on tourist behavior differs among the monthly personal income groups of domestic tourists participating in the study. When the differences of the participants according to their monthly personal income are examined, it is seen that the "Very Low" and "High" groups in the isolation dimension show more participation in these factors than the "Very High" group.

In terms of avoidance, it was determined that the difference was between the "Very Low" and "Very High" groups. In terms of travel effect, it was determined that the differences were between "Very High" and "Very Low," "High" and "Very Low," and "High" and "Low." Differences identified in the dimension of life impact were found between the "Very Low" and "High" and "Very High" groups and between the "Low" and "High" groups. Differences in the size of food and drink preference were found between the "Very Low" and "Very High" groups and between the "Low" and "Very High" groups.

Table 7: Differences of Research Variables by Monthly Personal Income Groups (One-way ANOVA).

l ersonal moor	Monthly				
Factor	Personal	N	Mean	F	Sig.
	Income				
	Very Low	162	3,96		
	Low	139	3,72		
Isolation	Middle	134	3,91	4,652	,001*
	High	96	3,80		
	Very High	109	3,55		
	Very Low	162	4,35		
	Low	139	4,13		
Avoidance	Middle	134	4,27	3,657	,006*
	High	96	4,20		
	Very High	109	4,06		
	Very Low	162	3,73		
Travel	Low	139	4,05		
Effect	Middle	134	4,13	8,964	,000**
LIICU	High	96	4,49		
	Very High	109	4,39		
	Very Low	162	4,52		
	Low	139	4,35		
Life Impact	Middle	134	4,04	7,023	,000**
	High	96	4,32		
	Very High	109	4,22		
	Very Low	162	3,93		
Food and	Low	139	3,88		
Beverage	Middle	134	3,76	3,831	,004*
Preference	High	96	3,72		
	Very High	109	3,59		

^{**} Significant at p<0,01 level, * Significant at p<0,05 level **Source**: own elaboration from the research data.

Table 8 shows us that the impact of COVID-19 on tourist behavior differs among the amount groups allocated for annual holidays of the domestic tourists participating in the study. When the differences of the participants according to the amount groups allocated for annual holidays are examined, it is seen that the "Very Low" group has more participation in these factors than the "High" group in the isolation dimension.

It was further determined that the "Very Low" group participated in the avoidance dimension more than the other groups. In terms of travel effect, the differences were between "Low" and "Very Low," "High" and "Very Low," "High" and "Very Low." The differences in the food and beverage preference dimensions appear to be between the "Very Low" and "Very High" groups. Differences in the dimension of transportation preference were found between the "Low" and "Very Low" groups and between the "Very High" and "Very Low" groups.

Table 8: Differences of Research Variables by Groups of Amount for Annual Holiday Expenditures (One Way ANOVA)

Amount for Annual Holiday Expenditures (One Way ANOVA					
Factor	Amount for Annual Holidays	N	Mean	F	Sig.
Isolation	Very Low Low Middle High Very High	256 162 88 58 76	3,95 3,79 3,59 3,68 3,68	3,909	,004*
Avoidance	Very Low Low Middle High Very High	256 162 88 58 76	4,31 4,20 4,08 4,10 4,12	2,786	,026*
Travel Effect	Very Low Low Middle High Very High	256 162 88 58 76	3,80 4,22 4,23 4,42 4,54	9,132	,000**
Food and Beverage Preference	Very Low Low Middle High Very High	256 162 88 58 76	3,87 3,81 3,83 3,60 3,58	3,075	,016*
Transport Preference	Very Low Low Middle High Very High	256 162 88 58 76	4,07 4,26 4,09 4,24 4,29	2,820	,024 [*]

^{**} Significant at p<0,01 level, * Significant at p<0,05 level **Source:** own elaboration from the research data.

5. CONCLUSION AND RECOMMENDATIONS

Focusing on multidimensional analysis of the effects of COVID-19 on tourism demand, this study clearly conveys the effects of the pandemic on tourism

demand. The findings enrich and contribute to the crisis management literature in many ways. First, the data revealed that the developed scale was successful in detecting multidimensional effects of the pandemic. As a result of the pandemic, it is seen that the potential tourist will tend to isolate, avoid, and turn to alternative tourism.

In addition, the approach to traditional travel and accommodation activities is changing and changes in these areas are in question (e.g., individual transportation instead of public, secondary housing instead of rentals). In this sense, it is obvious that the developed scale can be used as a reliable tool for measuring tourist orientations in pandemic circumstances.

