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# The Effect of COVID-19 on potential tourist's consumption behavior: Evidence from GCC countries

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### **Abstract**

Little information about the effect of COVID-19 on tourism exists. To fulfil the gap two theories are used, that is Fear Appeal and Means-end Chain Theories. The current study aims to get first-hand information regarding people's travel inclination, tourist attitudes and preferences, and hygiene and safety following COVID-19 pandemic, and to study the impacts of people's gender on the same dimensions. With a sample of 596 of Gulf Cooperation Council citizne with domestic and international travel experience via an online survey, the data were analysed using factor analyses, Cronbach's alpha, comparative means, standard deviation, and ANOVA tests. The findings revealed that the COVID-19 pandemic influences travel inclination, tourist attitudes and preferences, as well as hygiene and safety needs. Moreover, both genders have significant impacts on these findings. Finally, this paper provided some practical implications for reopening the tourism and hospitality business by the end of COVID-19 pandemic.

### 1. Introduction

The pervasion of coronavirus COVID-19 is sweeping life on our planet, as no medicine has been found yet, and medical capacity is limited compared to the number of people who contact the disease daily. Non-medical treatment, such as home isolation is the primary measure to curb the spread of the epidemic (Addo, Jiaming, Kulbo, & Liangqiang, 2020). Unexpected international travel limitations and procedures undertaken by governments due to the pandemic cause dramatic disruption of the world economy for the last six decades (Gössling, Scott, & Hall, 2020).

Most countries, including the Gulf Cooperation Council (GCC) countries, having Saudi Arabia, United Arab Emirates, Kuwait, Oman, Qatar and Bahrain, undertaken various procedures. These procedures include home isolation and treatment, quarantine for contacted people, social distancing, closing of education institutes, such as schools and universities and less important businesses, cancelling or delaying

events (i.e., sports seasons, and mega-events, such as the pilgrimage to Mecca in Saudi Arabia, Dubai Expo and Tokyo Olympic game), and bans of social activities over specific numbers (AlGassim et al., 2012).

Because of many countries did not stop their international inbound and outbound tourists, the number of cases increased dramatically (Abuelhassan et al., 2017; WIDJAJA et al., 2020). The number of affected people announced by WHO on Jan 4<sup>th</sup>, 2020, reached 84,233,579, while the number of deaths becomes 1,843,293, and the number of countries, areas or territories attacked by the pandemic is 222 including GCC countries (WHO, 2021).

As many countries in the world are applying rigorous regulations about traveling to control blowout of the virus, domestic and outbound tourism are going to a drastic halt. Therefore, it estimates that the travel and tourism industry's global revenue drop to (17%) in 2020, with more than 1 billion loss in international tourist arrivals, which may reach (58% to 78%) of the total arrivals (UNWTO, 2020). Further, the industry is expecting more than 1 billion U.S. dollars loss in the export revenues from the tourism industry, and more than 100 million direct tourism jobs are at risk. In the hotel industry, STR (2020) shows a massive decline in the global revenue per available room (RevPAR) on April 30th, 2020; for example, Europe decline was (-90.5%), the Middle East was better at (-74.4%), while North America was at (-80.6%). Besides, for the same period and the same regions, the occupancy rate in the hotel industry had also affected significantly; for instance, Europe was (10.1%), the Middle East was the best in the world with (30.4%), and North America with (23.1%) (STR, 2020). However, the long-term economic damage caused by the crises of COVID-19 pandemic cannot be assessed yet.

Within the GCC counties, the COVID-19 impacted all parts of the tourism and hospitality sector. Even though the GCC population represents only (20%) of the Middle East region's total population, the GCC countries are important source markets for outbound tourists from the Middle East region (UNWTO, 2018). These countries contribute over two-thirds of the outbound travel volume, and three-fourths of the total international travel spending from the same region. Saudi tourists alone spent more than 20 billion U.S Dollars in 2018 on outbound tourism. The UNWTO report indicated that the GCC's per-capita for international tourism expenditure was 6.5 times more than international average in 2017 (UNWTO, 2018).

Against the above background of a precipitously evolving global pandemic, nobody knows until the writing of this paper, when the restriction on the travel is will be lifted, and tourists will be allowed to travel. These processes by countries on international and domestic travel movement, as well as people panic of COVID-19, may affect tourists' attitude and preferences toward tourism services following the pandemic (AlGassim & Almotawa, 2021).

