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RESIDENT'S WILLINGNESS TO TRAVEL AMIDST INCREASED POST-CRISIS INBOUND CHINESE TOURISM: A COUNTRY-OF-ORIGIN EFFECT PERSPECTIVE

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ABSTRACT

There is a scant academic inquiry into the influence of crisis and post-crisis events on residents' perceptions, their attitude towards international inbound tourists, and how their subsequent domestic travel behaviour is nuanced by the re-introduction of international tourists post-a-crisis. A conceptual model was developed to explore the influence of China's post-zero-COVID-19 policy country image on host country resident behaviour. Based on an n=499 South African residents' sample, the cross-sectional deductive study utilised partial least squares structural equation modelling to explore the proposed hypotheses. Contrary to the extant literature, China's post-pandemic and policy country-of-origin effect positively influenced South African residents' willingness to engage in domestic tourism despite the potential influx of inbound Chinese tourists. However, there is intriguing heterogeneity in the nuances of the country-of-origin effect, stereotypes, risk perception and interventions on resident perception, and conation. The study confirms the underlying mechanisms in resident post-crisis domestic travel behaviour and contributes to the burgeoning body of knowledge.

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INTRODUCTION

> *"The philosophy of Ubuntu is centred on people and their wellbeing, offering people an understanding of themselves in relation to other people and the world at large…"* (Francis, 2010, p. 30)

The hyper-transmissibility of the COVID-19 virus through social contact implied that travel and tourism became vectors for the transmission of the

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virus (Chung et al., 2021; Iaquinto, 2020). Therefore, as a stop-gap measure for the lack of a known vaccine or cure at the time, wide-ranging and far-reaching moratoriums on non-essential social contact, such as travel and tourism, were initiated to stem the spread of COVID-19 globally (Ang & Mansouri, 2023; Hamid & Bano, 2022). Such measures included China's stringent 'zero-COVID' policy, which in 2020 contributed to losses of up to US$22 billion in tourism spending attributable to a corresponding decline in Chinese outbound tourism demand (Wen et al., 2021). Despite implementing one of the world's most isolationist interventions (Mallapaty, 2022), the pandemic resulted in China going through a significant international image crisis, characterised by the global proliferation of anti-Asian sentiment as the origins of COVID-19 were linked to China and its people (Floribert, 2022). The resultant phobic attitudes towards primarily Chinese and other peoples of Asian descent transcended from the height of the pandemic to the post-crisis era (Matiza, 2023). In December 2022, however, despite still reporting some of the world's highest post-crisis infection rates, China became the last country to lift its primary lockdown policy (Mallapaty, 2022), sparking a global debate around the reintegration of Chinese tourists into the global international tourism market (Ang & Mansouri, 2023; Matiza, 2023).

According to Statistics South Africa (2020), pre-pandemic China was ranked as South Africa's 8th largest overseas tourist source market, peaking at just over 93,000 Chinese tourists visiting South Africa in 2019. Due to the pandemic, this declined to zero as the international tourism sector ground to a halt and did not rebound when other source markets opened post-pandemic, seeing only 12,187 Chinese tourists (-87% on 2019 arrivals) visiting South Africa in 2022 (Statistics South Africa, 2022). The rescinding of the zero-COVID policy in December 2022 corresponded with an upsurge in outbound Chinese tourism - signalling a welcome boon for the recovery of the global tourism industry, including South Africa, which recorded a 136.8% increase in inbound tourism from China between January 2023 and January 2024 (Statistics South Africa, 2024). The recension also ignited an intense global debate around receiving inbound tourists from the country amid growing COVID-19-induced anti-Asian sentiment (Antwi et al., 2022; Armutlu et al., 2021; Lantz & Wenger, 2023; Li, 2020).

Global phobic anti-Asian sentiment is symptomatic of China's severely compromised country image (CI) as the country's association with the pandemic stems from China being widely considered to be the epicentre of the COVID-19 pandemic (Antwi et al., 2022; Floribert, 2022; Zha et al., 2022). To this end, Shen et al. (2022) opine that due to the pandemic and

heterogeneity in the effects and reactions of countries to the pandemic, CIs have become more prominent as heuristic cues in tourist's crisis-induced decision-making than the conventional tourism destination image. Thus, as Chinese tourists flocked to international destinations post-the-pandemic, the CI of China became a critical antecedent to the critical moral and behavioural questions that arose about the behaviour of residents towards Chinese tourists both as hosts (Armutlu et al., 2021; Lantz & Wenger, 2023; Matiza, 2023), and now, within the scope of the present study, as domestic tourists potentially interacting with inbound Chinese tourists, respectively.

Domestic tourist demand and supply have traditionally been independent of external shocks and events (Nguyen & Su, 2020); however, the far-reaching impact of the pandemic and its residual effects on domestic tourism are indicative of the increased 'glocalization' of contemporary tourism crises (Cheer et al., 2021). One of the pandemic's positive effects was an upsurge in domestic tourism as a crisis-induced alternative to international travel and tourism (Nyikana & Bama, 2023). Bearing in mind that South Africa was under varying levels of a lockdown regime between March 2020 and June 2022, domestic tourism statistics indicate exponential post-crisis growth in domestic tourism. Between 2021 and 2022, South African domestic day and overnight trips increased by 29.4 million (over 100%) to 56.3 million (Statistics South Africa, 2023).

Considering the pervasiveness of contemporary crises and their subsequent impact on domestic tourism, the discernible lack of academic inquiry into the behavioural aspects of domestic tourism during and post-crisis has become more apparent. More so there is a significant lack of research into resident travel behaviour amid inbound tourism after a significant crisis event such as COVID-19 (Matiza, 2023; Moghavvemi et al., 2023); thus, providing impetus for the present paper. The present study investigates the influence of China's CI on South African residents' willingness to engage in domestic tourism, considering renewed inbound Chinese tourism. This relationship is further explored in the context of the potential intervening effects of perceived risk, negative and positive stereotypes, and the potential moderating effect of pharmaceutical and non-pharmaceutical interventions in residents' domestic tourism decision-making.

Tourism research has been critiqued for being reductionist - focusing on the simplicity of structures and establishing equilibrium and linear relationships, often at the expense of interrogating key events that trigger major paradigm shifts in tourist behaviour (Russell & Faulkner, 1999).

