

Predicting the Italian Tourist Behavior After the First Wave of the Covid-19 Pandemic: The Effects of Human Values and Health Risk Perception on the Intentions to Travel Domestically

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Abstract

The global crisis induced by the Covid-19 pandemic has deeply upset the travel sector in Italy, raising doubts about an effective recovery after the first peak of the health emergency. As a matter of fact, many Italians were uncertain about taking some time away from home in the summer 2020. Accordingly, this research aims at investigating Italians' intentions to travel within the country in the uncertain scenario caused by the Covid-19 pandemic, by employing an original conceptual framework that combines the theory of planned behavior (Ajzen, 1985), the theory of basic human values (Schwartz, 1992), and a tailored measure of perceived health risk. In addition, the study develops a market segmentation based on the basic human values, whose goal is to evaluate whether the results obtained by applying the conceptual model change across individuals with different value priorities. The theoretical model has been tested on a sample of 1014 adult Italian travellers. The results show that the major determinant of the intentions to travel is the perceived approval by peers and public opinion (subjective norms) and that this does not change across different value segments. Furthermore, it was proven that both values and perceived health risk significantly contribute to the explanation of the intentions to travel within Italy in the uncertain scenario.

Keywords: Travel sector, Crisis management, Covid-19, Theory of Planned Behavior, Market segmentation, Ten Basic Human Values, Perceived Health Risk, CFA, Path analysis.

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Introduction

The tourism sector has been disrupted by the recent outbreak of Covid-19 and the situation is still very uncertain, both looking at the present and the future consequences. Before the crisis, Italy ranked 5th among the top 10 destinations by international arrivals (UNWTO International Tourism Highlights, 2019) and the tourism sector accounted for 13% of the national GDP and employed 14.7% of the workforce (OECD Tourism Trends and Policies, 2020). Moreover, in the past 25 years the tourism industry had shown a consistent trend of positive growth, with very good prospects for the future (Trading Economics, 2020).

However, Italy has been the first European country hit by the health crisis and it is one of the most Covidaffected destinations. According to one of the last reports by ISTAT (2020), during the spring 2020, the pandemic has completely erased the tourism activity that in the March-May trimester observes its seasonal relaunch phase, especially relevant for the foreign influx. In this period, the statistics institute estimates that, without Covid-19, there would have been 81 million presences, namely 18% of the annual total, which represents 23% of the annual presences of foreigners, as well as 20% of the general presences in hotel facilities. Furthermore, in that period, foreign tourists alone would have spent around 9.4 billion euros in Italy (Mancino, 2020).

This data highlights the extraordinary negative impact that the Covid-19 outbreak brought to the industry, which is among the most affected sectors, and to the whole national economy. Moreover, it makes clear that acting with utmost urgency in order to recover the destination image and strive not to lose large portions of demand will be one of the priorities of the country once the emergency phase will be definitely overcome.

Even though a pandemic of such magnitude has not been witnessed since the time of the Spanish flu, we are living in a world that has become more and more disaster prone. Epidemics, natural catastrophes, political turmoil, terrorist attacks, and economic crises are recurring events, whose causes, consequences, and potential solutions have been studied with increasing frequency in the last years (Ritchie & Jiang, 2019). However, considering the profound differences that characterize each disaster and crisis, the field is calling for more research. Ritchie and Jiang (2019) claim that most of the disaster and crisis management has been focusing on

the *response and recovery phase*, both from a macro perspective (policies, industry) and a micro perspective (specific businesses, regions). In this regard, the literature has largely supported strategies that include market segmentation, recovery promotion and collaboration, crisis management and recovery plans, and personnel management (Ritchie & Jiang, 2019). This study is positioned within this academic framework: at the time of writing, we are still in the early stages of the crisis and we are facing a completely changed market; thus, the present research aims to provide a market segmentation based on the study of consumers' behavior and to explore customers' intentions to travel domestically. The purpose of doing such a customer-focused study is to gain deeper knowledge about what consumers are thinking and how they feel with respect to the idea of travelling, now that the (first) peak of the emergency has passed but the crisis is not over yet.

As a matter of fact, in a situation of great uncertainty as the one we are living now, the tourist behavior is subject to great variation: according to the Italian media, there is an alarming hesitation around the decision to travel in the aftermath of the pandemic. Indeed, during the peak of the emergency, when people were asked if they would have been keen to travel after the re-opening, only 19% responded positively; but now that the society finally re-opened, there is an increasing trend of people who are considering travelling within Italy in the summer 2020 (Carli, 2020). According to Confturismo-Confcommercio and SWG, in June 2020, 38% of Italians seemed to have decided to take a vacation in the coming months; however, 39% confirmed that they will wait some time before moving from home. In addition, there was a 19% of undecided, namely people who would like to leave but fear they do not have sufficient financial resources or holiday time (QuiFinanza, 2020).

This research is designed to shed some light on the abovementioned issue: the main goal is to predict the Italian tourists' intentions to travel within the country in the transitional phase after the first peak of the Covid-19 pandemic. In order to do this, two main socio-psychological theories will be applied: the Theory of Planned Behavior by Fishbein and Ajzen (2010) and the Theory of the Ten Basic Human Values by Schwartz (2012), which will be further analyzed and explained in the *Literature Review* section. A specific conceptual model useful to understand consumer intentions, linked to a sample segmentation based on Schwartz's values (1992), will be developed and applied to the tourism industry in a "post-first wave of a pandemic" scenario. Moreover, a tailored measure of perceived health risk will be added to the framework to understand to which extent this

variable is influencing travellers' decision-making process. In fact, this model is originally designed to answer the following research questions:

- Do segments with different value priorities (Schwartz, 1992) show different intentions to travel within Italy in the transitional phase (approximately the next six months)?
- 2. Among attitudes, perceived norms, and perceived behavioral control (Ajzen, 1985) which is the predictor of behavior that influences the most the intentions to travel within Italy in the transitional phase? Does it change across contrasting value segments?
- 3. To which extent is the perceived health risk influencing the intentions to travel within Italy in the transitional phase? Does it change across contrasting value segments?
- 4. Do human values, intended as background factor (Fishbein & Ajzen, 2010), increase the ability of the conceptual model to explain the intentions to travel within Italy in the transitional phase?

This study seeks to predict any changes in the Italian tourist behavior and to understand their determinants, in order to help the industry to adapt the offer to the new demand. The market segmentation proposed can be useful to the recovery and response phase, especially for the implementation of policies to lift businesses out of the crisis and to develop marketing campaigns aiming to promote Italy as a safe destination in existing and new markets. Indeed, for a marketing campaign to be effective, it is essential to know who is the right target that can be converted in actual customers-visitors.

The project will be developed in six sections: first, a *Review* of the relevant literature, will have the purpose of critically outlining the disciplinary and academic framework of the study, and the potential gaps and lack of knowledge within this framework; secondarily, the *Hypotheses* on which this work is based and the logical path through which the conceptual model was conceived will be outlined and explained. Thirdly, a *Methodology* section will describe the empirical environment in which the research has been carried out, the data collection criteria, and the data analysis principles that allowed to answer the research questions and formulate conclusions. This will be followed by the actual *Data Analysis Results* that will present the findings obtained and by the *Discussion* section, which aims to comment the results considering the theory selected,

and to introduce the limitations and the managerial implications of this research. Finally, the project will end with a brief *Conclusion* section that summarizes the overall outcome of the study.

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Literature Review

2.1 The Travel Industry: Crises and Resilience

At approximately regular intervals, the travel industry has been subject to slowdowns or barriers linked to unpredictable events, such as geopolitical upheaval, natural disasters, terrorism, economic crises, and epidemics. Crises, catastrophes, and upsetting events are occurring both at local/national level and on an international scale (Blaikie, Cannon, Davis, & Wisner, 1994) and analysts argue that it is not about whether they will arise, but rather at what time they will arise, how they will be managed and possibly solved (Kash & Darling, 1998; Barton, 1994). Richardson (1994) claims that this might be due not only to the fact that we have created a more interconnected, congested, and complex society, but also due to the increasing power of technology which makes it difficult to separate the cause from its effects (Cooper, 2005). Therefore, the line between natural disasters and human-made crises have faded and researchers cannot neglect it (Capra, 1996).