Grounded on two theories, that are Fear Appeal Theory and Means-end Chain Theory, this study aims to understand how GCC tourists' travel inclination domestically and internationally, as well as, their attitudes, behaviours, and their hygiene and safety preferences in tourism and hospitality industry following COVID-

19. To the best of our knowledge, no study has applied these two theories on the intention of outbound tourists' consumption behaviour, destination choice, and tourist attitudes and preferences, especially for the GCC tourists, following the coronavirus COVID-19 outbreak even before so.

Therefore, this paper has five theoretical and practical contributions, (1) reviewing the literature of the current and past epidemic/pandemics on the international tourism, (2) using fear appeal theory to understand how the GCC tourists' travel inclination domestically and internationally, (3) using means-end chain theory to understand tourists' attitudes, behaviours, and preferences, and their hygiene and safety preferences following the pandemic of the COVID-19, and (4) investigate the impact of gender on travel inclination, attitudes, behaviours, and preferences, and their hygiene and safety preferences following the pandemic of COVID-19. Finally, provide practical implications towards tourism and hospitality sectors.

### 2. The Literature Review

## 2.1. Coronavirus and other previous epidemic

The tourism and hospitality industry is an essential economic sector for many countries (Zana Majed, Beston, & Rebaz Khaleel, 2019), where many countries' revenue and survival depend on tourism (Abuelhassan & Elsayed, 2020; Hossain et al., 2020; Wang, 2017). Unfortunately, various natural diseases have influenced this industry. Given the global increase in population, pressures such as the human movement for tourism or work, as well as the significant technological revolution, natural crisis are now more various, intense, and geographically diverse than before (Gössling et al., 2020). Further, the growth of global transport systems and channel contributed in the expanse of disease causes, industrialized food production, increased consumption of food and beverage, are all grounds for the increase of diseases infection in the 21st century (Labonté, Mohindra, & Schrecker, 2011).

Several researchers have endeavored to define disaster to increase people knowledge and understanding of this phenomenon. For example, disasters as described by Faulkner (2001) is a situation where companies faced with unanticipated, unpredictable changes which they have no control of. Wang (2017) mentioned that a disaster is either natural or human-made, suddenly, or gradually, affecting other communities with acuteness and the influenced community reacts towards using exceptional measures.

Tourism industry has been influenced by a various of natural and human-made disasters and impact. In terms of natural disasters; for example, in 1999 in Taiwan, the earthquake disaster caused a (15%) decline in arriving tourists globally (Huang & Min, 2002); on September 21<sup>st</sup>, 1999, a huge earthquake occurred reaching 7.3 on Richter scale hit Chinese Taipei, Nantou county causing 2,455 losses, 8,000 people injured and 38,935 houses damaged (Wilks & Moo, 2004). That causes a 11.4 U.S billion dollars damages costs in the most touristic regions of Chinese Taipei. Furthermore, on December 26<sup>th</sup>, 2004, the tsunami, the most terrible natural disasters occurred in contemporary history, attached eight countries in South Asia, Southeast Asia, and East Africa. By this sudden catastrophe resulted in a significant damage to

the tourism industry of that region, reaching many miles away from coastline decimated, and as many as 250,000 deaths and losses billions of dollars (Qiu Zhang, 2005).

It has noted that the inclusive damage of natural disasters can affect both components, intangible and tangible of tourism businesse (Faulkner, 2001; Laws & Prideaux, 2005). Due to socio-economic effect of the tourism industry (Zana Majed et al., 2019), the consequences of crisis would be disastrous and might have long-term effects on the destination's economy (Alkathiri et al., 2019; Kim & Wong, 2006). Rosselló et al. (2020) accentuated that disasters cause unexpected effects that disturb the tourism system of the destination form the nature and limits of impacts. Most disasters have severe consequences on tourism activities and the country's whole system, such as the economy, individuals, organizations, and communities (Walters et al., 2019), either directly and indirectly at a destination country (Jin, Qu, & Bao, 2019).

