RESIDENTS’ NEGATIVE PERCEPTION OF FELLOW COUNTRYMAN’S TRAVELLING DURING EPIDEMIOLOGICAL RESTRICTIONS*

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Abstract. This research explored the creation of negative perception towards returning travellers in response to the threat of spreading the virus and positive travel behaviour at the time of the COVID-19 health crisis. The data for research was collected from 530 respondents and analysed using hierarchical multiple regression, confirmatory factor analysis, and the Sobel test of significance. The study results revealed that people had a perception of a high risk of catching COVID-19, which has led to a negative perception of travel during a pandemic. Moreover, malicious travel behaviour reinforced discrimination, while positive travel behaviour reduced the negativity in perceptions of returning travellers but did not spare the returnees from discrimination. Implications for both practice and theory, as well as limitations and future directions are further discussed. Based on research findings, resilience of travel should not limit its focus on just the recovery and health control measures of regions that receive travellers, but also pay close attention to the perceptions of travellers returning home after vacations, so as to avoid social distress and stimulate a continuous growth of the demand for travel. In order to stimulate sustainable travel activity with no negative perception of travel and travellers among resident, maintaining local getaways is recommended.

Keywords: hierarchical multiple regression, risk management, travel behaviour, COVID-19, recovery marketing

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Аннотация. В данном исследовании изучалось формирование негативного восприятия возвращающихся путешественников в ответ на угрозу распространения COVID-19 в Екатеринбурге, Екатеринбургском техническом университете КТУ.

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Аннотация. В данном исследовании изучалось формирование негативного восприятия возвращающихся путешественников в ответ на угрозу распространения...
вируса и позитивного поведения (готовность к поездкам) путешественников во время ослабления ограничений на поездки в период кризиса, связанного с COVID-19. Данные для исследования были собраны от 530 респондентов и проанализированы с использованием иерархической множественной регрессии, факторного анализа и теста значимости Собеля. Когнитивная реакция местных жителей, осознающих высокие риски заражения COVID-19, приводит к дискриминации и негативному восприятию людей, совершающих путешествия в этот период. Хотя больший негатив по отношению к возвращающимся путешественникам демонстрируют люди, полностью отказавшиеся от поездок, тем не менее даже со стороны жителей, склонных к позитивному поведению, наблюдается дискриминация по отношению к возвращающимся путешественникам. Далее обсуждаются последствия для теории и практики развития туризма выявленных когнитивных реакций местных жителей. Подобные установки создают риски к восстановлению туристической активности уже после снятия ограничительных эпидемиологических мер. Исходя из результатов исследования, устойчивость путешествий не должна ограничиваться только мерами по восстановлению и контролю здоровья в регионах, принимающих путешественников; необходимо уделять пристальное внимание восприятию путешественников, возвращающихся домой после отпуска, чтобы избежать социального стресса и стимулировать постоянный рост спроса на путешествия. В целях стимулирования устойчивой туристической активности без негативного восприятия путешествий и путешественников среди жителей рекомендуется поддерживать местный отдых.

**Ключевые слова:** иерархическая множественная регрессия, управление рисками, туристическое поведение, COVID-19, оздоровительный маркетинг

**Introduction**

Research on tourism recovery marketing focuses primarily on boosting tourists’ confidence by restoring destinations’ images and providing crisis communication for visitors (Mair et al., 2016). Consumer behaviour and willingness to travel in tourism regions during COVID-19 has been acknowledged to be affected by return travellers through social media, word of mouth (WOM), the transportation modes available, and health security requirements (Hall et al., 2020). By the end of 2020, after almost a year of the COVID-19 pandemic, the entire world was affected by the virus. Therefore, people who decided to travel opened themselves up to the potential for increased risk of getting sick and also for infecting others with the virus upon their return. Nonetheless, the negative perception towards returning travellers during the pandemic has not yet been disclosed in the global tourism environment.