From the Twin Towers in 2001 to the tsunami in Indian Ocean in 2004, from the outbreak of Ebola virus disease in 2014 to the terrorist attacks in France and Belgium in 2015-2016, from the fall of the Russian A321 on the Sinai Peninsula in November 2015 to the suicide attacks at the Istanbul Airport in 2016: the fear of travelling has been peeping for years from one side of the planet to the other (Maggi, 2020). However, a recent research by the World Travel & Tourism Council, that takes into account 90 moments of crises between 2001 and 2018, confirms that the fear of travelling does not last long and that Travel & Tourism represents one of the most resilient sectors. The data shows that recovery times have decreased significantly in the past twenty years: the sector's ability to return to pre-crisis levels went from 26 months of 2001 to an average of 10 months of 2018. Nevertheless, political instability and disease outbreaks represent the most difficult challenges for the tourism sector, having the longest recovery times, respectively 22.2 and 19.4 months (WTTC, 2019).

The most relevant and, in some respects, comparable case of disease outbreak before the Covid-19 crisis was the SARS (Severe Acute Respiratory Syndrome) epidemic in 2003. Originated in the Guangdong province in China, it spread also in the neighboring states: among the hardest hit countries there were Taiwan, Hong Kong, and Singapore; the virus managed to arrive also in Europe and North America, although the situation was under control and the virus was eradicated in a matter of weeks (Cooper, 2005).

Looking at the measures and strategies adopted by the worst-hit countries, we can find numerous similarities with what has been done to prevent the spread of Covid-19 from the beginning of 2020. Indeed, travel was banned, schools and universities campuses were closed, business trips were canceled, and people started working from home with videoconferences; the mass media disseminated images of citizens going around with face-masks, events were postponed or called off, suspected and confirmed cases were put in isolation and mandatory quarantine was established for all the people they had been in contact with, while researchers were trying to discover a cure or a vaccine, that eventually had not been found out (Zeng, Carter, & De Lacy, 2005). The economic and financial loss was considered huge at that time but looking at what is happening today it seems almost negligible: the cumulative GDP of China was still growing in 2003, just at a lower rate than expected. On the other hand, the current IMF projections (World Economic Outlook, 2020) suggest that the economic downturn caused by the coronavirus crisis will be the most severe global economic recession since the Great Depression of 1929. This is also true for Italy, which is expected to observe a double-digit GDP decline, representing the greatest drop in national GDP since WWII.

In 2003 China and its adjacent countries witnessed a strong economic crisis essentially limited to the tourism sector and its related industries, such as retail, transportations, entertainment, and food and beverage. The number of visitors fell drastically: the lowest figure in tourism inbound and outbound was reached in May, with a 70% decrease in foreign tourists entering the country and a 31% decrease in Chinese travellers leaving the country, compared with the same period in 2002 (Zeng, Carter, & De Lacy, 2005). However, in July 2003, after WHO declared that the SARS outbreak had been contained, and therefore that the risk of further infections had been eliminated, tourist arrivals peaked up again. By August 2003, in China, visitors' levels were similar to those of 2002 and, by the December 2003, the figures completely recovered the gap caused by the decline of the previous months (Zeng, Carter, & De Lacy, 2005).

This example highlights the fragile resistance of the sector but, at the same time, its deep resilience and strong capacity to recover from unexpected crises. On the other hand, crises bring upheaval and they call for ad-hoc managerial strategies to deal with the long-term response: in particular, literature has been focusing on management planning, intensive promotion and communication plans (Hollier, 1991), and industry structural adjustments (Zeng, Carter, & De Lacy, 2005). Furthermore, it is proven that while the industry breakdowns bring financial impoverishment among the major sector operators, they can also have positive outcomes in the long term. For instance, the SARS crisis caused extraordinary losses in the tourism flow and a consequent reduction of value in many of the sector-related businesses (Zeng, Carter, & De Lacy, 2005). Nevertheless, tourists showed their willingness to continue travelling as soon as it was allowed, often shifting their preferences towards domestic destinations and places considered safe (Cooper, 2005). Moreover, many problems affecting the industry emerged and were eventually improved: the crisis pushed the restructuring of the entire tourism sector in China, Japan, Singapore and Hong Kong, through new business strategies, public policies, communication campaigns, innovative marketing plans, and financial incentives from governments of several countries (Cooper, 2005; Henderson & Ng, 2004; Zeng et al., 2005). Ultimately, these initiatives created a much more powerful, interconnected, and competitive tourism environment in the entire East Asia region (WTO, 1999).

2.2 Tourism Crisis and Risk Management

A good definition of tourism crisis is provided by Sönmez, Backman, and Allen (1994) who claim that a *tourism crisis* is "any occurrence which can threaten the normal operation and conduct of tourism related businesses; damage a tourist destination's overall reputation for safety, attractiveness and comfort by negatively affecting visitors' perceptions of that destination; and, in turn, cause a downturn in the local travel and tourism economy and interrupt the continuity of business operations for the local travel and tourism industry by the reduction in tourist arrivals and expenditures." (Sönmez, Backman, & Allen, 1994, p.22; Ritchie & Jiang, 2019, p.2).

Nevertheless, there are different types of crises that might provoke different impacts on the tourist flows of a destination, with different time spans to recover and different strategies required to get back to the pre-crisis situation. According to UNWTO (2011) tourism crises can be categorized into: environmental, societal and political, health-related, technological, and economic crises. Of course, both the SARS crisis and the current Covid-19 crisis pertain to the health-related category, which includes diseases, epidemics, and pandemics affecting human beings or animals (COMCEC, 2017).

As a matter of fact, tourism management literature asserts that every crisis is unique (Coombs, 1999; Henderson, 2007; Pearson & Milroff, 1993). Each crisis calls for diverse capabilities from various tourism organizations and operators, also requiring a tight collaboration with the stakeholders and tailored communication strategies (Campiranon & Scott, 2014, p. 315). To deal with this entanglement of actors and actions, a comprehensive and structured crisis and risk management plan is of fundamental importance for the travel industry operators. Indeed, the role of risk management is to foresee a potential crisis and avoid its occurrence or, when it is impossible to prevent, to limit its drawbacks in the long run. For risk management to be efficient, it is crucial to evaluate the probability of the risks that can hinder the ordinary and correct functioning of the industry.

Furthermore, Faulkner (2001) identified a framework to outline and describe the different phases of the evolution process of a crisis. This framework has had a wide appeal over the years within the crisis and risk management literature. First, it entails a *pre-event stage*, when action should be directed towards prevention and avoidance of the occurrence of negative events, via risk assessment and preparation plans. When avoidance is no longer possible, we move on to the second stage, the *prodromal phase*, characterized by the mobilization of resources and the beginning of the disaster contingency plans outline. Next, during the *emergency phase*, the negative event occurs and there is an urgency to act, executing the disaster contingency plans. Consequently, we advance to the *intermediate recovery phase*, that includes a focus on the restoration of the pre-crisis conditions after having met the critical needs. Afterward, reconstruction and reassessment become the priority of the *long-term recovery phase*, when there should be significant progress towards the return to normality through marketing and development plans, together with government intervention, if needed.

Finally, in the *resolution phase*, the situation gets back to the pre-crisis levels or, possibly, improvements can be observed; at this point, an analysis of the contingency plans adopted, an accurate review, and adjustments become essential to learn from the past and ensure more preparedness and readiness for the future (Faulkner, 2001; Henderson & Ng, 2004).

Both the management of SARS in 2003 and of Covid-19 in 2020 did not follow precisely the steps outlined by literature (Faulkner, 2001), with little preparation before the virus outbreak and insufficient measures adopted to prevent the occurrence of an international crisis. The spread of Covid-19 caught governments, and society in general, completely unprepared, sometimes even forced to be a mere witness of the evolution of the emergency and sometimes required to act intuitively, without a precise crisis management plan to follow. Indeed, the pre-event and prodromal phases were almost inexistent or had very little significance. However, it must be noted that the East Asia region (China, Hong Kong, Singapore, South Korea, Japan) reacted to the emergence of the new Covid-19 virus more promptly than Europe, showing that the resolution phase that followed the experience of other virus outbreaks, such as SARS, was somehow effective. At the time of writing, unfortunately, we have not reached that stage for the Covid-19 emergency, being stuck in a transition period in Europe, while other parts of the world (the USA, India, and Brazil in particular) are still dealing with the peak of the emergency phase.