Several studies provided empirical evidence of declines in destination tourist arrivals following some disasters (Huang & Min, 2002; Otoo & Kim, 2018). Accordingly, tourists won't expend their money to go to a destination, where they risk their safety (Chen & Gursoy, 2001). Hem, Iversen, and Nysveen (2003) contended that some traveller target markets are risk-prospectors and thus respond more positively to the risky trip, while other segments are risk hatred and whereby respond negatively to the event. This is clearly shown through the theory of fear appeal, which indicates that when fear is aroused, the recipient will become motivated to alleviate the negative impact or influence (Brennan & Binney, 2010). Fear motivates actions, aimed at reducing the unpleasant emotions, or undesirable effects. One of the actions that fear motivates, is knowledge or information that is collected of the phenomenon, or situation, or crisis, that causes the fear, or unpleasant feeling (Witte, 1992). For example, in a study conducted by Otoo and Kim (2018) on Hong Kong inbound tourism from 2003 to 2015, shows a significant decline in overall tourists' arrivals during several crisis events. Due to this background, it is possible to assume that the health crisis forms vital aspects that reform the goals of inbound tourism.

The world is confronting unusual global health, social, and economic crisis due to (COVID-19) pandemic. The tourism industry is one of the most threatened industries in the world right now, where COVID-19 pandemic outbreak has reduced the inbound and outbound tourist arrivals in the first quarter of 2020 compared to previous years. Available data by STR (2020) shows a decrease of (22%) in the first three months of 2020, with arrivals in March dropped by (57%). Asia and the Pacific received highest reduction with (35%) within same period of 2020, follows With Europe in decline (19%), and then Americas (-15%), Africa (-12%), and the Middle East (-11%). This reduction made a loss of 67 million international arrivals and nearly 80 billion U.S dollars in export revenues from international tourism.

A prominent question rising from this literature is to what extent the pandemic of COVID-19 would impact the tourists' arrivals in the next few years, primarily since no vaccine has produced yet, and a group of health and economic agencies and

institutions have warned about resumption of the risk even though some countries may open their international airport for outbound.

### 2.2.Risk and tourist consumption behavior:

Tourists' behaviour is a subject of extensive academic and practical scrutiny, and research has drawn on models, concepts, and theories from various disciplines. The central issues of the existing research have focused mainly on explaining tourists' behaviour in many different contexts, 'travel or tourist behaviour' (Cohen et al., 2014); destination choice (Klenosky, 2002); travel mode choice (Divisekera, 2010); and purchase of international travel holidays (Money & Crotts, 2003). Cohen et al. (2014) believe that consumer behaviour affects individual decisions, activities, or experiences that meet consumer's needs and wants (Song, van der Veen, Li, & Chen, 2012). Addo et al., (2020) & Rosselló et al., (2020) claimed that pandemics and natural crisis are significantly influencing the tourist's choice of destination, and his/her consumption behaviour in the chosen destination, because of fear of infection. Nevertheless, very little research investigates the tourist's consumption behaviour aspects following disease or pandemic outbreak, more precisely, how tourists choose among various goods and services they consume/purchase at the destinations they visit following pandemic.

In the scope of tourist's consumption behaviour, there is an established tradition of exploring the matter of risk as it is a far much important factor in forming tourist behaviours (Review; (Conchar, Zinkhan, Peters, & Olavarrieta, 2004)). Yang and Nair (2014) study of risk in tourism destinations, affirmed that risk perception is multidimensional concepts concerning aspects such as uncertainty avoidance, worry, anxiety, or fear (Addo et al., 2020). Uncertainty avoidance defines as the extent to which a person feels frightened or annoyed by obscure, unknown, or uncertain situations (Hofstede, 1980). Therefore, a person with high uncertainty avoidance avoids situations where the results are unanticipated.

Bauer 1960 as cited in Wang (2017) was the first who started talking about the concept of perceived risk and claimed that 'consumer behaviour involves risk in the sense that any action of a consumer will produce consequences which he cannot anticipate with anything approaching certainty, and some of which at least are likely to be unpleasant' (p. 390). Further, the tourists' purchase and selection behaviour can lead to unanticipated outcomes and could result in negative ends due to uncertainty (Assael., 1995). These thoughts are clearly shown in the theory of the means-end chain, which involves people's cognitive structures of purchasing behaviour. This theory, according to Gutman (1982), emerges from the relations between product attributes, consumption consequences, and the values of the tourist. Attributes are aspects of products or services. These attributes can be physical, such as tourist's activities or destination, or abstract, such as quality. While consequences either practical or psychosocial accrues to people from consuming products or services. Practical consequences accrue from consuming the product or service, while psychological consequences reflect the personal and social results of product or service used, 'the value'. Rokeach (1973) defined values as "an enduring belief that a specific mode of conduct or end-state of existence is personally or socially preferable

to an opposite or converse mode of conduct.' Kahle (1983) suggested nine values relevant to consumer behavior; the most relevant to the current study are excitement, fun and enjoyment, and security.