Safety has long been recognised to be a widespread concern for travellers, even without a health crisis (Dolnicar, 2005), and when there is an increased level of perceived risks, travel behaviour is expected to change. Previous studies of travel risk perceptions in tourism focused on perceptions towards the destination of travel and a positive effect between the destination country’s image and people’s travel intentions (Alvarez and Campo, 2014; Caber et al., 2020; Chew and Jahari, 2014). Subjective knowledge has been found to directly influence a destination perception (Perpiña et al., 2020). Jonas et al. (2011) indicated that health concerns have a negative effect on destination selection behaviours and further increase the perceived travel risks. During the height of the COVID-19 pandemic in 2020, the decision to travel contained health risks by itself, the possibility of catching the
A broad range of studies during the height of the COVID-19 pandemic in 2020 focused on people’s travel behaviour during the crisis and their intentions to travel afterward (Das and Tiwari, 2020; Ivanova et al., 2021; Jeon and Yang, 2021). At the same time, academics recognised that the willingness of destinations to receive tourists could be undermined by the potential health risks (Joo et al., 2021; Qiu et al., 2020). In addition to the social stigmatisation towards tourists in receiving regions, regions generating tourists could face an issue of residents discriminating towards tourists returning home from journeys. The negative perception of returning travellers during a health crisis should be acknowledged during recovery planning and in forecasting future tourism demands. Moreover, global stress such as that caused by the pandemic might have influenced people’s judgement of how essential travel was in general, especially considering the travel-related risks, and thus may have fostered a more responsible consumption of local attractions instead (He and Harris, 2020).

This study focused on the relationship among risk perceptions, the negative perception of returning travellers, and people’s travel behaviour during the pandemic. The purpose of this research was to investigate the factors that encourage negative perception of travellers during the relaxation of measures at the time of a health crisis, from the perspective of people’s travel experience and perception of risks. Specifically, this study had two objectives: (1) to validate the influence of cognitive response on people’s negative perception of returning travellers, and (2) to investigate the mediating effect of travel behaviour during COVID-19 on people’s negative perception about returning travellers. The research sought to contribute to tourism studies on travel risks and travel intentions, as well as on the theory of negative stereotype development during a health crisis. From a practical viewpoint, the findings from this study may help to predict tourists’ travel intentions during the relaxation of COVID-19 preventive measures and may anticipate a negative perception towards returning travellers in society and help avoid the appearance that travel is an irresponsible consumer choice after a crisis.

**Literature review**

*The stimulus-organism-response (SOR) theory*

As the first step in developing our theoretical framework, we adopted the stimulus-organism-response (SOR) theory (Mehrabian & Russell, 1974), in which a behaviour is caused by the cognitive processes of individuals when stimulation is created by stimuli (a set of attributes) from outside. That framework helped us to identify the importance of outside stimulation on the outcome, thus potentially helping to adjust the stimulation’s influence in order to adjust the behavior. A stimulus-organism-response (SOR) theory is a useful investigative framework that is frequently used in a tourism context. Jani and Han (2015) used the model to understand the connection between hotel ambiance (stimulus), processed emotions (organism), and loyalty (response). Hew and colleagues (2018) used an SOR model to research mobile social tourism shopping and discovered that the shopping
method’s perceived mobility and social presence (environmental stimuli) influenced tourists’ mobile social tourism shopping intention through their inner organism changes (i.e., perceived usefulness and perceived enjoyment). Kim and colleagues (2020) used the SOR framework to study virtual reality (VR) technology acceptance in tourism and found a significant impact from an authentic VR experience (stimulus) on cognitive and affective responses. Recently, Laato and colleagues (2020) studied unusual consumer behaviour (response) in the context of COVID-19, using information overload (stimulus) as a construct to measure the pandemic’s environmental influence.

Indeed, the pandemic has influenced behaviours throughout many aspects of life. Following the logic used in other consumer studies of the experience as an outside influence, this study adopted the pandemic as a stimulus. We conceived of the organism as the bridge between the stimuli and the response, and anticipated it would be reflected through a combination of emotional and cognitive states (Sun et al., 2020). In this study, we referred to the perception of risks as an organism. Perception is an essential form of a person’s cognitive contact with the world around him (Efron, 1969), and as such it fits the construct of an organism within the SOR framework. We took the construct of perception to include both the emotional and cognitive dimensions. The interplay between emotions and cognition has been extensively discussed in psychology (Izard et al., 1984; Strongman, 1996), although the distinction between feeling and thinking is arguable (Barrett et al., 2007). From the neuroscience perspective, emotions directly impact cognitive processing (Holland and Gallagher, 1999). Furthermore, emotions benefit the development of stereotypes (DeSteno et al., 2004; Chevtaeva et al. 2021). For this study, I focused on the perception of COVID-19 in which the emotional experience is included in the dimension of perception. The response was in a form of attitude towards returning travellers.