On the other hand, identified tourism trends also provide important clues about the future of demand. The pandemic seems to have greatly affected the lives of potential tourists (mean=4,30). Again, the current effect on travel, especially in the form of cancellation of planned trips, is also significant (mean=4,11).

It is noteworthy that the tendency to avoid based on whether the potential tourist travels or not and the choice of destination in possible travel is also high (mean=4,21). This situation reveals most potential tourists have significant concerns about traveling, find it unsafe to travel (especially to destinations affected by the epidemic), will stay away from large cities with densely populated areas, prefer places closer to home, and opt for shorter durections.

It is possible to follow the precautions and restrictions taken into consideration in case of joining a trip from the statements collected under the isolation dimension. In this context, avoiding crowded environments, not going to entertainment venues, avoiding contact with local people, consuming meals separately from other people, and using one's own means are of primary concern.

Changing preferences in terms of traditional travel components are also clearly identified. There is a tendency to consume packaged products in hotels certified for eating and drinking. There is a preference for moving away from public transportation. In terms of accommodation, there is a tendency toward secondary residences. In addition to all these, it is understood that the interest in alternative tourism types has increased even though the intensity of overall orientation is low (mean=3,59).

The differentiation of tourism preferences according to the demographic characteristics of the participants reveals that the effects of the pandemic differ depending on personal characteristics. In this context, it is understood that women show a higher degree of orientation, at least in terms of isolation, avoidance, and change in accommodation

preferences. This shows that female sensitivity holds within the scope of consumer preference during epidemic periods. However, it is also understood that marital status, age, and education differences produce very limited effects on tourism demand within the scope of pandemic. Thus, the current COVID-19 pandemic reflects the width of the impact area, as well as the effects that are felt strongly for every segment.

It is an important finding that isolation and avoidance tendencies are more severe for low-income group participants than high-income groups. This situation can be explained by the fact that consumers from low-income groups have less opportunity in terms of consumption preferences. Since high-income consumers are able to access more vehicles and facilities, the tendency to self-isolate during the travel process should be more limited.

That the impact of the pandmic on overall life is lower for people with high income while the effect on travel is higher supports this interpretation. The high-income consumer is probably more reluctant to participate in travel in the current period, as it is easier to access different leisure options and travel substitutions. Therefore, a low tendency toward avoidance and isolation factors emerged. A similar trend was observed among the "amount for annual holidays" group.

These findings coincide with the findings of studies that both reveal the effects of epidemics and estimate the possible effects of COVID-19 on tourism demand. For example, Richards & Morrill (2021) indicate that businesses in almost all travel sectors and world regions have experienced a downturn in demand, and that they are also expecting this to continue for the foreseeable future. The effect of COVID-19 on tourism demand conincides with risk perception and concrete aspects reflected in consumer preferences. It is clear that the scale, which clarifies these determinations, can be recommended to tourism researchers as a tool for measuring the change in tourism demand in a pandemically affected environment.

On the other hand, the present findings allow operators to develop clearer recommendations for action. Participants have not given up on travel altogether, and an orientation to some travel forms and options is clear. This shows that the consumer can psychologically cope with the risk posed by the pandemic.

Because consumers are affected negatively by uncontrollable risks at a higher rate and because epidemic diseases transmitted from humans constitute a risk that can be controlled (Carballo, Leon, & Carballo, 2017: 539), effective measures will be welcomed by consumers.

Tourists' tendencies toward avoidance appear to be related to the control of the environments to which they travel as well as avoid. It is there important for destinations and businesses to strictly abide by pandemic measures, to regulate social distancing, to prevent crowds from gathering at service stations, and so on. Advocacy for, and education in, more personal solutions is therefore of vital importance, as is education of the public at large in the implementation of said solutions. The perceptions of different genders and income groups should also be taken into account in the development and sharing of applications. In general, it can be suggested that businesses should target individual tourists rather than large tourist groups.

6. LIMITATIONS AND IMPLICATIONS

This study is limited by the response of domestic tourists in Turkey participated in the survey. The data in the study were collected via an online survey due to pandemic conditions. These limitations may affect the results obtained. Data may be collected from foreign tourists and in different destinations in future researches on similar issues. Besides, other data collection methods can be used as well as online surveys.

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