Since Bauer's statement, several studies have tried to define the concept of perceived risk. Gartner (1989) declared that perceived risk refers to foreseen loss as an outcome of selection, while (Assael., 1995) defined perceived risk as a predicament between the propensity to purchase product or service, and uncertainty associated with loss from the purchase. Although researchers describe the concept of perceived risk in somewhat different ways, they all consider it to involve the expectation of loss occurring from an uncertain choice.

Therefore, extent of risk affiliated with an infected destination can significantly change the perceived benefits or values derived from an intended travel experience. According to Gartner (1989) and Chew and Jahari (2014), there is an agreement that perceived risk and perceived safety help travellers to make a lasting destination image, which later becomes essential in the destination choice process. Seabra, Abrantes, and Kastenholz (2014) expose that nearly half of tourists will travel regardless of any possible risk. A recent study by Hajibaba, Gretzel, Leisch, and Dolnicar (2015) proposes that some tourists are more crisis-resilient than others and are unlikely to be prevented from travelling by dangerous circumstances. Wolff and Larsen (2014) confirm this thought as they believe that the crisis may have an insignificant impact on the decision to travel.

## 3. Methodology

### 3.1.Research Aim

At the COVID-19 pandemic outbreak time, this study was conducted grounded on two theories, that are Fear Appeal and Mean-end Chain theory, aims to get first-hand information regarding people's travel inclination, touristic attitudes and preferences, and hygiene and safety after COVID-19 pandemic. Also, the study aims to reveal the impacts of people's gender on travel inclination, touristic attitudes and preferences, and hygiene and safety. The findings of this study will enrich the tourism and hospitality literature and provide implications to help the tourism and hospitality industries in developing crisis management strategies. Drawing from the literature of customer behaviour and epidemics, this study develops the following hypotheses:

**H1:** COVID-19 has impacted on people's domestic travel inclination.

**H2:** COVID-19 has impacted on people's international travel inclination.

**H3:** COVID-19 has impacted on attitude and preference of tourist.

**H4:** COVID-19 has impacted on people's needs for hygiene in the tourism and hospitality sectors.

**H5:** COVID-19 has varied impacts on people's travel inclination, tourist attitude and preference, and needs for hygiene and safety in terms of the gender of people.

### 3.2.Design of the questionnaire:

Initially, the authors adopted (Wen, Huimin, & Kavanaugh, 2005) questionnaire items (28 items) that was used during SARS pandemic. Some modification occurred to their questionnaire to fit with COVID-19 characteristics. To do so, some phone, and online interviews were conducted with the tourism and hospitality experts and scholars. The 28 questionnaire items of Wen et al., were adjusted through modifying, deleting, and increasing items according to the result of the interviews. The present study adopted 30 items, which categorized in 4 dimensions, namely, Domestic Travel Inclination (5 items), International Travel Inclination (5 items), Attitude and Preference of Tourist (8 items), and Hygiene and Safety (12 items). Except for demographic items, all the survey items were measured by using a 5-point rating scale ranging from strongly agree (5) to strongly disagree (1).

### 3.3.Data collection and analyses:

The target population is the GCC nations who have domestic and international travel experiences to measure the impact of the COVID-19 on the study dimensions, as these people are well known for their love for tourism, and high finance capability to travel for tourism (UNWTO, 2018). The survey conducted on the first weekend (from 8 to 18 of May 2020) during the COVID-19 outbreak. Due to the critical situation of quarantines we live in, the survey distributed by using some travel agents' social media (online survey) located in the GCC countries. The authors received 596 valid questionnaires from the GCC people having domestic and global travel experiences. For data analyses, factor analysis, Cronbach's alpha, mean comparison, standard deviation, ANOVA, and t-test used.