Hypothesis development

Following the stigmatisation theory, negatively perceived individual attributes can lead to negative stereotypes (Major et al., 2002). Many individuals infected by the novel coronavirus show mild or no symptoms, yet they can spread the virus to others (Del Rio and Malani, 2020). Thus, the potential of asymptomatic illness may be a facilitator for stigmatisation and negative perception. Returning tourists, especially if there are no quarantine measures, may arrive and come into contact with local people, thus potentially becoming a threat to the community. This research explored the creation of negative perception towards returning tourists in response to the threat of spreading the virus and positive travel behaviour. Positive travel behaviour refers to a positive attitude towards travel and willingness to travel. Even when the government ends measures preventing individuals from travelling, subjective perceptions of norms can guide individuals’ opinions (Tankard and Paluck, 2016).

According to the SOR theory, in our study the stimulus (COVID-19) would generate an internal reaction (perception of risk) and result in a response (attitude towards returning travellers). The SOR claims a reaction to a particular behaviour, in this case to a positive travel behaviour. Qiu and colleagues (2020) discovered that residents perceived a health risk posed by tourists who visited their city during the pandemic and potentially would spread the virus. Simultaneously, the unique
circumstances of COVID-19 suggest that a similar negative perception may accrue towards residents who choose to travel outside of the city and come back after their travels. Due to the great significance of COVID-19, its influence may lead to the rapid development of a stereotype towards outgroups (Sorokowski et al., 2020), such as a negative perception of people who travel during the pandemic. For example, at the beginning of the outbreak of COVID-19, negative perception was developed against people from Asia, because the virus became associated with the region where it originated (Roberto et al., 2020).

In analyses of risks, personal experience of risk is commonly used as the determining factor of a more negative perception of the phenomenon (Barnett and Breakwell, 2001; Van der Linden, 2014). Moreover, the perception of risk is connected to tourism behaviours: Tourists who perceive high risk will take evasive action, whereas tourists who perceive low risk despite the reality of high risks will pay the price (Mahatme and Mekoth, 2020). During the health crisis, when pandemic control measures, such as wearing masks, social distancing and staying at home are not mandatory, the lax regulations may lead to insufficient compliance, and that can be seen as unfair and can intensify stigmatisation (Betsch et al., 2020). Accordingly, during the recovery stage of the pandemic there are two different groups of residents: the group of people who expose themselves to risks connected to travel, and the other group, who avoid travel. In addition, people who avoid travel may develop negative perception of returning travellers.

Thus, we hypothesised the following:

H1 = High risk perception of COVID-19 leads to a negative perception of returning travellers.

H2 = The relationship between perceived risk and the negative perception of returning travellers is mediated by (a) positive travel behaviour, and (b) malicious travel behaviour.

H3 = A relatively lower perceived risk of catching COVID-19, more than a higher perceived risk of catching COVID-19, leads to a negative perception of returning travellers, when controlling for (a) positive travel behaviour and (b) malicious travel behaviour.

Following those justifications and hypotheses, the study adopted the research model presented in Figure 1.
Methods

Sample and data collection

This study used an online questionnaire to gather data voluntarily from respondents, using the convenience sampling technique. It is generally difficult to use nonrandom samples for inference. However, such inferences are important (Liu et al., 2023). Recently, it is noted that data with detailed individual-level information such as age, occupation, sex and race can be used to generalize inference of nonrandom samples to their target population and the use of mass imputation approach in inferential analysis such as OLS and Hierarchical regression (Kim et al., 2021; Liu et al., 2023). In addition, the law of large numbers reduces the random error that is due to the nonrandom sampling when conducting inferential analysis. Given this, a total of 530 respondents took part in the study. That sample size was enough to cover a proper solution for inferential analysis (Anderson and Gerbing, 1984; Hair et al., 2008) such as Ordinary Least Squares (OLS) and Hierarchical Linear Modelling (HLM). Females dominated the respondents (69.1%), and over half of the total respondents (67.4%) were young adults (under 30 years old). Almost half (45.3%) had a university degree. Also, a little over a quarter (30.4%) worked as social workers or government or state workers (in education, culture, or medicine).