2.3 Marketing Strategies as Response to Crises

Tourism crisis and risk management literature has further discussed and developed the theoretical framework envisaged by Faulkner (2001), outlining effective management strategies to handle the entire crisis process. More specifically, the stages of a crisis have been grouped into four wider phases: *preparedness and planning*, *recovery and response, resolution, and reflection* (Ritchie & Jiang, 2019). The great majority of the studies focuses on the recovery and response phase, often examining the lack of preparedness and the measures adopted to overcome the crisis.

The recovery and response phase consists of collaborative actions that include coordinated response to the media and the public, campaigns to reopen tourist attractions, and design of a marketing plan with the purpose

of promoting the destination (Ritchie & Jiang, 2019, p.9; Stafford, Yu, & Armoo, 2002; Mansfeld, 1999). Leslie and Black (2005) argue that, considering the fragmentation of the tourism sector and the lack of resources of the SMEs which prevail in the industry, those initiatives should be promoted and coordinated by the local Destination Management Organization. Furthermore, the literature (Cioccio & Michael, 2007; Durocher, 1994; Pizam, 1999; Sönmez et al., 1994) points out that media communication has a fundamental role for the organizations of the tourism sector because it has the potential to correct the negative perception about the destination that often emerge due to an inaccurate overemphasis created by media on the negative effects of the crisis. Indeed, marketing campaigns can be effective to raise domestic and international market confidence, to mitigate concerns and anxiety about travelling, and scale down the negative media impact. In this regard, social media might also be a strong communication tool, still rather unexploited, to influence consumers' sentiments about travelling to a destination (Möller, Wang, & Nguyen, 2018).

This research has the purpose of being a valuable starting point for the development of the marketing strategies useful for the recovery and response phase of the current Covid-19 crisis. The foundation of an effective marketing strategy is the deep understanding of the demand. Considering that, at present (beginning of summer 2020), we are still in the intermediate recovery stage (Faulkner, 2001) and the travellers' reactions to the limitations imposed by the pandemic and their intentions to travel are still comprehensively unexplored, it is interesting to develop an up-to-date market segmentation to investigate the behavior of the tourism customer in the near future.

Therefore, this study aims to first produce a domestic market segmentation which will be based on the Basic Human Values by Schwartz (1992) and the Theory of Planned Behavior by Ajzen (1985). Campiranon and Scott (2014) identified market segmentation as one of the five Critical Success Factors (CSFs) that can set out profitable results for an organization (Rockart, 1979, p. 85). Market segmentation is also one of the key actions applied to increase revenues (Johnson, Scholes, & Whittington, 2005, p. 523) when organizations face situations of crisis, because it helps detect the appropriate marketing mix that will fit the needs of the key market segments (Campiranon & Scott, 2014).

A Market Segmentation is a subdivision of the market into homogeneous subsets (segments) of customers; it is based on specific parameters that can group them according to their response to a particular offering formula, or according to the presence of similar characteristics, relevant for the setting of marketing objectives. The purpose of the segmentation is to identify parts of the market which, due to their homogeneity, can be considered objectives (targets) achievable by particular combinations of the marketing mix. In this way, an organization tries to explore the market demand to obtain information on the purchasing behavior of consumers. This allows to choose the appropriate target segments for a specific product or service and to implement a tailored marketing strategy (Wind, 1995).

One of the main issues when applying the market segmentation lies in the adoption of the criterion to divide the market, which must be suitable for the purposes of the segmentation. The variables on which segmentation is conducted are almost infinite; however, among these, some are considered the most significant and are used more frequently: geographical variables, such as country and region; socio-economic variables such as social class, income and profession; demographic variables, such as age, gender, and family composition classes; psychographic variables, such as values, personality traits, and lifestyle; purchase behavior variables, such as frequency of purchase, end use, and quantity (Evans, 1999). This study will provide a market segmentation based on psychographic variables because, as it will be thoroughly explained in section *2.6 Values as Background Factors of the Theory of Planned Behavior*, they represent the most effective background variables for the prediction of human social behavior. More specifically, the psychographic variables of interest consist of the ten basic human values, which are proven to be the very stable principles that guide the human decision-making process (Schwartz, 1992).

Disaster and crisis literature (Campiranon & Scott, 2014; Johnson et al., 2005; Thompson, 2010) agrees that, when recovering from a negative event, operators of the tourism sector should direct marketing campaigns towards the market segments that have the potential to generate income even when most of the previous customers are not willing to travel. Thus, it is essential to identify the accurate mix of market segments that can be converted in actual customers-visitors. Indeed, generally, a crisis does not involve every market segment (Campiranon & Scott, 2014). This research will focus on the domestic market, which is the easiest to reach in

the present uncertain situation: indeed, local people are expected to give a prompter response to the first recovery phase, to have less logistical issues to travel within their own country, and to be already familiar with the national regulations for the prevention of the spread of the virus. Moreover, Mansfeld (1999, p. 35) suggests that the domestic market, when existing, should be leveraged as a short- and medium-term balancing mechanism.

2.4 The Ten Basic Human Values by Schwartz

When it comes to human values theories, it is important to distinguish between individual value models (Allport, Vernon, & Lindzey, 1960; Gouveia, 2013; Münsterberg, 1908; Rokeach, 1973; Schwartz, 1992; Spranger, 1921; Van Lange, De Bruin, Otten, & Joireman, 1997; Vernon and Allport, 1931) and cultural value models (Hofstede, 1980; Kluckhohn, 1951; Inglehart, 1977; Schwartz, 1999). This study considered only individual value theories because it focused on a pool of respondents from the same country, who are not expected to significantly differ in their cultural heritage.

Among the individual value theories, the most interesting ones are those that build on earlier models and improve them; more specifically, this refers to the theories developed by Allport et al. (1960), Gouveia (2013), Schwartz (2012), and Van Lange et al. (1997) (Hanel, Litzellachner, & Maio, 2018). Notwithstanding, the model suggested by Alleport et al. (1960) has widely fallen in disuse since 1980s, due to its outdated content and the limited number of value dimensions considered (Kopelman, Rovenpor, & Guan, 2003). Additionally, in a comparative study among the other three individual value theories, it was demonstrated that Schwartz's Portrait Value Questionnaire was the most effective instrument to predict three different behaviors (prosocial, environmental, and mental health behaviors), also explaining the variance in the behavior better than the other two models in the large majority of the cases tested (Hanel et al., 2018).

Therefore, the market segmentation this research is providing will be based on the Ten Basic Human Values by Schwartz (1992, 2006a), which are "basic personal values recognized across cultures" (Schwartz, 2012, p. 2). This means that it will analyze the psychographic variables characterizing the Italian traveller. Indeed, especially in times of crisis, managers need to adopt evaluation tools that take into consideration people's intangible resources. Among these, the values of the individual cannot be ignored, since they represent the guiding principles capable of determining what are the most important things for a person. According to Rokeach (1973), values are "stable beliefs that determine which conduct or purpose is preferable to another for one person or social group". Indeed, they are abstract beliefs, sufficiently stable and hierarchically sorted by the relevancy attributed; they serve to guide one's behavior and to provide the criteria for evaluating one's own actions and those of his/her peers.

The structure of values develops from the daily choices between different actions. Choices produce consequences with respect to multiple values. Indeed, values are implicated simultaneously and felt as congruent or in conflict with the choice, on a practical, cognitive, and social level (Schwartz, 1996). Shalom Schwartz, through a research in 60 countries and about 200 samples, has identified ten constant value orientations deriving from the human needs and recognized in all cultures (Schwartz, 1992). The model proposed by Schwartz (1992) is *circumcomplex* (Fabrigar, Visser, & Browne, 1997), with ten value categories arranged in space with a circular order. The most similar variables are in adjacent positions along the circumference and are compatible with each other; the most antithetical values are in opposition along the simplies that the strength of the relationship between the variables decreases as their distance along the circular structure increases, reaching the maximum negative relation for the variables in diametrically opposed positions.