### 4. Results and Discussion

To ensure the construct validity, factor analysis with varimax rotation performed to identify the loading factor of the four hypothetic dimensions' items. The findings of factor analysis present that the entire items loaded on their dimensions without overlapping; these results evidence and confirm that the four dimensions extract and generalize item data and are highly explorative and valid. Moreover, the Cronbach's alpha values for the four dimensions are ranging from 0.74 to 0.094, confirming the reliability, see (Table 1).

#### 4.1. The COVID-19 disease outbreak has an impact on domestic travel inclination The findings in Table 1 reveal that the dimension of domestic travel inclination with moderate means (3.13; relatively higher than the average), the GCC people have an uncertain inclination to travel domestically following the coronavirus pandemic. Also, the findings highlight that Item 3 'the intention to travel domestically for tourism and leisure in the first 12 months' has the highest means (3.29) followed by Item 2 'travel to domestic destinations for tourism and leisure purposes' with means (3.26). This finding is inconsistent with Wen et al. (2005), where Chines people showed much less concern regarding domestic tourism. Meanwhile, Item 5 'travel to a domestic destination for commercial and business purposes' has the lowest means in the entire items. This finding is also contradictory with Chines travel who cancelled all their business travel during **SARS** pandemic (Wen et al., 2005)

**Table 1**Factor Analyses and Mean Comparisons

							Gender		
Items of Hypothetic Dimensions	Factor Analyses			M S.D		M	F	Sig	
	1 2 3 4		4			n= 418 n= 178			
1. Domestic Travel Inclination (α = .74)					3.13	.837	3.14	3.12	.73
1. I will travel to domestic destinations for tourism and leisure purposes	.66				3.08	1.18	3.08	3.07	.96
2. I have a great intention to travel inside my country for tourism and leisure in the first 12 months	.77				3.26	1.21	3.27	3.24	.75
3. I have a great intention to travel abroad for tourism and leisure after 12 months	.75				3.29	1.26	3.31	3.25	.53
4. I will travel to domestic destinations for commercial and business purposes (e.g. conference, meeting and purchasing stuff)	.66				3.15	1.20	3.17	3.11	.61
5. I will travel to domestic destinations for tourism and leisure purposes	.57				2.90	1.16	2.89	2.93	.72
2. International Travel Inclination ( $\alpha = .79$ )					3.23	.97	3.33	3.02	.00
6. I believe traveling abroad will be safe		.70			2.97	1.27	3.07	2.74	.00
7. I have a great intention to travel abroad in the first 12 months		.79			3.33	1.48	3.50	2.92	.00
8. I will travel abroad for tourism and leisure purposes		.84			3.62	1.36	3.77	3.28	.00
9. When I travel abroad, I will do shopping and buy gifts, souvenirs, and other luxury stuff		.68			3.07	1.28	3.07	3.08	.87
10. In general, my interest in participating globally in outdoor activities has increased		.55			3.18	1.15	3.22	3.10	.24
3. Attitude and Preference of Tourist ( $\alpha = .82$ )					3.47	.79	3.40	3.63	.00
11. When I travel, I will avoid traveling to crowded big cities			.66		3.36	1.25	3.25	3.62	.00
12. When I travel, I will reduce the length of travel			.71		2.97	1.23	2.90	3.14	.03
13. In general, I prefer visiting areas within a short distance for leisure travel			.63		3.18	1.10	3.11	3.33	.03
14. While travelling, I prefer having my meals takeaway or delivery			.62		3.35	1.18	3.33	3.39	.61
15. In general, I will reduce the possibility of joining tour groups			.57		3.66	1.24	3.63	3.75	.25
16. In general, I prefer traveling with family members and relatives.			.52		3.72	1.17	3.62	3.97	.00