Furthermore, due to the ad hoc nature of major health crises and natural disasters, crisis-oriented research in tourism has, to date, predominantly focused on economic and financial crises (Hall, 2010; Wen et al., 2021). However, the advent of the COVID-19 pandemic has buoyed contemporary studies (Cheer et al., 2021; Moghavvemi et al., 2023; Nie et al., 2022; Rasoolimanesh et al., 2021; Senbeto, 2022; Zheng et al., 2021), calling for a more concerted research effort to further explore tourist behaviour during and post-crisis. Significantly, while the current surge in behavioural research can be commended for challenging and adapting established notions and models to explain crisis-induced paradigm shifts in contemporary tourist behaviour, this has almost exclusively been from predominantly Western epistemologies focusing on demand and extrinsic constraints in international tourism. This has translated into academic inquiry generally neglecting the perspective of the Global South, as well as limited acknowledgement of how resident perception, perceived risk, stereotypes, and interventions associated with crisis influence their post-crisis behaviour towards inbound tourists and, more pertinently, domestic tourism activity (Kock et al., 2020; Moghavvemi et al., 2023; Senbeto et al., 2024). The study thus makes three primary contributions.

First, to the best of the author's knowledge, this study is one of the first to model the influence of resident perceptions towards inbound Chinese tourists [based on China's CI post-the-'zero-COVID-19' policy] on their willingness to engage in domestic tourism while adjusting for the potential intervening effect of residents' risk perception and their generic positive and negative stereotypes, as well as the potential moderating effect of crisis interventions. This represents a new discourse that addresses an interesting theoretical gap in modelling post-crisis tourist behaviour as alluded to by Cheer et al. (2021) and Rasoolimanesh et al. (2021). Second, the study addresses the empirical knowledge gap in research on the behaviour of residents as nuanced by the re-introduction of international tourists post-a-crisis (see Matiza, 2023; Zha et al., 2022). Third, the study collects data from a specific population (South African residents as domestic tourists) to gain critical insights into the under-researched emerging market tourism consumer segment, and how inbound tourism from a specific country influences their consumptive behaviour. Hence, a discernible population gap, as identified by Senbeto et al. (2024) regarding insights into the global South's domestic tourists' crisis-induced behavioural dynamics, is addressed. The study results suggest that a more holistic and nuanced approach is needed to understand the complex dynamics of resident behaviour, particularly in the context of crisis events.

Theoretically, the study is significant to the growing body of knowledge around modelling the potential impact of inbound tourists' crisis-induced CI on domestic tourist's post-crisis behaviour towards them. From a practical perspective, tourism practitioners and policymakers involved in bilateral tourism promotion between China and South Africa, as well as domestic tourism promotion agencies, benefit from critical insights into the consumptive behaviour of residents as domestic tourists considering increased post-crisis inbound tourism from China.

The following section is an overview of the literature and the development of hypotheses. The next section outlines the methodology and then moves on to the results section. The paper concludes with a discussion section, including the discussion, conclusion, theoretical and management implications, and limitations and future research areas.

LITERATURE REVIEW

Theoretical Framework

From a Post-Traumatic Growth perspective, Miao et al. (2022), consider crisis-induced behaviour to be post-traumatic and experiential. This implies that the COVID-19 pandemic may be viewed as a catalyst for behaviour shifts that may transcend the crisis and manifest tourist's post-pandemic behaviour in a new restructured 'normal' for tourists (Tedeschi & Calhoun, 2004). In their conceptual framework for post-pandemic post-traumatic tourist behaviour, Miao et al. (2022) advance the notion that, contrary to post-traumatic growth theory, maladaptive behaviour may occur because of traumatic experiences. From a restructured assumptions standpoint these may include: (1) the residual cognitive and affective effects of travel moratoriums and social distancing, which may ferment negative CI connotations for specific countries (Floribert, 2022; Zha et al., 2022); (2) deglobalisation and regionalism, which may be symptomatic of phobic behaviour towards and associated with heightened perceived risk and stereotypes towards certain groups of people (Matiza, 2023); and (3) self-diminishment via stress and life-changing negative experiences that may result in disinterest or reduced enjoyment in travel and tourism in a post-crisis scenario (Williamson et al., 2021). Therefore, the present study considers that the residual effects of China's prolonged 'zero-COVID' isolationist policy may have exacerbated China's negative post-pandemic CI and manifested into a phobia that heightens risk perceptions and stereotypes. Given the increased likelihood of social contact, the subsequent estrangement associated with inbound Chinese tourists may influence

South African residents' unwillingness to engage in domestic travel and tourism.

Country Image and the Country-of-origin Effect

Characterised as the "total of all descriptive, inferential, and informational beliefs one has about a particular country" (Martin & Eroglu, 1993, p. 193), CI is a cognitive and affective construct that is an aggregate of the heuristic cues that influence perceptions towards a country (Buhmann, 2016). Rooted in international marketing theory (Chaulagain et al., 2019; Elliot et al., 2011; Micevski et al., 2021), the effect of CI on consumptive decision-making is well established; however, the influence of CI on tourist behaviour is still the subject of emerging tourism research and is yet to be fully examined in the crisis and post-crisis context (Chaulagain et al., 2019; Shen et al., 2022). When consumers' beliefs about a particular country influence their consumptive decision-making towards products and services originating from the country, this is referred to as the Country-of-Origin (COO) effect (Buhmann, 2016). Grounded in Han's (1989) notion of summary effect, the COO effect is the subsequent often subjective 'halo' effect that the CI as a summative heuristic cue has on the perceptions and behaviour of consumers (Elliot et al., 2011; Micevski et al., 2021; Shen et al., 2022). For instance, in the respective cases of the Ebola, Severe Acute Respiratory Syndrome (SARS) and Middle East Respiratory Syndrome (MERS) disease outbreaks, anti-African and anti-Asian sentiments affected how tourists of African and Asian descent were subjected to phobic treatment by residents and other tourists (Hall et al., 2020; Kock et al., 2020). In the case of China, recent studies (Chen et al., 2020; Mallapaty, 2022; Matiza, 2023) have found that the pandemic-induced COO effect of China's CI invariably influenced how Chinese people were perceived and how individuals behaved towards them.

Within the contemporary CI literature, Buhmann and Ingenhoff's (2015) 4D Model has gained traction as a multidimensional explanatory framework for the effect of CI on consumer behaviour (Dubinsky, 2023). The 4D model comprises functional (competencies, political, and economic performance), aesthetic (appeals such as culture, scenery, and beauty), and normative (subjective norms and values) aspects as cognitive dimensions of CI that influence consumers' beliefs (Buhmann & Ingenhoff, 2015; Buhmann, 2016). Some of the literature (see Shen et al., 2022) has established that both cognitive (beliefs) and affective (emotion-based opinions or responses) influence behavioural intention. Although not overtly measured as an exogenous variable in this study, the fourth dimension of the 4D

model of CI is the affective dimension, which encapsulates how consumers feel about a country (Buhmann & Ingenhoff, 2015). Therefore, source country CI [functional, aesthetic, and normative] and its influence on resident perceptions of inbound tourists and their conation as domestic tourists are discernible and requires further inquiry within the post-crisis context. Hence, the following hypotheses were formulated,

H_{1a-c}: The aesthetic [H_{1a}]; functional [H_{1b}]; and normative [H_{1c}] country image of China influences the willingness of South African residents to engage in domestic tourism considering increased inbound Chinese tourism.