To better understand the spatial arrangement of the model, the ten values can be represented within a twodimensional space that counterposes the polarities of values. Each variable outside the circle is associated with adjacent values within the circular structure (*Figure 1*).



Figure 1. Theoretical model of relations among ten motivational types of value (Schwartz, 2012, p. 9)

Along the circular continuum there are four main areas: Openness to Change, Self-transcendence, Conservation, Self-enhancement. These are combined in a two-dimensional space generating two main axes:

- Self-enhancement Self-transcendence: the values of power and achievement lie along the direction
 of self-enhancement, whereas universalism and benevolence develop along the self-transcendence
 direction. The former has as a priority the pursuit of personal interests, the latter the well-being of
 others.
- Openness to change Conservation: values such as hedonism, self-direction, and stimulation tend to be more open to change, while security, tradition and conformity produce a certain resistance to change.

Next, the motivational goal of each value will be presented to have a clearer idea of what values represent. First, self-enhancement includes power and achievement. *Power* means social status and prestige, control of resources, and dominance over other people. Those who prioritize power consider it essential to have their status recognized and to exert influence over others by assuming leadership roles. *Achievement* represents the attainment of personal success by demonstrating one's skills, in accordance with social standards. For those who prioritize success, it is essential to be able to obtain significant results recognized by their peers (Schwartz, 1992, 1996, 2006b, 2012).

On the other hand, self-transcendence consists of universalism and benevolence. *Universalism* consists of understanding, tolerance, respect, and protection of the well-being of all people and of nature. Those who give priority to universalism are primarily interested in equity, respect for the rights of all, the integration of diversity, and the protection of the environment. *Benevolence* is the maintenance and improvement of the well-being of the people with whom one is in direct contact. Those who prioritize benevolence believe that it is fundamental to create and cultivate good relationships, characterized by harmony and willingness to help each other (Schwartz, 1992, 1996, 2006b, 2012).

Then, openness to change is characterized by hedonism, self-direction, and stimulation. *Hedonism* consists of personal pleasure and gratification. Those who prioritize hedonism evaluate the pleasure of what they are doing and of the environment they live in as fundamental, valorizing the compatibility of their duties with the cultivation of personal interests and leisure. *Self-direction* generates predisposition to action and independence of thought. People characterized by self-direction are led to choose, create, explore; they believe it is fundamental that everyone nurtures their potential. People with high *Stimulation* are characterized by arousal, enthusiasm for novelty and stimulating challenges. Those who prioritize stimulation believe that the most important thing about life is the stimuli it can offer, which originate from the activities, contexts, experiences, and challenges that life can entail (Schwartz, 1992, 1996, 2006b, 2012).

Lastly, conservation includes conformity, tradition, and security. Those prone to *Conformity* tend to avoid actions and impulses that could disturb, harm others, or violate social expectations and social norms. Those who give priority to conformity consider it essential to adapt to shared decisions and expectations, even though this means putting their individuality in the background. *Tradition* involves the respect, acceptance and adoption of the customs and ideas that belong to the cultural tradition of the community. Those who give priority to tradition consider it essential to commit to maintaining and passing on what has been consolidated over time. Finally, those who are characterized by the value of *Security* consider safety, harmony, and stability to be important. People who value the most security fear the possible instability of the environment they live

in; they also believe it is important to avoid the risks associated with physical safety or even the conflicts that may arise in social contexts (Schwartz, 1992, 1996, 2006b, 2012).

The ten basic human values have in common several characteristics, such as beliefs about what is desirable, motivational purposes, judgement criteria, and the hierarchical order of the other values; however, they differ for the type of motivation or goal they express (Riva, 2012; Schwartz, 2012). Within the value structure, there are different dynamics involving different types of values. In particular, self-enhancement and conservation values are characterized by more pronounced anxiety, prevention of loss, and self-protection against threat, whereas openness to change and self-transcendence values are more anxiety-free, they promote gain goals, and are oriented towards self-expansion and personal growth. Furthermore, self-enhancement and openness to change values have a *personal focus*, meaning that they regulate how one expresses personal interests and characteristics, whereas conservation and self-transcendence have a *social focus*, meaning that they regulate how one relates socially to others and affects them (Schwartz, 2012).

Finally, basic values are universally recognized, since there is evidence (Schwartz, 1992, 1996, 2006b) that people across different cultures share similar value priorities, with benevolence, universalism, and self-direction being the most significant cross-cultural value priorities and power and stimulation being the least relevant.

Basic values are very useful constructs to predict and explain the behavior. Indeed, they have been thoroughly used and experimented in social science: being relatively stable and context independent, the basic human values anchor attitudes and behaviors, increase their steadiness, and can reveal fundamental societal changes. Some of the behaviors systematically predicted by Schwartz's theory (1992) include political orientation and voting, cooperation, competition, activism, environmental activity, adoption of innovations, white collar crimes, juvenile delinquency, risky sexual behavior, alcoholism, use of contraceptives, hunting, internet use, cell phone use, employment choices, university choices, choice of medical specialization, social contact with out-group, in-group social involvement, and religious observance (Riva, 2012).

What is more interesting for this research is the important link that the basic human values have with consumer behavior: in fact, individual value priorities are expected to influence the choices between alternatives that an individual makes in any given circumstance (Feather, 1995). When activated, values priorities give meaning, organize, and reinforce the behavioral choice (Verplanken & Holland, 2002). Indeed, they represent the guiding principles that, more or less consciously, lead us to our daily actions and choices (Bardi, 2000; Caprara, Schwartz, Capanna, Vecchione, & Barbaranelli, 2006), including our travel choices (Madrigal & Kahle, 1994). As a matter of fact, values affect a decision-making process by determining the expected utility of certain outcomes that are significant for the values considered (Ball-Rokeach & Loges, 1996; Feather, 1990, 1992). And interestingly, even though multiple values might be expressed by a single behavior, only one value category will be often dominating (Bardi & Schwartz, 2003).

2.5 The Theory of Planned Behavior

To better understand what is the role that values play in the decision-making process, the Theory of Planned Behavior (TPB) by Ajzen (1985) must be discussed. This conceptual model was selected to be the backbone of this research. Once applied the market segmentation based on Schwartz's value theory, it will serve to identify what are the antecedents of behavior that most significantly influence the Italian travellers' intentions to go on vacation in the uncertain scenario caused by the pandemic. Understanding what determines the choice to travel is of fundamental importance to identify the correct stakeholders to interact with and the right target for the tourism sector's marketing campaigns. Furthermore, by detecting the most significant predictor influencing the intention to travel, it will be possible to intervene and reinforce the intention or modify it, according to the industry needs.

More specifically, the Theory of Planned Behavior (TPB), is a theoretical framework which aims to predict human social behavior. First off, what do we mean by behavior? Fishbein and Ajzen (2010) define behavior as "an observable event composed of four elements: the *action* performed, the *target* at which the action is directed, the *context* in which it is performed, and the *time* at which is performed" (Fishbein & Ajzen, 2010, p. 29). Since it studies human behavior, the theory can be potentially adapted to every situation that engages

human beings: indeed, the model has been applied and validated in several contexts and disciplines, including tourism and hospitality (e.g.: Bamberg, Ajzen, & Schmidt, 2003; Quintal, Lee, & Soutar, 2010; Sparks & Pan, 2009; Ye, Soutar, Sneddon, & Lee, 2017).

The Theory of Planned Behavior is the successor to the Theory of Reasoned Action (Fishbein & Ajzen, 1975; Ajzen & Fishbein, 1980). The Theory of Reasoned Action (TRA) assumes that behavior is directly determined by the **intention**, the readiness or subjective probability that an individual performs a particular action, such as purchasing a product or a service. The intention, in turn, is determined by the **attitude** - favorable or not - towards the specific behavior and by the **subjective norms**, understood as the individual perceptions of how much the adoption of the behavior is approved or disapproved by specific people or target groups.