17. I prefer having my meals separate while travelling with a tour	.6	0	3.65	1.19	3.57	3.86	.00
group							
18. I will avoid travelling to tourist destinations that were greatly	.6	1	3.87	1.18	3.82	4.01	.08
affected by the coronavirus							
4. Hygiene and Safety (α = .94)			4.44	.61	4.39	4.57	.00
19. I will care more about social distance		.55	4.07	.94	4.05	4.13	.35
20. In choosing tourist destinations, I will choose safe countries that		.61	3.32	.87	4.25	4.49	.00
are implementing the best protective practices against the							
coronavirus outbreak							
21. When I travel, I prefer having my meals from restaurants that		.65	4.36	.89	4.30	4.51	.00
implement protective practices against coronavirus professionally							
22. When I travel, I prefer to stay in hotels that implementing		.74	4.40	.90	4.35	4.53	.02
protective practices against the Coronavirus outbreak professionally							
23. I prefer to stay in high-quality hotels		.70	4.31	.91	4.25	4.47	.01
24. I will care more about the hygiene and safety of the touristic sites		.85	4.60	.66	4.56	4.71	.01
25. I will care more about visiting touristic and entertainment that		.81	4.44	.83	4.37	4.59	.00
implement proactive practices of hygiene and safety							
26. I will care more about the hygiene and safety of the means of		.88	4.58	.67	4.52	4.71	.00
transportation							
27. I will care more about the hygiene and safety offered to the		.75	4.41	.81	4.33	4.59	.00
members in the tour group							
28. I will care more about the hygiene and safety of the hotels that I		.88	4.63	.66	4.57	4.76	.00
stay in							
29. I will care more about the hygiene and safety of the daily		.86	4.56	.68	4.51	4.69	.00
necessities while travelling							
30. I will care more about the hygiene and safety of the restaurants		.84	4.61	.62	4.57	4.72	.00

These findings indicate that the intentions of the GCC people to travel for tourism and leisure purposes are little higher than their intention to travel for business tourism purposes and buy their needs (Item 1, mean = 3.08). This finding is consistent with the perception theory of fear appeal, where tourists may avoid uncertain destination or destination affected by the disease.

# 4.2.The COVID-19 disease outbreak has an impact on international travel inclination

Table 1 reveals that the dimension of international travel inclination has a higher mean (3.23) than the domestic dimension (mean = 3.13); thus, the GCC people have a relatively higher intention to travel internationally than domestically. However, people have almost a moderate belief that travelling abroad will be safe (Item 6, mean = 2.97), and they have a relatively strong intention to travel abroad for tourism and leisure purposes, as it observed that Item 8 has the highest mean (3.62) among the items of the domestic and international travel inclination dimension. This finding is inconsistent with American (Cahyanto, Wiblishauser, Pennington-Gray, & Schroeder, 2016), and Chines tourist (Wen et al., 2005), who found that there is a decrease in travel, which may be caused by a combination of internal motivations (being afraid to travel) and travel bans. In sum, travel for tourism and leisure is the most important reason to encourage the GCC people to travel and especially on the international level. The severe governments' actions against the COVID-19 outbreak led people to stay home for several months; therefore, it made people living in a terrible psychological situation; accordingly, people need leisure and entertainment.

# 4.3.The COVID-19 disease outbreak has an impact on the attitudes and preferences of tourist

Table 1 detects that the COVID-19 disease outbreak has a great influence on attitude and preference of tourists (mean = 3.47; relatively high) among the Gulf people, especially four items. These four items having means exceeded 3.65, including Item 18 'avoid travelling to tourist destinations that were greatly affected by coronavirus' having a mean (3.87), this is incompatible with Chines people who score slightly lower (Wen et al., 2005). Item 16 'prefer travelling with family members and relatives' having mean (3.72), this finding congenial with American (Cahyanto et al., 2016), and Chines tourist (Wen et al., 2005). Item 15 'reduce the possibility of joining tour groups' with a mean (3.66), and Items 17 'prefer having my meals separate while travelling with a tour group' with a mean (3.65), also, these people tend to avoid travelling to crowded big cities (Item 11, mean = 3.36) and have their meals takeaway or delivery (Item 14, mean = 3.35). On the other hand, the lowest mean (2.97) is for Item 12, 'reduce the length of travel' followed by Item 10 (mean = 3.18). According to Cowling et al. (2010), some studies have found that anxiety correlated with a disease may lead some people to report lower use of preventive measures. These findings are consistent with the theory of means-end chain, that assert the relationship between product attributes, such as 'destination', consumption consequences or benefits produced by the product, and personal values.

## 4.4. The COVID-19 disease outbreak has an impact on hygiene and safety

Given the COVID-19 outbreak is resulting from poor hygiene and safety, as well as it made the world stop or postpone its most activities and created far much fear among people. Consequently, it forces people to pay more intention to hygiene and safety that is confirmed by the findings of Table 1,in which the dimension of hygiene and safety has achieved the highest mean (4.44; very strong) and the lowest standard deviation (.614). Except for Item 20, this virus outbreak pushes people to give severe concerns to all dimension's items (all means exceeded 4.07) and especially for the hygiene and safety of hotel (Item 28; means = 4.63), restaurants (Item 30; means = 4.61), touristic sites (Item 24; means = 4.60), transportation means (Item 26; means = 4.58), daily necessities (Item 24; means = 4.56) respectively.