Prior empirical evidence suggests that COO-oriented heuristic cues evoke intrinsic country-based stereotypes (Micevski et al., 2021). To this end, Moghavvemi et al. (2023) suggest that "…residents with higher negative emotions towards the origin country of the incoming tourists would have a lower intention to support such tourism and less motivation to be hospitable towards this group of tourists.". Thus, the influence of the CI-based COO effect on forming positive or negative stereotypes towards certain groups of people cannot be understated (Micevski et al., 2021; Tung et al., 2020; Yousaf, 2017). As a result, the following hypotheses were formulated,

H_{2a-c}: The aesthetic [H_{2a}]; functional [H_{2b}]; and normative [H_{2c}] country image of China influences the negative stereotypes of South African residents towards inbound Chinese tourists.

H_{3a-c}: The aesthetic [H_{3a}]; functional [H_{3b}]; and normative [H_{3c}] country image of China influences the positive stereotypes of South African residents towards inbound Chinese tourists.

Post-Crisis Risk Perception and Resident Behaviour

The correlation between health crises and perceived risk, as well as the inverse relationship between risk perception and travel intention is well established (Chung et al., 2021; Hamid & Bano, 2022). More pertinently, pre-pandemic tourism studies have predominantly interrogated the risk of crime, drugs, and pollution on host communities and how these inbound tourism-related threats influence resident attitudes and behaviour towards tourists (Moghavvemi et al., 2023). The pandemic, however, represents a potentially critical inflexion point in tourist-resident interactions. The existence of limited emerging studies (see Joo et al., 2021; Matiza, 2023; Micevski et al., 2021; Nghiem-Phu & Pham, 2022) associates the severity and pervasiveness of the COVID-19 pandemic with heightened risk perception

amongst residents and their potential subsequent negative behaviour towards inbound tourists and tourism in general. The uncertainty and negative evaluation of potential consequences (Hamid & Bano, 2022) associated with travel and tourism in the post-crisis era potentially leads to residents' heightened risk perception, mainly as prior studies (Li, 2020; Nghiem-Phu & Pham, 2022) have established from potential interaction with tourists from countries with pandemic-compromised CIs, like China. Moreover, the multifaceted nature of the pandemic may have exacerbated resident risk perception across several dimensions (Li, 2020; Shelat et al., 2022; Zenker & Kock, 2020), including the three perceived risk dimensions modelled by this study: physical (potential health risk posed by the pandemic and the hyper-transmissibility of the virus); social (fear of estrangement stemming from potential crisis-induced phobic behaviour); and psychological (anxiety towards outsiders due to the residual effects of interventions such as social distancing) risk. Thus, the study examined the following hypotheses:

H_{4a-c}: China's aesthetic country image influences the physical [H_{4a}]; psychological [H_{4b}]; and social [H_{4c}] risk perceptions of South African residents.

H_{5a-c}: China's functional country image influences the physical [H_{5a}]; psychological [H_{5b}]; and social [H_{5c}] risk perceptions of South African residents.

H_{6a-c}: China's normative country image influences the physical [H_{6a}]; psychological [H_{6b}]; and social [H_{6c}] risk perceptions of South African residents.

The Role of Stereotypes in Tourist Behaviour

The Stereotype Content Model (SCM) (Fiske et al., 2002) establishes the symbiotic relationship between the COO effect and the simplification, albeit generalisation of beliefs. By assessing perceived intent and the propensity of the individual to act on the intent, the SCM considers that while stereotypes are subjective, they are dichotomous – with implicit or explicit stereotyping having either a discernibly positive or negative effect on conation (Diamantopoulos et al., 2017). Some authors (Yousaf, 2017) believe that "stereotypic expressions are also evaluative to the extent that they manifest reverence or irreverence to certain characteristics of a group". The extant literature (Gajić et al., 2023; Micevski et al., 2021; Tung et al., 2020) corroborates this view suggesting that the COO effect may translate into intuitive stereotypes about people originating from a specific country and influence perceptions held of them as well as the behaviour they are subjected to. Citing the case of Pakistan's negative CI and how it adversely influences how its citizens are perceived, Yousaf (2017) submits that

stereotypes are an external cue of unconscious beliefs that inform sometimes negative inferences. While in the case of Serbia, Gajić et al. (2023) observe a correlation between the stereotypes (for instance, perceived arrogance) held by citizens and with willingness of tourists to visit the country as a tourism destination.

In sum, one may infer from the literature that, due to the pandemic, perceived risk may be one of the dimensions most influenced by the subjective characteristics of inbound tourists (Gajić et al., 2023). Thus, the present study extends the COO effect to the South African residents' positive or negative evaluations of Chinese inbound tourists and the perceived risk associated with their travel and tourism activity in a host destination country. Moreover, the notion that stereotypes held by residents may negatively influence their willingness to engage in domestic tourism if there is potential interaction with a 'segregated' tourist group that is susceptible to existing negative stereotypes has some credence. The opposite effect may be true, whereby positive stereotypes may enhance residents' willingness to engage in domestic tourism. Subsequently, the following direct hypotheses were formulated,

H_7: Negative stereotypes influence the willingness of South African residents to engage in domestic tourism, considering increased inbound Chinese tourism.

H_{8a-c}: Negative stereotypes influence the physical [H_{8a}]; psychological [H_{8b}]; and social [H_{8c}] risk perceptions of South African residents.

H_9: Positive stereotypes influence the willingness of South African residents to engage in domestic tourism, considering increased inbound Chinese tourism.

H_{10a-c}: Negative stereotypes influence the physical [H_{10a}]; psychological [H_{10b}]; and social [H_{10c}] risk perceptions of South African residents.

H_{11a-c}: Physical [H_{11a}]; psychological [H_{11b}]; and social [H_{11c}] risk perceptions of South African residents influence their willingness to engage in domestic tourism, considering increased inbound Chinese tourism.