The model also assumes that the antecedents of behavior are directly influenced by beliefs: attitudes towards behavior depend on the beliefs associated with the consequences, in terms of cost-benefits, of adopting the behavior itself (behavioral beliefs), as well as with the evaluation of each of these consequences. Similarly, subjective norms are a function of the perception of normative pressure (normative beliefs), as well as of the motivation to act in accordance with the expectations of the target group.

The extension of the Theory of Reasoned Action, the Theory of Planned Behavior, was the result of the discovery that the behavior is not 100% voluntary and under individual control: individuals cannot carry out their intentions if they do not possess the resources and abilities necessary to perform the behavior or if external barriers impede the execution of the behavior in question. In these cases, the volitional control is low. The determinants of the degree of control that a person has on a given scenario can be divided into internal (motivation, skills, abilities) and external determinants (resources, dependence on other peoples or events, laws, and rules) (Fishbein & Ajzen, 2010). Individuals cannot act a behavior if they lack volitional control; however, having a high volitional control does not ensure the performance of the behavior. Indeed, to perform the behavior there must be favorable intentions (Ajzen, 1985).

Following these considerations, with the Theory of Planned Behavior (TPB), Ajzen (1985) introduced a third predictor of intentions and, consequently, behavior: **perceived behavioral control (PBC)**. PBC is defined as

"people's perceptions of the degree to which they are capable of, or have control over, performing a given behavior" (Fishbein & Ajzen, 2010, p. 64). This construct's meaning is very close to Bandura's (1977) notion of *self-efficacy*, i.e., an individual's confidence in being able to perform a particular behavior. Instead, it differs from the concept of *locus of control* (Rotter, 1966), because, while the latter represents a general expectation that remains stable in different situations, the perceived behavioral control varies from situation to situation.

Similarly to attitudes and subjective norms, perceived behavioral control is a function of control beliefs, which represent the subjective estimate of the possibility of accessing the resources and opportunities necessary for the execution of the behavior; they are based, to a smaller extent, on past behavior, while, to a greater extent, on indirect information and on the experiences of friends and acquaintances (Ajzen & Madden, 1986).

Ajzen (1985) has proposed two versions of his new model: the first is based on the assumption that perceived behavioral control has an independent direct effect on intentions, in the sense that intention about a behavior is only expected to form when the person believes he has the means, skills, and capabilities to perform the behavior itself; the second also considers the possibility of a direct influence of perceived control on behavior, which can only be predicted when it is assumed that perceived behavioral control functions as a partial substitute for actual control over internal and external factors, that could interfere with execution of the behavior. Therefore, the direct path from perceived behavioral control to behavior represents a non-volitional determination of action.

Over the years, research has supported the theory of planned behavior (e.g.: Bamberg, Ajzen, & Schmidt, 2003; Courneya, Bobick, & Schinke, 1999; Hrubes, Ajzen, & Daigle, 2001; Madden, Scholder Ellen, & Ajzen, 1992; Rhodes & Courneya, 2003b; Stern, 2000; Ye, Soutar, Sneddon, & Lee, 2017); among the most significant tests performed, there is the research on the university students' goal to achieve the highest grade (Ajzen & Madden, 1986) and the study on the objective of losing weight (Schifter & Ajzen, 1985). In both studies it was found that the construct of perceived behavioral control increased the predictive validity of the original model of Fishbein & Ajzen (1975). Madden, Scholder Ellen, and Ajzen (1992) demonstrated also that, when volitional control is high, intentions can be a good predictor of behavior themselves; when the volitional control is low, PBC becomes a significant predictor and a proxy of the actual control.



Figure 2. Theory of Planned Behavior Conceptual Model (Kan & Fabrigar, 2017)

According to the conceptual model of the TPB (*Figure 2*), the more positive the attitudes and the subjective norms, and the higher the perceived control, the stronger will be the individual's intention to perform the behavior under consideration. Ultimately, considering a satisfactory degree of actual control over the behavior, the individuals should realize their intentions when the execution of the behavior is at issue (Fishbein & Ajzen, 2010). Therefore, intention is intended to be the immediate and direct determinant of behavior (Ajzen, 1975; Hrubes, Ajzen, & Daigle, 2001).

TPB was selected as the core theory of this research because over the years it has been demonstrated that it represents one of the most robust theories for the prediction of human social behavior (Aguilar-Luzón, García-Martínez, Calvo-Salguero, & Salinas, 2012; Fishbein & Ajzen, 2010). However, lately, this model has been further explored to improve its predictive capacity: the model of goal-directed behavior (MGB) and its extended version (EMGB) have been proven to have a higher predictive power than TPB (Perugini & Bagozzi, 2001, 2004; Richetin, Perugini, Adjali, & Hurling, 2008). These two theories include new constructs compared to TPB: positive anticipated emotions, negative anticipated emotions, goal desire, and behavioral desire; although more precise in the prediction of the variance in the behavior under investigation, the MGB and EMGB theory do not contemplate the presence of a background factor such values, hence they could not be as useful as TPB in the context of the present research.

Another strong theory for the prediction of human social behavior, and more specifically of pro-environmental behavior, is the value-belief-norm (VBN) theory by Stern (2000). This suggests that behavior is explained by a causal chain of constructs, where values inclinations directly influence a set of beliefs (NEP), which in turn impact on the awareness of the consequences of the behavior (AC) and on the following ascription of responsibility (AR); these subsequently shape personal norms (PN), that finally affect behavior. At first glance, having values as a starting point, this model might seem more appropriate to the problem this research is investigating, however, it has been shown that generally VBN has a low predictive capacity (Collins, O'Doherty, & Snell 2006; Kaiser, Hübner, & Bogner, 2005), especially when compared to TPB (Aguilar-Luzón et al., 2012).

2.6 Values as Background Factors of the Theory of Planned Behavior

The Theory of Planned Behavior posits that the major antecedents of behavioral intentions can be explained by behavioral, normative, and control beliefs (see *Figure 2*), from which they follow reasonably – and not rationally, meaning that they might be inaccurate or biased (Fishbein & Ajzen, 2010, p.24). People hold beliefs that are considered valid (Ross & Ward, 1996) and their behaviors are influenced by these beliefs. Beliefs are defined as *subjective probabilities*. Behavioral beliefs are the "subjective probability that performing a behavior leads to a certain outcome"; normative beliefs consist of subjective probabilities that particular referents prescribe or proscribe the performance of a given behavior, or that important referents are or are not performing the behavior; ultimately, control beliefs are the "subjective probabilities that particular factors that can facilitate or impede performance of the behavior will be present" (Fishbein & Ajzen, 2010, p. 221).

Beliefs are assumed not be innate but to be formed everyday through experience. The origin of beliefs can be associated to a great variety of variables, individual traits, and characteristics. For instance, beliefs may be influenced by demographics variables, such as nationality, gender, ethnicity, age, place of residency, education, socio-economic status, group affiliation, and religion; or by personality traits, such as values, mood, personality, emotions, mindset, sensibility, understanding, prejudice, and opinions; or by other general variables that characterize an individual, such as past experience, knowledge, information sources, inference processes, and exposure to information (Fishbein & Ajzen, 2010, p.24).

The TPB conceptual model acknowledges the potential significance of each of these background variables; however, Fishbein and Ajzen (2010) are aware that this potential significance must be tested empirically in any given situation, starting from a hypothesis about which is the factor that can significantly impact the behavior under investigation. In particular, considering a background factor within the theory application may be relevant if there are grounds for supposing that individuals who differ in terms of that background factors have been subjected to differential learning experiences and, therefore, that they hold distinct behavior-significant beliefs (Fishbein & Ajzen, 2010). For example, prejudice may serve to explain discriminatory behavior, job satisfaction to interpret absenteeism, sensation-seeking to explain drug consumption (Fishbein & Ajzen, 2010; Hackett & Guion, 1985; Schütz & Six, 1996).