Context of the study

We focused on residents of the city of Yekaterinburg, in the Sverdlovsk region in the Russian Federation. Yekaterinburg is one of the biggest and most developed cities in Russia, with high outbound tourism potential. In November 2020, travel was thriving in Russia during the pandemic. Although the country was closed to foreign visitors, residents were allowed outbound travel, and after July 2020 no quarantine was required.
upon arrival\(^7\). Moreover, inbound travel within the largest country in the world (17.1 million km\(^2\)) remained open. The Russian Tourism Organization encouraged domestic travel by introducing a 20% cashback offer\(^8\) that was promoted on an online government services webpage with 103 million users from Russia\(^9\). More than 500,000 Russian tourists visited Turkey in September 2020\(^10\), during a month when there were an average number of 5876 new COVID-19 cases a day\(^11\). Although the Government of Russia set up an official webpage to provide information about the country’s preventative measures for COVID-19 and shared daily updates and stay-at-home recommendations\(^12\), there was no direct travel ban, and people could freely move within and outside the country, as long as other countries let them in. The unique circumstances in the Russian Federation during the second part of 2020 made it an interesting place for a case study of the cognitive and behavioural effects on negative perception of returning travellers.

**Measurement scale**

The study’s initial measurement model included five constructs and 22 variables. The constructs of personal experience during COVID-19, perceived risk of COVID-19 and travel, positive travel behaviour, malicious travel behaviour, and negative perception of returning travelers were based on previous studies. The questionnaire used in the study is presented in Table 1. Variables were developed on the basis of the works of Rubin and colleagues (2020), Neuburger and Egger (2020); Conway and colleagues (2020), and Wells and colleagues (2020). All items were ranked with a five-point Likert scale, ranging from 1 (strongly disagree) to 5 (strongly agree). Additional questions were asked about the respondents’ gender, age group, education, occupation, and travel history during the COVID-19 in 2020. The initial questionnaire was created in English and later translated into the Russian language and discussed with academic professors in Russia, who evaluated the measurement items used to establish the final version of the questionnaire.

**Table 1**

<table>
<thead>
<tr>
<th>Indicators of constructs</th>
<th>Literature sources</th>
</tr>
</thead>
<tbody>
<tr>
<td>Perceived risk of COVID-19 travel (PR)</td>
<td></td>
</tr>
<tr>
<td>PR1: I try to avoid other people because I don’t want to get sick</td>
<td>Conway et al., 2020</td>
</tr>
<tr>
<td>PR2: Travelling by plane is a health risk, as many people may carry the virus</td>
<td>Neuburger and Egger, 2020</td>
</tr>
</tbody>
</table>


\(^8\) Russia Travel, 2020. *Pay with the bank card “MIR” to get a 20% cashback from the cost of the domestic travel* [Оплачивайте путешествия по России картой «Мир» и верните 20% от стоимости поездки]. [Online] Available at: https://xn--b1afakdgpzid6e.xn--p1ai/?utm_source=bamertop&utm_medium=gosuslugi&utm_campaign=cashback


\(^12\) Stopcoronavirus, (2020). *What to do?* [Что предпринимать?]. [Online] Available at: https://xn--80aesfpebagmffle0a.xn--p1ai/what-to-do/all/
PR3: I feel my health is at risk as a consequence of COVID-19  
Rubin et al., 2020