Moderation Hypotheses

Health crises generally trigger one of a triad of behavioural responses from tourists, namely avoidance, mitigation, or management (Li & Wang, 2020; Miao et al., 2022; Zheng et al., 2021). From a Protective Motivation Theory (PMT) (Rogers, 1975) perspective, pharmaceutical and non-pharmaceutical interventions in tourism seek to positively influence tourists' adaptive behaviour by mitigating and managing the risk and fear associated with

travel and tourism activity (Zheng et al., 2021). Furthermore, the perceived risk posed by inbound tourists (Kamata, 2022). To this end, Sharun et al. (2021) indicates that the resuscitation of international tourism post-a-crisis the magnitude of the COVID-19 pandemic is predicated on the implementation of pharmaceutical and non-pharmaceutical interventions that seek to, in part, protect residents given the prospect of post-crisis inbound tourism. Prior studies have observed that pharmaceutical interventions such as vaccination (Nie et al., 2022), and non-pharmaceutical interventions, such as the digitalisation of travel and tourism services; issuance of travel advisories; and the enforcement of health protocols (Hüsser et al., 2023; Liu et al., 2016) influence tourist behaviour. Hence, the notion of a potential moderating effect of pharmaceutical and non-pharmaceutical interventions on the relationship between tourist cognition [resident's risk perception associated with, and the influence of stereotypes towards inbound tourists] and conation [willingness to engage in domestic tourism] is viable. This study explores the potential moderating effect of pharmaceutical and non-pharmaceutical interventions by testing the following hypotheses;

H_{12}: Pharmaceutical and non-pharmaceutical interventions influence the willingness of South African residents to engage in domestic tourism, considering increased inbound Chinese tourism.

H_{13a-c}: Pharmaceutical and non-pharmaceutical interventions moderate the relationship between physical [H_{13a}]; psychological [H_{13b}]; and social [H_{13c}] risk perceptions of South African residents and their willingness to engage in domestic tourism, considering increased inbound Chinese tourism.

H_{14a-c}: Pharmaceutical and non-pharmaceutical interventions moderate the relationship between the aesthetic [H_{14a}]; functional [H_{14b}]; and normative [H_{14c}] country image of China and the willingness of South African residents to engage in domestic tourism, considering increased inbound Chinese tourism.

H_{15a-b}: Pharmaceutical and non-pharmaceutical interventions moderate the relationship between negative [H_{15a}] and positive [H_{15b}] stereotypes and the willingness of South African residents to engage in domestic tourism, considering increased inbound Chinese tourism.

Figure 1 is the conceptual framework for the study.

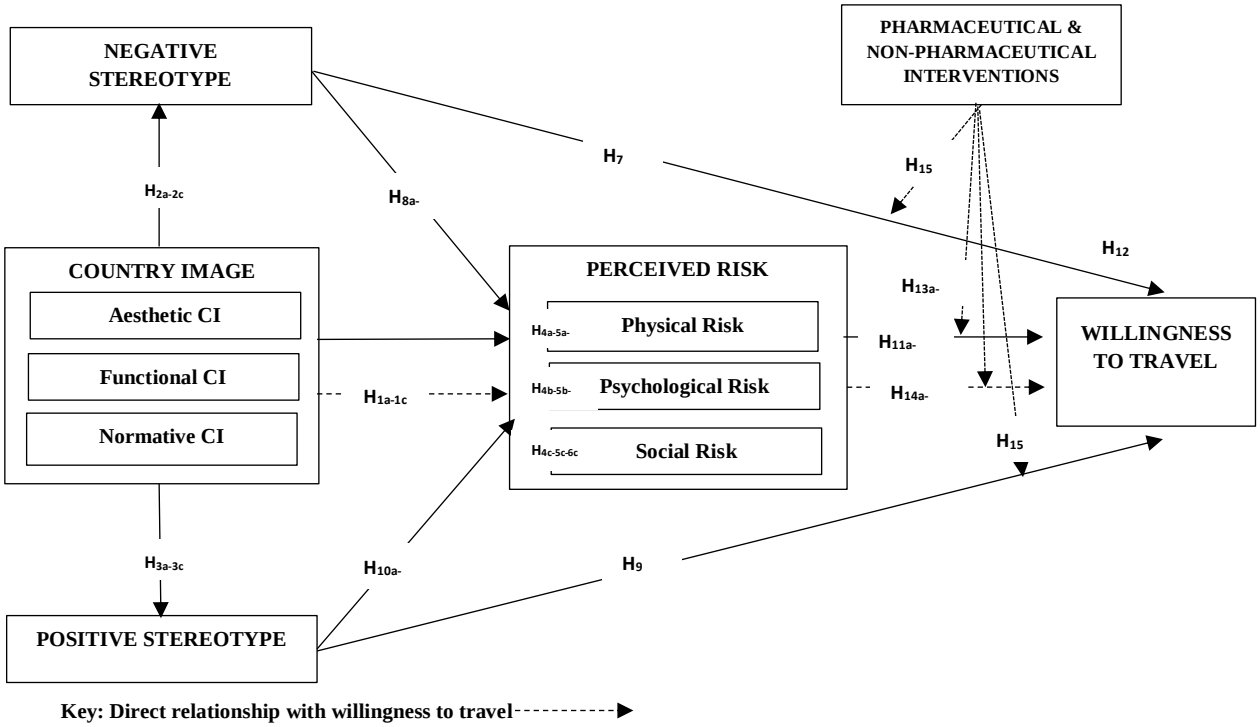

Figure 1: *Conceptual framework*

METHODOLOGY

A cross-sectional deductive study was conducted in February 2023, two months after China announced the easing of its zero COVID-19 policy (Mallapaty, 2022). To mitigate logistical and financial challenges, an online survey was published on QuestionPro to generate data from a sample of South Africans across South Africa's 9 geographically vast provinces. In line with sampling approaches in online surveys (Nayak & Narayan, 2019), a non-probability sample of South African residents as potential domestic tourists was drawn from a pre-recruited panel managed and administered by an international South African research firm, InfoQuest Africa. The final sample of n=499 respondents adhered to Krejcie and Morgan's (1970) sampling heuristics, which, for populations of over 1 million individuals, practical significance is based on a sample of n ≥ 384. The socio-demographic profile confirmed the geographical spread of respondents across all 9 of South Africa's provinces, with the majority typically originating from South Africa's major economic and domestic tourist hubs of Gauteng (31%) and the Western Cape (24%).

Measuring Instrument

A composite scale (see Supplementary Table I) was developed for the study and subjected to an expert scientific panel and ethics review process by the Economic and Management Sciences Research Ethics Committee [Ethics number: NWU-00551-23-A4], respectively. Unless otherwise stated, the variables were measured on a five-point Likert-type scale of agreement, where 1 = 'Strongly disagree' and 5 = 'Strongly agree'. The measuring instrument was structured as follows:

- *Independent variables*: The CI of China amongst South Africans was the independent variable The scale comprised of 18 items adapted from Buhmann (2016) to measure the Functional, Normative and Aesthetic dimensions of CI.