Nevertheless, the relation between background factors and behavioral, normative, and control beliefs is not unfailing. In fact, people who have in common some demographic o personality characteristics may hold different beliefs. In this case the background factor under consideration cannot be helpful to the explanation of the behavior within the theory framework. Some studies (about organizational behavior: Hackett & Guion, 1985; Koslowsky, Sagie, Krausz, & Singer, 1997; Ones, Viswesvaran, & Schmidt, 1993; Salgado, 2002; about voting choice: Lazarsfeld, Berelson, & Gaudet, 1944; about partisan attitudes: Campbell, Converse, Miller, & Stokes, 1960; Campbell, Gurin, & Miller, 1954) claim that both demographics variables and personality traits could not explain much variance in the behaviors in questions. Notwithstanding, other research (Ajzen, 2005; Epstein, 1979; Fishbein & Ajzen, 1974; Weigel & Newman, 1976) recognizes that broad personal dispositions, i.e., personality traits and general attitudes, can account for broad patterns or aggregates of behavior (Fishbein & Ajzen, 2010).

More specifically, it has been observed that demographic variables are often associated with differences in behaviors, but they cannot contribute to the explanation of the observed variance in the behavior (Centers for Disease Control & Prevention, 2004; Eng & Martin Ginis, 2007; Johnston, O'Malley, Bachman, & Schulenberg, 2006). Conversely, personal dispositions such as values, sensation seeking, intelligence, locus of

control, or self-esteem, can support a relevant psychological explanation of the beliefs people hold with respect to a certain behavior. Regardless, broad dispositional variables can anticipate some behavioral intentions and behaviors, but not all of them. Consequently, it becomes necessary to test the relation empirically.

Several studies (Carlo, Okun, Knight, & de Guzman, 2005; Costa & McCrae, 1985; Courneya, Bobick, & Schinke, 1999; Courneya, Friedenreich, Quinney, Fields, Jones, & Fairey, 2004; Rhodes & Courneya, 2003b; Rhodes, Courneya, & Jones, 2002, 2004) have worked to test the potential relation between personality characteristics and behaviors, focusing mainly on the investigation of the effect of the Big Five personality traits (McCrae & Costa, 1987). Adding a personality background factor is useful for researchers not only to understand whether the personality traits is causing differences in the behavior across individuals with different personalities, but also to get insights about why that trait is or is not helpful to explain the behavior under investigation. Indeed, the planned behavior approach postulates a causal chain from beliefs, mediated by attitudes, norms, and perceived behavioral control, to intentions, and finally to behavior. This chain allows us to track the impact of a background factor along the series of variables' effects, clarifying how it predicts behavior or where along the chain its impact stops being significant (Fishbein & Ajzen, 2010).

By the same token, the present study aims to test empirically the potential effect of Schwartz values on the intention to travel within Italy in the transitional situation caused by the Covid-19 pandemic. The Theory of Basic Human Values by Schwartz (1992) posits that human beings are universally characterized by different values that serve as guidelines for the determination of what is important for the individual. Indeed, they are firm beliefs that drive decision-making processes. Therefore, it is interesting to understand whether Schwartz values are still stables on their motivational goals in an uncertain situation caused by a pandemic and whether they have an impact on the decision-making process of the Italian traveller in this situation. Furthermore, combining the Theory of Basic Human Values of Schwartz and the Theory of Planned Behavior within the context of tourism is a topic still rather unexplored (Bardi & Schwartz, 2003; Ye et al., 2017).

2.7 Health Risk Perception

Another important factor influencing travelers' decision-making process that cannot be overlooked is perceived risk. In general, consumers come across some levels of risk every time they are approaching a purchase decision (Taylor, 1974). Therefore, perceived risk becomes a relevant variable in the explanation of a consumer decision-making process. Moreover, both the academia and management practitioners have demonstrated a strong interest towards measuring the perception of risk over the years (e.g.: Cunningham, 1967; Floyd, Gibson, Pennington-Gray, & Thapa, 2003; Forsythe & Shi, 2003; Mitchell, 1998; Newall, 1977). This is because it is applicable to a wide range of contexts, it helps understand consumer's psychology and behavior, and it is useful to marketing resources allocation, since it contributes to the design of effective brand management, market segmentation, targeting, and positioning strategies (Mitchell, 1998).

We have previously seen that the travel industry is subject to continuous crises; therefore, risk perception might represent an element of fundamental importance in the examination of consumer behavior within this industry. As a matter of fact, the perception of risk results more significant in determining travellers' choice to go to a certain destination than the actual risk of doing so (Irvine & Anderson, 2006; Mitchell & Vasso, 1997; Rittichainuwat & Chakraborty, 2009; Roehl and Fesenmaier, 1992). Indeed, these two dimensions of risk might not correspond: people perceive different degrees of risk associated with the same outcome and, if an actual risk is not perceived, it cannot have an impact on the decision-making process. Conversely, if a risk, that in fact might not even exist, is perceived and evaluated as over the acceptable level, it will influence the tourist behavior negatively (Mansfel, 2006; Reichel, Fuchs, & Uriely, 2007; Rittichainuwat & Chakraborty, 2009). This is what occurred with SARS epidemic: the effects that the spread of SARS had on tourism flows were wider and somehow harsher than those of the virus itself, not only for the affected countries but also for their non-affected neighboring countries (Cooper, 2005; Yates, 2006).

Bauer (1960) was the first to introduce the idea of perceived risk as the perceived combination of the probability that an unwanted event occurs with its possible negative consequences (Choi, Lee, & OK, 2013; Cunningham, 1967; Gronhaug, 1975; Peter and Ryan, 1976). In other words, perceived risk represents the

subjective expectation of potential loss associated with a certain decision (Dholakia, 2001; Downling & Staelin, 1994; Murray & Schlacter, 1990). This two-component framework was further elaborated into a multidimensional model which takes into consideration different types of risk: physical, social, psychological, performance, financial, and time risk (Dholakia, 2001; Jacoby and Kaplan, 1972; Roselius, 1971).

More specifically, physical risk consists of the threat that a certain decision might affect a person's health or appearance, resulting in physical danger, injury, or sickness (Mitchell, 1998; Roehl & Fesenmaier, 1992); social risk concerns the possibility that a consumer's choice may affect the opinion of other people about the consumer himself (Murray & Schlacter, 1990); psychological risk is related to the psychological distress and worry linked to the potential post-decision emotive response (Roehl & Fesenmaier, 1992); performance risk is associated with the possibility that the product or service acquired will not comply with expectations (Horton, 1976); financial risk involves the potential financial loss linked to the decision, namely the lack of value for the money spent (Roehl & Fesenmaier, 1992); lastly, time risk entails that the purchase might take more time than anticipated or result in a waste of time (Roselius, 1971).

For the purpose of this study, concerning the impact of the Covid-19 emergency on the travel choice, physical risk will be further investigated and measured. Floyd, Gibson, Pennington-Gray, and Thapa (2003) point out that safety and security are among the most influencing concerns that travelers have; these include health related issues, war and political instability, crime, terrorism, and natural disasters. Among them, this research will be limited to the examination of **perceived health risk**. More precisely, perceived health risk will be included as an autonomous construct within the Theory of Planned Behavior theoretical framework (Ajzen, 1985).

Within the TPB model, perceived risk is not expected to have an impact neither on subjective norms nor on perceived behavioral control (Quintal et al., 2010). Indeed, the *individual* expectation of a potential health damage associated with the travel decision is not likely to affect other people's opinions about the travelling action or the individual perception of control over the outcomes of the decision. What is more likely is that perceived health risk influences attitudes towards the travel behavior: the higher the perceived risk of getting infected by the virus or infect other people, the more negative the attitudes (i.e., individual dispositions)

towards the travelling activity. In fact, perceived risk can negatively affect people's behavioral beliefs about an object, which in turn influence behavioral intentions through the mediation of attitudes (Fishbein & Ajzen, 2010). This means that perceived risk does not have a direct effect on the intentions to travel, while it has a direct negative effect on attitudes (Campbell & Goodstein, 2001; Huang 1993; Jarvenpaa, Tractinsky, & Vitale, 2000; Lobb, Mazzocchi, & Traill, 2007; Stoddard & Fern, 1999).