<table>
<thead>
<tr>
<th>Positive Travel behaviour (PTB)</th>
</tr>
</thead>
<tbody>
<tr>
<td>PTB1: During the pandemic, I engage in a holiday possibility within my own region</td>
</tr>
<tr>
<td>PTB2: During the pandemic, I still go for a vacation abroad</td>
</tr>
<tr>
<td>PTB3: If the destination is opened, I might travel there for leisure</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Malicious Travel behaviour (NTB)</th>
</tr>
</thead>
<tbody>
<tr>
<td>NTB1: I try to stay at home as much as possible</td>
</tr>
<tr>
<td>NTB2: During the pandemic, I will not engage in the International leisure travel</td>
</tr>
<tr>
<td>NTB3: During the pandemic, I will not engage in Regional leisure travel</td>
</tr>
</tbody>
</table>
| NTB4: I miss traveling, but I wait till I get a vaccine  
Rubin et al., 2020 |

<table>
<thead>
<tr>
<th>Negative Perception of Returning Travellers</th>
</tr>
</thead>
</table>
| NPRT1: I fear that the virus will be carried by returning travelers to my near surroundings  
Neuburger and Egger, 2020 |
| NRPT2: International Travelling should be prohibited to avoid the spread of the virus |
| NRPT3: Regional Travelling should be prohibited to avoid the spread of the virus |
| NRPT4: Currently, it is irresponsible to travel to international destinations |
| NRPT5: Currently, it is irresponsible to travel within your region |

**Analyses**

The data were collected from 530 respondents and were analysed using hierarchical multiple regression, confirmatory factor analysis, and the Sobel test of significance. We used the averages of the Likert scale, to conduct the factor analysis to reduce the number of items and then convert the results to confirm the factors for regression analysis in this study. Such a technique has been used by several researchers and supported by several studies including Pallant (2007), Gamor et al. (2018), and Asún et al. (2016) who support the use of the Likert scale for factor analysis and further use for regression analysis.

Respondents’ demographic characteristics, such as age, gender, occupation, and educational status, were used as control variables. This approach did not reduce the sample size of the study, and it remained adequate for conducting ordinary least squares (OLS) techniques. To double-check the output, we conducted mediation analysis using SPSS PROCESSv3.4, and the results were the same as those from the OLS or even stronger. In all eight models, no collinearity issues were found in the predictors and the controlled independent variables because all VIF values were less than the cutoff value of 3. To determine the significance of the mediation effect in the full model, the Sobel test statistic \( z \) was used (Sobel, 1982):

\[
z = \frac{ab}{\sqrt{(b^2SE_a^2) + (a^2SE_b^2)}}
\]

where \( a \) represents the regression coefficient for the relationship between perceived risk (IV) and positive travel behaviour (mediator), and \( b \) represents the regression coefficient for the relationship between positive travel behaviour and negative perception of returning travellers (DV). The term \( SE_a \) represents the standard error of \( a \), and the term \( SE_b \) represents the standard error of \( b \).

**Findings and Discussion**

Table 2 shows the means, standard deviations, and the correlations among the
variables used in performing mediation analysis. A significant and negative correlation was found between perceived risk of COVID-19 and positive travel behaviour, malicious travel behaviour, and the negative perception of returning tourists. However, positive and significant correlation coefficients were recorded between the negative perception of returning travellers, the perceived risk, and malicious travel behaviour. The skewness and kurtosis values were below 3 in absolute terms, which was indicative of normally distributed data. All of the variables used in this study had coefficients with adequately high reliability. The reliability values of the scales were within the acceptable range, with the lowest value for Cronbach’s alpha, of 0.6, occurring for positive travel behaviour. However, the highest value of Cronbach’s alpha was for the negative perception of returning travellers scale (0.9). The summative scales also showed distinctness, with the Cronbach’s alpha coefficients being consistently higher than the correlations between the constructs were.

We conducted a confirmatory factor analysis to evaluate the discriminant validity of the scales used in this study (Table 2). The results showed that the proposed model fit indices agreed with the goodness of fit (GFI) of a four-factor model, and the model was found to fit the data well ($\chi^2 = 301.932, df = 79, p<.01; CFI=.931; TLI=.91; RMSEA=.07$).