- *Mediators*: The modelled mediators were the generally positive (five items) and negative (five items) perceptions of South Africans towards Chinese tourists based on Tung et al.'s. (2020) scale. Perceived risk of Chinese tourism to South Africa was also modelled as a mediator composed of 12 items associated with perceived psychological, social, and physical risk, respectively (see Adam, 2015; Fuchs & Reichel, 2006; Fuchs & Reichel, 2011; Olya & Al-ansi, 2018; Wang, 2017).

- *Moderator*: The moderating effect of the perceived effectiveness of pharmaceutical & and non-pharmaceutical interventions in protecting South Africans was measured. Six items were adapted from a previous study by Liu et al. (2016), with responses recorded on a five-point Likert scale of effectiveness, where 1 = ' Very ineffective' and 5 = 'Very effective'.

- *Dependent variable*: The willingness of domestic tourists to travel considering the potential increased inbound tourism from Chinese tourists was measured as the dependent variable. Five items were adapted from the literature (Hao et al., 2021; Whitehead & Wicker, 2018).

Data Analysis

Structural Equation Modelling (SEM) using SMART-PLS4 was employed to analyse the data. As a multivariate analysis approach, SEM accommodates complex models (including mediation and moderation) that require the testing of multiple variables and relationships in a single model (German, et al., 2022). SEM is also helpful in modelling cause-and-effect relationships based on multiple exogenous and endogenous variables (Hair et al., 2021). Hence, employing maximum likelihood estimation, the present study

employed variance-based Partial Least Squares - SEM (PLS-SEM) as it generated better construct validity and reliability for composite measurement scales, is less susceptible to parameter estimation bias and is less sensitive to sample size (German et al., 2022; Hair et al., 2021; Zheng et al., 2021).

RESULTS

Respondent Profile

The sample (Supplementary Table II) consisted of an even split of male (50%) and female (50%) respondents. Apart from this, the typical respondent was a South African citizen (95%), aged between 25 and 44 years old (57%), had comparatively more domestic travel experience (56%), possessed at least a high school certificate (36%) or bachelor's degree (36%) at the time of the survey. The typical respondent was also married (46%) and employed in the private sector (44%), earning above the average income in South Africa (28%) while travelling either with their partner (32%) or family (30%). The typical respondent (63%) had also travelled domestically more than once in the two years prior to the survey and planned to engage in domestic tourism (91%) in 2023. More pertinently, respondents had either not interacted (39%) or interacted (more than once: 37%) with Chinese tourists when travelling domestically.

Measurement Model

Statistical Package for Social Sciences (SPSS v.28) was used to conduct Harman's test of Common Method Variance (CMV). The CMV statistic of 24.43% indicated that there was no concern for bias, as it was within the established threshold of 50% (Zheng et al., 2021). There was no missing data. The Kaiser-Meyer-Olkin (KMO) Measure of Sampling Adequacy statistics ranged between 0.660 and 0.898, while Bartlett's test of Sphericity statistics for all the variables was statistically significant at ($p < 0.05$) (Hair et al., 2014). The reliability and validity of the measurement models were assessed using SMART-PLS4. Kurtosis (between -10 and +10) and skew (between -3 and +3) statistics (Supplementary Table I) were within the acceptable parameters for normality assumptions (Griffin & Steinbrecher, 2013). As indicated in Table 1, the outer loadings (see Supplementary Table I for complete item and statistics list) for all the variables were within accepted parameters except for *PHR* and *IWT*, which reported minimum outer loadings less than the recommended OL = 0.40 but did not adversely influence the subsequent statistics (Abbasi et al., 2024).

As summarised in Table 1, the Cronbach Alpha (α>0.70), Composite reliability (CR>0.70) and the Average Variance Extracted (AVE>0.50) statistics for all the variables were above the threshold criteria, thus internal consistency reliability and convergent reliability were confirmed (Hair et al., 2020).

Table 1. *Measurement model summary*

*Variable	*Items	*OL		*VIF		(α)	CR	AVE
		Min	Max	Min	Max			
Aesthetic Country Image (*ACI*)	6	0.658	0.819	1.436	2.180	0.850	0.861	0.573
Functional Country Image (*FCI*)	6	0.623	0.811	1.416	2.510	0.832	0.852	0.545
Normative Country Image (*NCI*)	6	0.791	0.880	1.967	3.652	0.923	0.928	0.721
Positive Perception (*PSV*)	5	0.748	0.876	1.633	3.176	0.850	0.857	0.628
Negative Perception (*NGV*)	5	0.754	0.862	1.476	2.510	0.882	0.886	0.680
Physical Risk (*PHR*)	4	0.349	0.867	1.149	1.531	0.699	0.775	0.513
Psychological Risk (*PSR*)	4	0.772	0.914	1.531	3.954	0.878	0.883	0.733
Social Risk (*SCR*)	4	0.846	0.895	2.157	2.936	0.893	0.895	0.756
Pharmaceutical and non-pharmaceutical interventions (*PNI*)	6	0.723	0.851	1.955	2.645	0.889	0.902	0.640
Willingness to Travel (*IWT*)	5	0.373	0.883	1.064	2.857	0.741	0.825	0.509

Key: ACI = Aesthetic Country Image; FCI = Functional Country Image; NCI = Normative Country Image; PSV = Positive Perception; NGV = Negative Perception; PHR = Physical Risk; PSR = Psychological Risk; SCR = Social Risk; PNI = Pharmaceutical and non-pharmaceutical interventions; IWT = Willingness to Travel; OL = Outer Loadings; VIF = Variance Inflation Factor; α = Cronbach Alpha; CR = Composite Reliability; AVE = Average Variance Extracted

Note: * Supplementary Table I for full item list

The Variance Inflation Factor (VIF<0.50) statistics range for all variables were below the threshold criteria of 0.50 (Table 1), confirming the absence of multicollinearity (Hair et al., 2020). Discriminate validity was assessed based on the Fornell and Larcker (1981) criteria (Table 2), as well as Heterotrait-Monotrait Ratio of Correlations (HTMT<0.85) as summarised in Table 3.