Hypotheses and Conceptual Framework

In this section, the conceptual model developed for this research and the hypotheses useful to answer to the research questions presented in the *Introduction* will be formulated and explained. These hypotheses find their foundation both on the literature introduced in the previous section and on the author's observation of the evolving events and news. To summarize, the aim of this research will be to understand the intentions to travel within Italy of the Italian tourists in a specific scenario, called "transitional situation after the (first) peak of the emergency", and the main determinants of these intentions, exploring the role in the tourist's decision-making process of the basic human values (Schwartz, 1992) and of the perceived health risk of travelling. The abovementioned scenario, that for the sake of the study will be limited approximately to the next six months (starting from the moment in which the questionnaire was distributed, July 2020), is characterized by:

- Society re-opened almost completely, with restrictions aimed at preventing the spread of virus.
- Cases of infection and few deaths are still being reported.
- No cure or vaccine is available yet.
- Some countries are still in an emergency phase.
- The risk of a second wave is acknowledged.

Within the context described, people are expected to react differently with respect to their travel behavior. The pandemic has changed the way people move, travel, work, learn, and communicate. We still do not know whether this change will be enduring or not, but, for now, everyone is becoming accustomed to this transformation. Furthermore, we are not talking about a circumscribed shift, but rather about a new reality that is affecting the whole world. In a moment in which the change is constant and the future is uncertain, this research wants to appeal to one of the most stable variables characterizing human beings: values. Hence, the conceptual model that will be presented, finds its premise on Schwartz's (1992) Ten Basic Human Values, intended as trans-situational guiding principles that lead people's choices and actions and can be recognized across cultures. Segments based on values inclinations are extracted from the sample to examine whether the behavior is expected to change or not across people characterized by different values systems. Values are also

integrated as background factor within the Theory of Planned Behavior (TPB) (Ajzen, 1985). As a matter of fact, research has shown that personal values and dispositions can account for general patterns of behavior (Fishbein & Ajzen, 2010).

Subsequently, TPB is applied to predict the Italian tourists' behavior of travelling within the country in the transitional phase. This theory is employed to identify which antecedent of behavior, among attitudes, subjective norms, and perceived behavioral control, is influencing the most the intentions to travel within the country in the transitional situation, and to assess to which extent this changes across the different value segments identified. Finally, travellers' behavior is likely to change because travelling might be seen as a risky activity in terms of spreading the virus or getting infected in the aftermath of a health global crisis: for this reason, a measure of perceived health risk is included in the model and its impact on the attitudes towards travelling within Italy in the transitional phase is observed, both in the general sample and across value segments. The results originating from the application of the model will allow us to get more insights about the motivations of travellers' choices, being beneficial for the design of the recovery and response strategies.

3.1 Hypothesis 1

The literature proves that, on the one hand, values differ for their motivational goals, on the other hand, they share some characteristics. More specifically, higher order values such as Conservation and Self-enhancement tend to be more anxious, to prevent potential losses, and to protect themselves against threats; in addition, they are compliant with social rules, prioritize individual safety and control over material resources, and value personal success (Schwartz, 2012). Conversely, people characterized by Openness to Change and Self-transcendence higher order values tend to be anxiety-free, they are encouraged to take risks to achieve their goals, and they are more focused on personal growth and self-expansion; moreover, they prize challenge, excitement, novelty, and pleasure, while also holding societal concerns (Schwartz, 2012).

Hence, the first hypothesis is that values showing contrasting characteristics, i.e. Conservation and Selfenhancement vs Openness to change and Self-transcendence, differ in their intentions to travel within Italy in the transitional phase. In fact, a travel alternative that is consistent with an individual's value disposition is more likely to be favored, whereas a travel alternative that is contrasting with an individual's value disposition is more likely to be rejected (Ye, Soutar, Sneddon, & Lee, 2017). Being more anxious and risk-adverse, people who prioritize Self-enhancement and Conservation higher order values should be less inclined than Openness to Change and Self-transcendence value segments to engage in a risky and uncertain activity, such as travelling in a transitional situation post (first) peak of the pandemic.

H1. Conservation and Self-enhancement value segments are less likely to travel within Italy in the transitional phase than Openness to change and Self-transcendence value segments.

3.2 Hypotheses 2, 3, and 4

To verify which is the predictor of behavior that influences the most the intentions to travel within Italy in the transitional phase and to assess whether there are substantial changes across contrasting value segments, the Theory of Planned Behavior (Ajzen, 1985) was selected and applied. In fact, the following hypotheses are derived from the TPB conceptual framework (Fishbein & Ajzen, 2010). These have been declined and adapted to the behavior and the scenario under investigation:

H2. Evaluating travelling within Italy in the transitional phase as a safe and pleasant activity (positive attitudes) has a direct positive impact on the intentions to travel within Italy in the transitional phase.

H3. Perceiving travelling within Italy in the transitional phase as respectful of and favored by people considered important and influential (positive subjective norms) has a direct positive impact on the intentions to travel within Italy in the transitional phase.

H4. Recognizing that travelling within Italy in the transitional phase will not be hindered by financial barriers or time barriers (positive perceived behavioral control) has a direct positive impact on the intentions to travel within Italy in the transitional phase.

3.3 Hypothesis 5

Perceived risk can be an important factor in the determination of human behavior (Cunningham, 1967; Taylor, 1974), especially in a moment of great uncertainty and during a pandemic that has caused the death of more

than a million people. For the sake of this research, perceived risk is intended only as perceived health risk, namely the possibility of getting infected or spreading the virus while travelling or after the return from vacation. As postulated by the literature (Quintal, Lee, & Soutar, 2010), when integrated in the TPB, perceived risk is expected to be negatively correlated with attitudes towards the behavior. Therefore, the fifth hypothesis is:

H5. Positive perceived health risk associated with travelling within Italy in transitional phase has a direct negative impact on the attitudes towards the behavior.

3.4 Hypotheses 6, 7, and 8

Lastly, the TPB conceptual framework acknowledges the potential significance of personal characteristics as background variables, which have been proven to account for broad patterns or aggregates of behavior (Fishbein & Ajzen, 2010). Indeed, "travelling" represents an aggregate of behavior, including different specific behaviors (e.g.: choosing a destination, booking an accommodation, choosing experiences at the destination, booking means of transportations, etc.). Furthermore, if we interpret basic human values as the guiding principles that influence our daily choices and that have been determined by different cultural and life experiences (Schwartz, 2012), there are reasons to suppose that they can significantly impact the behavior under consideration (Fishbein and Ajzen, 2010), improving the ability of the model to explain the intentions to carry out that behavior. Hence, the last hypotheses are formulated:

H6. Higher order values have a direct significant effect on attitudes towards travelling within Italy in the transitional phase.

H7. Higher order values have a direct significant effect on subjective norms towards travelling within Italy in the transitional phase.

H8. Higher order values have a direct significant effect on perceived behavioral control towards travelling within Italy in the transitional phase.

The conceptual model of the study is illustrated in the below graph.



Figure 3. Research Conceptual Framework

3.5 Research Contribution to Tourism Management Literature

This research aims to provide an enhancement of the tourism management literature by studying a very recent phenomenon, the Covid-19 global health crisis, through the lenses of consumer (traveller) behavior, in order to detect whether there have been great variations in terms of intentions to travel after the first peak of the pandemic. In fact, being a current phenomenon in constant evolution, it has not been studied thoroughly yet. In particular, the purpose of this study is to test to what extent the Theory of the Ten Basic Human Values (Schwartz, 1992) can still be proven in a moment of great transformation both for the travel industry and for society overall, and to integrate the theory of human values with the TPB (Ajzen, 1985) and the theory of risk perception (Bauer, 1960), to clarify the determinants of such intentions.

Furthermore, tourism literature has not comprehensively investigated the role that human values have in anticipating human behavior in a situation of global crisis (Bardi & Schwartz, 2003; Ye, Soutar, Sneddon, & Lee, 2017). As a matter of fact, in the tourism management literature, research on individual values has often considered only a single or a couple of constructs, without examining the comprehensive impact of values on

all the three predictors, with limitations on the knowledge of the effects that values have on the decisionmaking process and on human behavior (Ye, Soutar, Sneddon, & Lee, 2017).