### Table 2

<table>
<thead>
<tr>
<th>Variable</th>
<th>Mean</th>
<th>S.D.</th>
<th>Skew</th>
<th>Kurt.</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Perceived Risk</td>
<td>2.987</td>
<td>.989</td>
<td>-.075</td>
<td>-.618</td>
<td>(0.7)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Malicious Travel Behaviour</td>
<td>2.962</td>
<td>1.106</td>
<td>.014</td>
<td>-.826</td>
<td>.533***</td>
<td>(0.7)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. Positive Travel Behaviour</td>
<td>2.484</td>
<td>.886</td>
<td>.373</td>
<td>.054</td>
<td>-.172***</td>
<td>-.354***</td>
<td>(0.6)</td>
<td></td>
</tr>
<tr>
<td>4. Negative Perception Returning Tourists</td>
<td>2.823</td>
<td>1.142</td>
<td>-.016</td>
<td>-.989</td>
<td>.503***</td>
<td>.591***</td>
<td>-.368***</td>
<td>(0.9)</td>
</tr>
</tbody>
</table>

Notes: N=530; *** $p < .01$

The Cronbach’s alpha coefficients are shown in parentheses.

To examine the influences that the selected variables had on the negative perception of the mediating role of travel behaviour, we conducted a series of regression analyses. Table 3 displays the standardised regression coefficients of the predictors. We controlled for characteristics of respondents that might influence the results of the study. Thus, the variables controlled for were the respondents’ age, gender, educational status, occupation, and travel. In general, the $R^2$ values recorded an incremental change from Model 1 to Model 4, and also from Model 5 to Model 8, at a 0.05 significance level.

### Hypothesis 1: High-Risk Perception

As the model predicted, in Hypothesis 1, the perceived risk of COVID-19 had a positive and statistically significant total effect (0.510; $p<0.000$) on people’s perceptions of returning travellers (Model 2). This shows that in the absence of a mediating variable, a higher risk perception, more than a lower risk perception, led to a negative perception of returning travellers. Thus, the higher the individual’s risk perception concerning COVID-19 was, the more negatively judgemental he or she was about returning travellers. This finding aligned with previous research (Mahatme and Mekoth, 2020) and highlights the importance of managing risk perceptions, in an effort to avoid social conflicts and restart travel.

### Hypothesis 2: Travel Behaviour as Mediator

In assessing the mediating effect of travel behaviour, positive travel behaviour (PTB) and malicious travel behaviour (MTB) were used as mediators of the link between
perceived risk and negative perception of returning travellers. All of the conditions for mediation were met, which demonstrated that positive travel behaviour and malicious travel behaviour each mediated the relationship between risk perception and a negative perception towards returning travellers (NPRT). First we found that perceived risk had a positive and significant effect on NPRT in Model 2. Second, the perceived risk of COVID-19 by an individual had a significant positive impact on MTB ($p<0.001$) but a negatively significant impact on PTB ($p<0.001$) (Models 6 and 8). Third, the PTB and MTB had a significant impact on the NPRT. Whereas the PTB had a negative impact (-.275; $p<0.001$) in Model 3, the MTB had a positive impact (.393; $p<0.001$) in Model 4 on the NPRT of individuals. Fourth, the relationship between the PTB was significant and negative (-.275; $p<0.001$) in Model 3, whereas that of MTB was positive (.393; $p<0.001$) in Model 4. However, the strength of the perceived risk of COVID-19 on NPRT was reduced (.274; $p<0.001$) but remained statistically significant when the effects of the mediators were controlled for (See Hypothesis 3). This finding shows that both the direct and indirect effects were positive and that a lower perception of the risk of acquiring COVID-19 did not lead to a negative perception towards returning travellers, when we controlled for PTB and MTB.

To determine whether the mediation effect was significant, we used the Sobel test. The results of the test revealed that the mediation effect from both PTB and MTB were significant ($z = 3.191$) and ($z = 7.711$), with respective two-tailed probability values of 0.001 and 0.000. That finding demonstrated that both PTB and MTB significantly mediated the relationship between perceived risk and a negative perception towards returning travellers. The indirect effect of risk perception through PTB (.040) and the total effect (.550) were lower than the indirect effect (.231) and the total effect (.741) of MTB. In the full model, the proportion of negative perception towards returning travellers that operated indirectly through PTB was only 7.72%, whereas approximately 31.2% operated through MTB. Therefore, a clear majority of the negative perception about returning travellers (roughly 90%) had a direct effect of perception on negative perception when dealing with PTB, whereas a little over half (68.8%) operated directly when dealing with MTB.