Table 2. *Discriminate validity - Fornell & Larcker criteria*

	ACI	FCI	IWT	NCI	NGV	PHR	PNI	PSV	PSR	SCR
ACI	0.757									
FCI	0.604	0.738								
IWT	0.352	0.365	0.714							
NCI	0.590	0.609	0.288	0.849						
NGV	0.536	0.488	0.347	0.615	0.825					
PHR	-0.039	-0.105	-0.334	0.055	-0.107	0.716				
PNI	0.363	0.362	0.250	0.403	0.264	0.027	0.800			
PSV	-0.417	-0.374	-0.207	-0.406	-0.628	0.279	-0.134	0.793		
PSR	-0.172	-0.157	-0.308	-0.066	-0.262	0.502	0.051	0.396	0.856	
SCR	-0.229	-0.213	-0.325	-0.062	-0.277	0.626	-0.010	0.473	0.644	0.870

Key: ACI = Aesthetic Country Image; FCI = Functional Country Image; NCI = Normative Country Image; PSV = Positive Perception; NGV = Negative Perception; PHR = Physical Risk; PSR = Psychological Risk; SCR = Social Risk; PNI = Pharmaceutical and non-pharmaceutical interventions; IWT = Willingness to Travel

As shown in Table 2, the square root of AVE statistics is greater than the correlations of the constructs. Therefore, discriminate validity is confirmed based on the Fornell and Larcker (1981) criteria. Table 3 indicates that all the ratios of correlations in the matrix are below the 0.85 threshold; hence discriminate validity is further affirmed (Abbasi et al., 2024).

Table 3. *Discriminate validity - Heterotrait-Monotrait Ratio of Correlations (HTMT)*

	ACI	FCI	IWT	NCI	NGV	PHR	PNI	PSV	PSR	SCR
ACI										
FCI	0.716									
IWT	0.455	0.465								
NCI	0.663	0.682	0.343							
NGV	0.611	0.550	0.417	0.667						
PHR	0.199	0.221	0.467	0.145	0.173					
PNI	0.416	0.403	0.330	0.441	0.294	0.126				
PSV	0.479	0.427	0.262	0.449	0.723	0.313	0.149			
PSR	0.189	0.170	0.364	0.099	0.293	0.543	0.064	0.449		
SCR	0.252	0.243	0.360	0.083	0.311	0.676	0.051	0.539	0.714	

Key: ACI = Aesthetic Country Image; FCI = Functional Country Image; NCI = Normative Country Image; PSV = Positive Perception; NGV = Negative Perception; PHR = Physical Risk; PSR = Psychological Risk; SCR = Social Risk; PNI = Pharmaceutical and non-pharmaceutical interventions; IWT = Willingness to Travel

Structural Model

SMART-PLS4 was utilised to investigate the structural model of the study and test the proposed hypotheses. Based on the blindfolding procedure in SMART-PLS4, Table 4 indicates that the model had predictive relevance (Q^2 >0.000) with Q^2 statistics ranging between 0.066 to 0.427 (Hair et al., 2013). The R^2 statistics assessed the variance in the endogenous variables as explained by the exogenous variables in the model. The R^2 coefficient statistics ranged between weak (0.118) and substantial (0.425), suggesting that the variance explained by the endogenous constructs was significant (Cohan, 1988).

Table 4. *Coefficient and model predictive power*

Variable	Complete Sample	
	R^2	Q^2
IWT	0.311	0.142
NGV	0.425	0.417
PHR	0.118	0.017
PSV	0.215	0.206
PSR	0.172	0.025
SCR	0.263	0.066

Notes: **R^2** – Coefficient of .02 = Weak; .13 = Moderate; .26 = Substantial; **Q^2** - Predictive power of >.000

Key: PSV = Positive Perception; NGV = Negative Perception; PHR = Physical Risk; PSR = Psychological Risk; SCR = Social Risk; IWT = Willingness to Travel

Table 5 summarises the results of the direct and moderation hypotheses testing. As summarised in Table 5, the PLS-SEM results indicate

that all the hypothesised direct effects were significant except for H_{4a} and H_{5a}, whereby *ACI* did not have a direct effect on *PHR* (H_{4a}: $\beta = 0.048$, $t = 0.756$, $p = 0.225$) and *PSR* (H_{5a}: $\beta = -0.047$, $t = 0.775$, $p = 0.219$). Moreover, H_{1c}, H_{8a}, H_{8c} and H_{11c} were also rejected as *NCI* (H_{1c}: $\beta = 0.066$, $t = 1.007$, $p = 0.157$) had no direct effect on *IWT*, while *NGV* had no direct effect on *PHR* (H_{8a}: $\beta = 0.003$, $t = 0.041$, $p = 0.484$) and *SCR* (H_{8c}: $\beta = -0.041$, $t = 0.670$, $p = 0.251$). The direct effect of *SCR* on *IWT* (H_{11c}: $\beta = -0.078$, $t = 1.151$, $p = 0.125$) was also insignificant.

Table 5. *Direct and moderation hypotheses*

Hypotheses		***β***	**STDV**	**t-value**	***p*-value**	**Output (Result)**
H_{1a}	ACI -> IWT	0.112	0.065	1.724	0.042	Accept
H_{1b}	FCI -> IWT	0.114	0.054	2.098	0.018	Accept
H_{1c}	NCI -> IWT	0.066	0.065	1.007	0.157	Reject
H_{2a}	ACI -> NGV	0.232	0.055	4.249	0.000	Accept
H_{2b}	FCI -> NGV	0.091	0.047	1.929	0.027	Accept
H_{2c}	NCI -> NGV	0.423	0.050	8.533	0.000	Accept
H_{3a}	ACI -> PSV	-0.231	0.063	3.665	0.000	Accept
H_{3b}	FCI -> PSV	-0.111	0.056	1.997	0.023	Accept
H_{3c}	NCI -> PSV	-0.203	0.057	3.563	0.000	Accept
H_{4a}	ACI -> PHR	0.048	0.064	0.756	0.225	Reject
H_{4b}	ACI -> PSR	-0.047	0.060	0.775	0.219	Reject
H_{4c}	ACI -> SCR	-0.104	0.053	1.958	0.025	Accept
H_{5a}	FCI -> PHR	-0.170	0.060	2.842	0.002	Accept
H_{5b}	FCI -> PSR	-0.074	0.055	1.345	0.089	Accept
H_{5c}	FCI -> SCR	-0.135	0.056	2.410	0.008	Accept
H_{6a}	NCI -> PHR	0.269	0.063	4.307	0.000	Accept
H_{6b}	NCI -> PSR	0.222	0.067	3.322	0.000	Accept
H_{6c}	NCI -> SCR	0.301	0.058	5.212	0.000	Accept
H_{7}	NGV -> IWT	0.184	0.065	2.848	0.002	Accept
H_{8a}	NGV -> PHR	0.003	0.068	0.041	0.484	Reject
H_{8b}	NGV -> PSR	-0.102	0.064	1.607	0.054	Accept
H_{8c}	NGV -> SCR	-0.041	0.061	0.670	0.251	Reject
H_{9}	PSV -> IWT	0.200	0.064	3.119	0.001	Accept
H_{10a}	PSV -> PHR	0.347	0.053	6.510	0.000	Accept
H_{10b}	PSV -> PSR	0.374	0.053	7.118	0.000	Accept
H_{10c}	PSV -> SCR	0.476	0.052	9.187	0.000	Accept
H_{11a}	PHR -> IWT	-0.257	0.059	4.353	0.000	Accept
H_{11b}	PSR -> IWT	-0.139	0.059	2.349	0.009	Accept
H_{11c}	SCR -> IWT	-0.078	0.068	1.151	0.125	Reject
H_{12}	PNI -> IWT	0.127	0.053	2.415	0.008	Accept
H_{13a}	PNI x PHR -> IWT	0.019	0.055	0.342	0.366	Reject
H_{13b}	PNI x PSR -> IWT	-0.055	0.062	0.882	0.189	Reject
H_{13c}	PNI x SCR -> IWT	0.080	0.071	1.136	0.128	Reject
H_{14a}	PNI x ACI -> IWT	-0.077	0.074	1.043	0.149	Reject
H_{14b}	PNI x FCI -> IWT	0.036	0.062	0.587	0.278	Reject
H_{14c}	PNI x NCI -> IWT	0.077	0.073	1.057	0.145	Reject
H_{15a}	PNI x NGV -> IWT	-0.023	0.061	0.378	0.353	Reject
H_{15b}	PNI x PST -> IWT	0.058	0.066	0.874	0.191	Reject