Importantly finding in Item 20, 'choosing the safe countries that implementing the best protective practices against the Coronavirus outbreak' has the lowest mean (3.32). These results also reveal that the GCC people focus more on the places that they will visit, eat and stay in, and they do not pay attention to the whole country at the same concern level with lodging, leisure, and touristic areas. Based on the theory of fear appeal, these findings show that GCC people are significantly affected by COVID-19 on their consumption, attitude and preferences.

# 4.5. The impacts of gender on travel inclination, tourist attitude and preference, and hygiene and safety

The survey also was conducted discover the impact of gender on the GCC people's intention regarding domestic and international travel, touristic attitudes and preferences, and needs of hygiene and safety in the tourism and hospitality sectors following the COVID-19 crisis. We considered the gender as independent variables and the four dimensions as dependent variables, the analyzing used t-test and one-way ANOVA for the gender, respectively.

In terms of gender, the findings of Table 1 depict that there are no significant differences in the entire domestic travel inclination's dimension average between males and females (p = 0.73). Moreover, the findings also do not reveal any differences (all p values > 0.05) between males and females in the whole items' means (all p values > 0.05).

Table 1 reveals the impact of gender on international travel inclination among the GCC people following the COVID-19 crisis. Regarding the general effect of gender, the findings present that in the dimension average there are significant differences (p = .00 < 0.05) between males and females, the findings highlight that the males (mean = 3.33) generally have a greater desire to travel globally than the females (mean = 3.02). Mainly, the two gender groups are significantly different in three items; first, in Item 6, male tourists believe that travelling abroad will be safe with (mean = 3.07), more than females with (mean = 2.74). Second, in Item 7, the males have greater intention with (mean = 3.50), more than the females to travel abroad in the first 12 months with (mean = 2.92). Third, in Item 8, they have a higher intention to travel abroad for tourism and leisure purposes with (mean = 3.77), than the female tourists with (mean = 3.28). On the other hand, the two genders do not have significant

differences regarding Item 9 and Item 10. Based on the fear appeal theory, and the finding of the current study, it seems that fear appeal with female is higher than male. Knowing the differences among men and women in a travel health risk setting might provide valuable information for destination management organizations and authorities of the travel industry (Cahyanto et al., 2016).

Following the COVID-19 crisis, the attitude and preference of the GCC tourists will be affected by the gender according to the findings in Table 1. For the influence of gender, there are great differences between the two genders in the attitude and preference dimension (p = 0.00 < 0.05). Particularly, 5 out of 8 items of this dimension have significant differences between the two genders (p values < 0.05).

The findings reveal that female tourists have greater intentions to avoid travelling to crowded big cities (Item 11, mean = 3.62), reduce the length of travel (Item 12, mean = 3.14), visit areas within a short distance for leisure travel (Item 13, mean = 3.33) travel with family members and relatives (Item 16, mean = 3.62), and have meals separate while travelling with a tour group (Item 17, mean = 3.57) more than males (means = 3.25, 2.90, 3.11, 3.62 respectively). In the other three items, 14, 15, and 18, there are no significant differences between the two genders.

The findings in Table 1 reveal that gender has substantially different effects on hygiene and safety dimension's items among the GCC people. In terms of gender, except Item 19 (social distance), the two genders are significantly different in the entire items. The females have higher means' values in the whole items than the males. Except for Item 19, all the mean values of females exceed 4.49, indicating that hygiene and safety dimension's items are most important for the females to feel safe and protected from the COVID-19 in tourist destinations, while for males' mean values ranging from 4.25 (strong) to 4.57 (very strong). However, the whole dimension items are ringing from important to very important for males; the female tourists care more than them regarding hygiene and safety.