The finding that MTB led to a more muted reaction towards returning travellers was comparable to the stigmatisation of nonsmokers towards smoking as a habit that potentially causes passive smoking (McCool et al., 2013). This may be explained by a lack of understanding about such a behavioural choice. Therefore, following the example with smoking, promoting empathy during the COVID-19 recovery stage could help to lower negative perception towards returning visitors. For example, presenting materials about social frustrations arising from the absence of travel during COVID-19, or including information about different motivations for travel during the pandemic, could help to increase the level understanding among non-travellers towards returning travellers and perhaps could limit discrimination. However, whereas smokers have a more loyal perception towards a smoking habit, the influence of a PTB towards lowering the level of negative perception of returning travellers is quite low (7.72%). This finding suggests that researchers should look for additional factors that influence negative perceptions towards returning travellers and that engender stigmatisation of their travel habits.

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### Table 3

Results of the mediating effects of travel behaviour.

<table>
<thead>
<tr>
<th>Negative perception of return travellers</th>
<th>Model 1</th>
<th>Model 2</th>
<th>Model 3</th>
<th>Model 4</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Variable</strong></td>
<td><strong>Coefficient</strong></td>
<td><strong>VIF</strong></td>
<td><strong>Coefficient</strong></td>
<td><strong>VIF</strong></td>
</tr>
<tr>
<td>Constant</td>
<td>3.486*** (.212)</td>
<td>1.594*** (.231)</td>
<td>2.372*** (.244)</td>
<td>1.504*** (.244)</td>
</tr>
<tr>
<td>Age</td>
<td>.019 (.066)</td>
<td>1.308</td>
<td>-.068 (.058)</td>
<td>1.339</td>
</tr>
<tr>
<td>Sex</td>
<td>-.057 (.108)</td>
<td>1.034</td>
<td>.001 (.094)</td>
<td>1.047</td>
</tr>
<tr>
<td>Educational Status</td>
<td>-.091* (.052)</td>
<td>1.324</td>
<td>.075* (.045)</td>
<td>1.325</td>
</tr>
<tr>
<td>Occupation</td>
<td>-.064 (.023)</td>
<td>1.158</td>
<td>-.010 (.020)</td>
<td>1.169</td>
</tr>
<tr>
<td>Travel</td>
<td>-.065 (.034)</td>
<td>1.021</td>
<td>-.069* (.029)</td>
<td>1.020</td>
</tr>
<tr>
<td>Perceived Risk</td>
<td>.510*** (.044)</td>
<td>1.041</td>
<td>-.275*** (.048)</td>
<td>1.101</td>
</tr>
<tr>
<td>Positive Travel Behaviour</td>
<td>-.090** (.040)</td>
<td>1.324</td>
<td>.086*** (.039)</td>
<td>1.325</td>
</tr>
<tr>
<td>Malicious Travel Behaviour</td>
<td>.024</td>
<td>274</td>
<td>343</td>
<td>.439</td>
</tr>
<tr>
<td>Adjusted R²</td>
<td>.015</td>
<td>266</td>
<td>334</td>
<td>.430</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Positive Travel Behaviour</th>
<th>Model 5</th>
<th>Model 6</th>
<th>Model 7</th>
<th>Model 8</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Variable</strong></td>
<td><strong>Coefficient</strong></td>
<td><strong>VIF</strong></td>
<td><strong>Coefficient</strong></td>
<td><strong>VIF</strong></td>
</tr>
<tr>
<td>Constant</td>
<td>1.728*** (.161)</td>
<td>2.198*** (.201)</td>
<td>3.341*** (.203)</td>
<td>1.448*** (.217)</td>
</tr>
<tr>
<td>Age</td>
<td>-.003 (.050)</td>
<td>1.308</td>
<td>.026 (.050)</td>
<td>1.339</td>
</tr>
<tr>
<td>Sex</td>
<td>.095 (.082)</td>
<td>1.034</td>
<td>.060 (.82)</td>
<td>1.047</td>
</tr>
<tr>
<td>Educational Status</td>
<td>.090** (.040)</td>
<td>1.324</td>
<td>.086*** (.039)</td>
<td>1.325</td>
</tr>
<tr>
<td>Occupation</td>
<td>.053*** (.018)</td>
<td>1.158</td>
<td>.046*** (.018)</td>
<td>1.169</td>
</tr>
<tr>
<td>Travel</td>
<td>.081*** (.026)</td>
<td>1.020</td>
<td>.082*** (.025)</td>
<td>1.020</td>
</tr>
<tr>
<td>Perceived Risk</td>
<td>-.146*** (.038)</td>
<td>1.041</td>
<td>.589*** (.041)</td>
<td>1.041</td>
</tr>
<tr>
<td>Adjusted R²</td>
<td>.066</td>
<td>.092</td>
<td>.051</td>
<td>.318</td>
</tr>
<tr>
<td>Indirect effect through PTB/MTB = (a*b) .040</td>
<td>(d*e) .231</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total effect (indirect + direct effect)=</td>
<td>.550</td>
<td>.741</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Effect size =</td>
<td>7.27%</td>
<td>31.17%</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