Key: ACI = Aesthetic Country Image; FCI = Functional Country Image; NCI = Normative Country Image; PSV = Positive Perception; NGV = Negative Perception; PHR = Physical Risk; PSR = Psychological Risk; SCR = Social Risk; PNI = Pharmaceutical and non-pharmaceutical interventions; IWT = Willingness to Travel; B = Beta Coefficient, STDV = Standard deviation; t-value = t – Statistics, p-value = Probability (P) value.

Relationships are significant at: * p < 0.100; ** p < .05; *** p < .001β = Beta Coefficient; t-value = t – Statistics; p-value = Probability (P) value

The study also assessed the moderating effect of *PNI* on the relationships between the country image (*ACI*, *NCI* and *FCI*); perceived risk (*PSR*, *PHR* and *SCR*); generic perception (*PSV* and *NGV*) and *IWT*. As it emerged, *PNI* does not have a statistically significant effect on the hypothesised relationships; hence hypotheses H_{13a-c}, H_{14a-c}, as well as H_{15a} and H_{15b} were rejected.

DISCUSSION

The study provides empirical evidence of the underlying mechanisms in the willingness of South African residents to engage in domestic tourism amid a potential influx of inbound Chinese tourists post the country's 'zero COVID-19' policy. Seven key results emerged from the study. First, contrary to the empirical evidence from the extant of literature (Ang & Mansouri, 2023; Armutlu et al., 2021; Floribert, 2022; Miao et al., 2022; Matiza, 2023) related to the negative crisis and post-crisis CI of China, as well as the subsequent perceived negative COO effect on Chinese tourists, China's [aesthetic and functional] CI positively influenced the willingness of South African residents to engage in domestic tourism despite the potential influx of inbound Chinese tourists. Second, in line with the extant burgeoning literature (Gajić et al., 2023; Micevski et al., 2021; Moghavvemi et al., 2023; Tung et al., 2020; Yousaf, 2017) China's post-crisis CI increases South African residents' negative stereotypes and has a diminishing effect on residents' positive stereotypes of Chinese people. This may suggest that the positive COO effect of China's CI may be overridden by South African residents' pre-existing and crisis-induced phobic anti-Asian sentiment (Yousaf, 2017). What is potentially novel is that all three CI dimensions exhibited the same COO effect on resident stereotypes.

Third, normative aspects of China's CI typically heightened South African residents' risk perceptions, hence supporting the COO effect of China's norms and values on how residents interpret potential perceived risk (see Chen et al., 2020; Micevski et al., 2021; Moghavvemi et al., 2023; Yousaf, 2017). Interestingly, contrary to most of the post-crisis literature, the COO effect of China's aesthetic and functional CI had a predominantly diminishing effect on the risk perceptions of South African residents. Fourth, the positive and negative stereotypes of Chinese tourists positively affected South African residents' willingness to engage in domestic tourism. This result further highlights the complexity of modelling consumer behaviour in that the results may imply that positive stereotypes, such as Chinese tourists being polite, clean, friendly, and open to interaction,

reinforced that they would most likely adopt and adhere to local health protocols such as masking and social distancing when engaging in tourism (see Moghavvemi et al., 2023). However, these positive stereotypes heightened South African residents' physical, psychological and social risk perceptions due to the increased potential for some resident-host interaction. On the other hand, negative stereotypes such as Chinese tourists being believed to be annoying, aggressive, and not open to interaction may diminish the likelihood that some inbound Chinese tourists would actively interact with South African residents, thus mitigating the prospect of crowding at popular tourist destinations (see Nie et al., 2022). This may also account for how negative stereotypes diminished residents' psychological and social risk perceptions of risk associated with inbound Chinese tourism.

Fifth, physical and psychological risk perceptions associated with inbound Chinese tourists diminished South African residents' willingness to engage in domestic tourism. This is consistent with contemporary post-crisis studies (Armutlu et al., 2021; Joo et al., 2021; Matiza, 2023; Ryu et al., 2023), which have established that risk perception transcends to period of crisis and influences post-crisis tourist behaviour. Sixth, consistent with some of the literature (Nie et al., 2022; Sharun et al., 2021), pharmaceutical and non-pharmaceutical interventions positively influenced South African residents' willingness to engage in domestic tourism. However, these interventions did not moderate the influence of China's CI on their willingness to engage in domestic tourism. Nor did the interventions affect the influence of stereotypes and risk perceptions on South African residents' willingness to engage in domestic tourism. The result corresponds with the findings of Moghavvemi et al. (2023) that interventions such as vaccination, mask-wearing and social distancing did not influence residents' often negative conation in relation to the threat posed by post-crisis inbound tourism. However, the results contradict most of the literature (Chung et al., 2021; Hüsser et al., 2023; Nie et al., 2022; Ryu et al., 2023) concerning the established significant effect of health-protective behaviour via the adoption and efficacy of pharmaceutical and non-pharmaceutical interventions.