## 5. Practical Implications

Research on COVID-19 tourism impacts is an important opportunity to create a transformative tourism opportunity from this pandemic (Mair, 2020). Not only such research is to rich the tourism literature through the impacts of COVID-19 pandemic, but also to help to reform or lead such crises-enabled transformations (Sigala, 2020). Drawn on the current findings, the study provides some implications for practice to reopen the tourism and hospitality industry after the COVID-19. The tourism and hospitality managers, planners, and marketers should consider in their plans that the GCC people have a desire for domestic and international travel for tourism and leisure purposes more than any other travel purposes, but they will avoid travelling to tourist destinations that were affected by the COVID-19, as well as avoiding activities that are not safe. Thus, destinations that are not affected with COVID-19 should launch advertisements and promotions campaigns in GCC countries.

Also, the findings highlight that tourists' attitudes and preferences are changed due to the COVID-19; thus, the findings advise the tourism and hospitality managers and marketers to prompt family or friends tourist tour packages replacing tours in

crowded big cities by outdoor activities or ecotourism activities; as well as, provide separate meals during the tour groups and to focus on takeaway or delivery services.

The GCC people announced that they greatly care about implementing protective practices against the COVID-19 in the entire tourist sectors such as hotels, restaurants, touristic sites, tourist entertainment and activities, and transportation means. Moreover, they care more about social distance, the hygiene and safety offered to the members in the tour group, and the daily necessities while travelling. Therefore, the operators of these sectors should follow and adopt the highest hygiene and safety practices accredited by global and domestic health organizations. For example, tourists must have a negative-COVID-19-certificate before travelling to the tourist destination, performing the COVID-19 test for arrivals at the airports as a first step check-in in the arriving procedures, checking tourist temperature at the entrance of any tourism and hospitality business, implementing of social distancing, wearing facemasks for tourists and staff, providing cleaning and sanitizing tools at bathrooms and public areas.

### 6. Limitation and Future Research

Even though this study has several contributions, it also has some limitations. The first limitation of this research is that the data collected during the COVID-19 outbreak, at a time, fear and anxiety of the infection is too high among people; thus, this feeling may affect responses. Therefore, it is suggested for future research to repeat this empirical research following the pandemic in a different context. Second, this study was conducted in the GCC countries; thus, for future research; the researchers should investigate other geographic areas. Third this study was limited by its four constructs; future research should investigate the potential tourists' acceptance for the price increase of products and services for increasing their hygiene and safety in the tourism and hospitality sectors. Finally, the GCC people having domestic and global travel experiences were the targeted population; in future research, researchers should target people having travel experience and non-travel experience.

### 7. Acknowledgement

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# تأثير فيروس كورونا (كوفيد -19) على السلوك الاستهلاكي المحتمل للسائح: شواهد من دول مجلس التعاون الخليجي

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#### اللغص

## مملومات المقالة

# الكلمات المنتاحية

فيروس كورونا (كوفيد - 19)؛ استهلاك؛ السلوك السياحي؛ المواقف والتفضيلات؛ صناعات السياحة والضيافة.

توجد معلومات قليلة حول تأثير فيروس كورونا المستجد 19 (COVID-19) على السياحة. لسد هذه الفجوة يتم استخدام نظريتين، وهما نداء الخوف ونظريات السلسلة ذات النهاية. ومن خلال ذلك تهدف الدراسة الحالية إلى الحصول على معلومات مباشرة فيما يتعلق بدراسة الميل الى السفر، والمواقف والتفضيلات السياحية، والنظافة والسلامة بعد جائحة كورونا المستجد 19، وكذلك تحليل أثر النوع (ذكور وإناث) على نفس الأبعاد. مع عينة من 596 من مواطني دول مجلس التعاون الخليجي ممن لديهم خبرة سفر محلية ودولية حيث تم إجراء الاستطلاع عبر الإنترنت، تم تحليل البيانات باستخدام تحليلات العوامل، وألفا كرونباخ، والوسائل المقارنة، والانحراف المعياري، واختبارات أنوفا (ANOVA) لتحقيق صحة الدراسة والهدف. كشفت النتائج عن تأثير جائحة كورونا المستجد 19 (COVID-19) على الميل للسفر، وقد والمواقف وانتفضيلات السياحية للسياح، واحتياجات النظافة والسلامة أثناء السفر، وقد أوضحت النتائج أن اختلاف النوع (ذكور وإناث) له تأثيرات كبيرة على هذه النتائج. أخيرًا، قدمت هذه الدراسة بعض التوصيات العملية التي قد تساعد على إعادة فتح

أعمال السياحة والضيافة بنهاية جائحة كورونا المستجد 19.

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