N=530. Table shows unstandardised coefficients (standard errors), ***p<0.01; **p<0.05; *p<0.

### Conclusions

This research confirms the relationship between cognitive response and residents’ negative perception towards returning travellers. As a result of the pandemic, people have had a perception of high risk of catching COVID-19, and that has led to negative perception against travellers. Therefore, the restart of travel should not limit its focus on just the recovery and health control measures of regions receiving tourism, but should also pay close attention to the perceptions of travellers returning home after vacations, so as to avoid social distress and stimulate a continuous growth of the demand for travel. This might especially be actual tasks for regions that simultaneously receive tourists and generate travel demand, such as the big megalopolis cities of London, Paris, Tokyo, and New York.

Another important finding was that malicious travel behaviour reinforced negative perception towards returning travellers. Accordingly, positive travel behaviour reduced the negativity in perceptions of returning travellers but did not spare the returnees from discrimination. Even people who were engaged in travelling during COVID-19 still discriminated against fellow travellers. This suggests that as soon as it seems safe,
regions wishing to preserve travel behaviour should encourage local vacations and small getaways, to remove the full suspension of leisure travel that will reinforce negative perception of returning travellers. Because residents’ negativity about travel may influence travel intentions, it is important not to create a negative social environment that will result in stigmatisation towards potential tourists. In addition, an open discussion about why people travel during unstable times, how they travel, and what control measures are in place to secure their journeys should help to reduce discrimination. As this study showed, exhibiting a positive travel behaviour did not cause the negative perception of travellers to disappear. Therefore, a search for additional factors, constant monitoring of public perceptions, and public forums are needed to control the restarting of travel.

Although the findings of this study spotlight the issue of negativity towards returning travellers during the health crisis recovery stage, additional research could increase the understanding of relationship between negative perception of travellers and travel behaviour. Future research could focus on a more in-depth understanding of the elements in addition to travel behaviour that influence negative perception towards travellers, in order to keep the restart of travel under control. A main possibility would be to repeat this study in other destinations that are experiencing a recovery from a health crisis. A similar study in a diverse cultural setting is called for, once travel activity resumes, because that may help to forecast the recovery model further. We suggest replicating the study in Asian settings, because the perception of risk in Asian countries may vary from that in Europe (Law, 2006). Another possibility for travel research would be a comparison of negative perception towards returning travellers and towards upcoming tourists. An enhanced understanding of the public perception of risks and social stigmatisation will help the industry to plan better for future unpredicted crises, as well as to restart global tourism after the COVID-19 pandemic. The limitation of this study is in its focus on leisure travel, given that negative perception towards people who are forced to travel due to work or study circumstances might be different.

REFERENCES