CONCLUSION

In sum, the study results confirm that ethnocentrism, stereotyping, and risk aversion are some of the long-term effects of the pandemic that appear to have transcended the pandemic to influence post-crisis resident behaviour

in the South African context (Kamata, 2022; Miao et al., 2022). The CI, stereotype, and risk perception-oriented nuances in resident behaviour support prior studies (see Armutlu et al., 2021; Matiza, 2023; Ryu et al., 2023; Zheng et al., 2021) that alluded to the heterogeneity in their effects, as well as the fact that health-crisis induced behaviour [akin to SARS and Ebola-induced shifts in tourist behaviour] transcends the COVID-19 crisis period and influences residents' behaviour post-the-crisis. The heterogeneity in the effect of China's perceived post-crisis CI on various cognitive [positive and negative stereotypes and risk perceptions] and conation [willingness to engage in domestic tourism] dimensions of residents' behaviour suggests that even residents from the same community may differ in their views on risk, sources of risk, its mitigation, and its influence on their conation (see Moghavvemi et al., 2023).

Theoretical Implications

To the best of the author's knowledge, this study is one of the first to attempt to model the relationship between the effect of China's post-crisis CI and the willingness of residents to engage in post-crisis domestic tourism amid the potential influx of Chinese tourists. By adjusting for the intervening effects of positive and negative stereotypes, the perceived risks associated with Chinese tourists, as well as crisis interventions, the more complex model makes significant theoretical contributions to the burgeoning literature (Armutlu et al., 2021; Joo et al., 2021; Kamata, 2022; Matiza, 2023; Moghavvemi et al., 2023; Nghiem-Phu & Pham, 2022; Ryu et al., 2023) which has advocated for more advanced post-crisis behavioural research from a resident, as well as a resident-tourist perspective. The results affirm Miao et al's. (2022), post-pandemic post-traumatic tourism behaviour model by partially validating the notion of restructured assumptions [the significance of the COO effect, stereotypes, and phobic risk perception] in tourist behaviour, hence providing empirical evidence that is an antonym to the post-traumatic growth theory (Tedeschi & Calhoun, 2004), more so from a resident's domestic tourism behaviour perspective.

The study expands Buhmann and Ingenhoff's 4D Model of CI (2015) and Han's (1989) notion of the summary effect to post-crisis resident behaviour and domestic tourism in the global South, thus improving the understanding of the perception-oriented constructs from an under-researched tourism segment. The study also broadens the scope of Rogers's (1975) Protective Motivation Theory (PMT), extending it to better comprehend how crisis mitigation measures potentially influence adaptive post-crisis resident behaviour and domestic tourism. The results have

implications for applying the SCM (Fiske et al., 2002) in tourism, as the results confirm the COO effect as an antecedent to positive and negative stereotype formation, as well as establishing stereotypes as viable intervening variables in tourist decision-making. Thus, opening new avenues for tourism research that seeks to adapt the model. Going forward, the results have theoretical implications for the broader Social Contact Theory (Allport, 1954) in post-crisis domestic tourism, whereby CI has a verified influence on the value formation process between inbound tourists and residents via its effect on stereotypes and risk perceptions. Hence highlighting the increasing complexity of modelling resident-tourist interaction in tourism, particularly in a post-crisis scenario. Lastly, the heterogeneity in the effects of CI, stereotypes, risk perceptions and pharmaceutical and non-pharmaceutical interventions provides a myriad of empirical evidence that confirms and, as in most instances in this study, challenges established notions and behavioural models in tourism research.

Practical Implications

The interrogation of resident-tourist interaction within the context of the willingness of residents to engage in domestic tourism amidst inbound tourists from China is imperative and timely. A better understanding of resident perception and behaviour is imperative to the sustainable post-crisis recovery and development of both domestic and international tourism. Heterogeneity in the impact of the COO effect on the various behavioural dimensions explored in this study suggests that while there is a general willingness of South African residents to engage in domestic tourism despite the influx of Chinese tourists post-the 'zero-COVID-19' policy, there may be underlying factors that may impact the resident-tourist interaction when both groups engage in travel and tourism in the same locale. Hence, the outcomes of this study provide destination management and tourism practitioners, as well as public policymakers, with critical insights into the value of residents as key stakeholders within the tourism ecosystem. The results have two key practical implications.

First, resident behaviour and their attitude towards inbound tourists have significant experiential and satisfaction implications for international tourists. However, what this study highlights, is how resident perceptions of inbound tourists also influences their post-crisis domestic travel behaviour. Chinese tourists engage in group travel, visit renowned tourist attractions, attend large-scale events, and are known for the penchant for being patrons at high-end tourism facilities such as restaurants and casinos (see Wen et al., 2021). This suggests that Chinese tourists are a high-value

tourist segment and would be critical to the recovery of tourism in any destination. Additionally, it will be inevitable for residents to interact with Chinese tourists when they engage in domestic tourism. Therefore, there is a need for concerted tourism-oriented social marketing to coordinate initiatives such as cultural exchange activities, media briefings and social media campaigns aimed at dispelling and managing the underlying negative stereotypes about China, particularly addressing health and safety issues post-the pandemic. Furthermore, in the case of South Africa, 'Ubuntu' (I am what I am because of who we all are) is the mainstay and hallmark of the South African tourism experience (see Hemmonsbey & Tichaawa, 2020). Whereby, South African friendliness and the welcoming attitude of its people towards international visitors have been touted as being key in the overall positive tourism experience for inbound tourists. Hence, the concept of 'Ubuntu' can be harnessed as the basis for a bi-lateral tourism policy that seeks to the COO effect of China amongst South Africans, as well as reintegrate Chinese tourists post their isolationist COVID-19 policy. Second, the value of Chinese tourists to the global tourism market cannot be understated. Tourism practitioners and public officials must coordinate public diplomacy initiatives to promote bi-lateral tourism. Public diplomacy and progressive mutually beneficial policies such as technology transfer in travel and tourism biosecurity and pre-emptive travel bubble protocols will be key to managing intra and post-crisis CI, as well as subsequent crisis-induced perceptions and behaviour. This approach also promotes post-crisis resident domestic tourism behaviour, whereby effectively managed risk perception and stereotypes associated with inbound tourists after a crisis enhance their *home is safer bias* (see Wolff et al., 2019).

Limitations and Future Research

The study provides some interesting *in situ* insights into resident post-crisis behaviour. However, there are some limitations to be noted. As a cross-sectional deductive study, the data provides a snapshot of resident perceptions during the period immediately preceded by the rescinding of the zero-COVID policy by China. For a more longitudinal perspective on the effect of the pandemic on China's CI and its subsequent COO effect, replication of the study is recommended, as the present study provides a good basis for a future comparative study. The population sampled consists of South African residents only; hence, results can only be generalised in the South African context. Replication of the model and study in various emerging market destinations is therefore recommended to further validate

the model as well as contribute various destination insights based on the model presented in this study. Future scholarship may also expand the model by adapting other seminal theories, such as the Theory of Planned Behaviour.

Disclosure statement

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