In a nutshell, the contribution of this study consists of the original integration of the Theory of Planned Behavior (Ajzen, 1985), the Theory of the Ten Basic Human Values (Schwartz, 1992) which is also tested in the specific scenario under investigation, and the Theory of Perceived Risk (Bauer, 1960; Quintal, Lee, & Soutar, 2010) in order to predict the intentions of the Italian tourist to travel within Italy in the transitional phase post (first) peak of the Covid-19 pandemic. Indeed, the ultimate goal of this study is to provide insights about travellers' behavior in a specific uncertain scenario post crisis that can be leveraged during the formulation of the recovery and response phase marketing strategies, but also during the resolution phase, when it comes the time to draw conclusions, learn the lessons from the past and ensure more preparedness for the future, as other crises will come.
Methodology

4.1 Philosophy of science

This study is based on empirical knowledge, meaning that the answers to the research questions arise from available research knowledge and from the data collected to test the hypotheses and to elaborate results (Matthews & Ross, 2010). Data collection and analysis can be replicated in further research.

Furthermore, epistemologically speaking, this research is grounded on a positivistic approach. This stems from the ontological objectivist perspective that a social reality exists unrelated to the researchers and their investigations. Positivism intends knowledge as defined and observable through senses and based on phenomena that can be observed and recorded, not on individual comprehension (Matthews & Ross, 2010; p. 27; Burns, 2000). The researcher must be objective, meaning that (s)he does not have to influence data, that are collected to test hypotheses originating from available literature on the subject of investigation (Bruns, 2000; Weber, 1949).

In this research, the positivistic approach is declined into a study of a social phenomenon (travelling within Italy during the Covid-19 pandemic) and it is based on the collection of quantitative data useful to test hypotheses previously elaborated from current theory on the topic; furthermore, statistical analyses are performed on a fairly extensive dataset and causal relations between the variables of the social framework under investigation are explored (Matthews & Ross, 2010; p. 27).

4.2 Participants

The target population of this research was adult Italian citizens who had travelled one or more times over the last three years. The gross sample used to generalize about the target population was representative regarding age, gender, and geographical origin. The expected IR was 70%. The questionnaire was conducted by YouGov on behalf of Copenhagen Business School. YouGov is a leading global market research firm, whose core is an international online community where millions of people and thousands of commercial and cultural organizations share information about their personal beliefs and behaviors and share opinions about brands.

The survey used to collect data for this research was part of a wider survey designed by Prof. Fumiko Kano Glückstad, Associate Professor at Copenhagen Business School, whose aim was to investigate the travel behavior of Chinese, Danish, Italian, and Japanese travellers prior to and during the Covid-19 pandemic. The survey for this Master's thesis was independently designed by the author and administered by YouGov, which took care of the data collection. The tailored survey for this study included 11 original items that measured the three determinants of behavior and intentions, and 3 original items that evaluated the perceived health risk. The items concerning Schwartz's values were inserted in the basic background information of Prof. Glückstad's survey section.



Macro-regions of Origin of Respondents

Map based on Longitude (generated) and Latitude (generated). Color shows details about Residential Area. The marks are labeled by Residential Area and % of Total Distinct count of Record No.

Figure 4. Survey Participants' Italian Macro-region of Origin

The gross sample of the present research included 1894 participants; however, only 1014 participants provided an answer that could be considered valid. Among these 1014 respondents, 48.7% were males and 51.3% were female (SD = 0.5) with an average age of 48 years old (age range 18 - 55+; SD = 1.35). The average level of education was considerably high, with a 45.3% of participants having obtained a university degree and a 45.1% having completed secondary education (SD = 0.66); moreover, the majority of them were residing in the North

of Italy (North West accounted for 27.5% and North East for 19.5%, for a total of 47%; SD = 1.33) (*Figure* 4). Interestingly, 91.8% of the participants claimed to have travelled domestically (overnight) at least once in 2018 and 2019.

4.3 Survey and Instruments

The survey specifically designed to answer the research questions of this study included two main sections: the first consisted of 11 standard direct measures recommended by Fishbein and Ajzen (2010) to test the Theory of Planned Behavior and adapted to the scenario under consideration; the second entailed 3 items used to measure perceived health risk inspired by the literature (Choi, Lee, & Ok, 2013; Floyd, Gibson, Pennington-Gray, & Thapa, 2004; Quintal, Lee, & Soutar, 2010) but completely revisited to suit the specific case of study. Demographics data were provided by YouGov, whereas the 21 questions of the Portrait Value Questionnaire (PVQ; Schwartz, Melech, Lehmann, Burgess, Harris, & Owens, 2001), aimed at identifying the value motivations of participants, were extracted from the basic background information of the survey designed by Prof. Glückstad.

The items used to test the TPB model were adapted from the guidelines to formulate a standard TPB questionnaire provided by Fishbein and Ajzen (2010). Intentions were measured through a unique direct item asking about respondents' willingness to travel in Italy in the transitional phase and expressed by a 7-point Likert scale ranging from "Strongly disagree" to "Strongly Agree"; four items assessed attitudes towards travelling in Italy in the transitional phase through a series of 7-point bipolar semantic scales ("Unenjoyable – Enjoyable", "Dangerous – Safe", "Onerous – Effortless", and "Harmful – Beneficial"). Then, four items evaluated subjective norms by asking to respondents to which extent they felt that the decision to travel within Italy in the transitional phase was welcomed by their peers and the public opinion; the measurement scale was a 7-point Likert scale ranging from "Strongly disagree" to "Strongly Agree". Finally, since there were not enough resources to perform a pilot study useful to identify the control factors most fitting to this case of study, this research decided to focus only on financial and time barriers to evaluate perceived behavioral control. Financial and time control factors were measured through a 7-point Likert scale ranging from "Strongly

disagree" to "Strongly Agree" that investigated to which extent respondents felt that those control factors were impacting their decision to travel.

The reason why financial and time constraints were the only selected among other potential control factors originated from a screening of secondary data, particularly newspapers articles (e.g.: Carli, 2020; QuiFinanza, 2020), in which frequently interviewees named those factors as major issues that would prevent them to go on vacation. They were also derived from common sense because many Italians were forced to spend holiday time during the lockdown, or they could not afford to take time off their businesses which had been already closed for a long time. Moreover, the Covid-19 emergency has dragged Italy to its most severe economic crisis since WWII: many people lost their jobs (unemployment increased by 3.2% from February to May 2020), others were subjected to salary cuts, or had to shut down their businesses, implying a decreasing availability of financial resources (Goria, 2020; Rizzuti, 2020).

Continuing, perceived health risk was measured in terms of the worry of respondents that a vacation in Italy in the transitional phase would have increased the possibility to get infected, to infect their peers, or to spread the infection at the destination. Since this was a measure of probability, a 7-point Likert scale ranging from "Strongly unlikely" to "Strongly likely" was applied.

PVQ (Schwartz et al., 2001) represents the most popular measurement method for value orientations: in its extensive version it includes 40 items, whereas in the version selected for the European Social Survey (ESS, round 9, 2018), it includes 21 items. The latter was the version chosen for the survey of this research. Each item provides a short description (portrait) of a person-type and his/her goals, aspirations, or desires; thereby, all the ten value-types envisaged by Schwartz (1992) are described in their major characteristics. For each item, respondents state to which extent they considered the person described similar to them, through a 6-point Likert scale that ranges from "Not at all like me" to "Very much like me".

Lastly, information about age, gender, residential area, education level, gross household income, and gross personal income have been provided by YouGov. The survey was administered online via the YouGov platform from 10th to 24th July 2020. The average time of completion of the survey (intended as inclusive also

of Prof. Glückstad's questions) was around 23 minutes. Data were available for further analysis by the beginning of August 2020.

4.4 Research Design

At this point it must be specified that this research is non-experimental and that it employed a correlational approach within a quantitative explanatory design. In other words, the research design is aimed at increasing knowledge by studying the social phenomenon of concern and by seeking cause-effect relations between the variables of interest, without any control or manipulation of the independent variable selected (i.e., the intentions to travel within Italy in the transitional phase).

4.5 Data Analysis

The procedures for reducing, coding, analyzing, and visualizing the data were conducted through several software, including IBM SPSS Statistics 26, IBM SPSS Amos 26, RStudio, Tableau Prep Builder 2020.3, Tableau Desktop 2020.3, and Microsoft Excel.

First, a missing values analysis was performed through SPSS in order to address potential issues associated with an impaired dataset: the pattern of missing values was identified and only responses considered completed for the purpose of this study were kept in the dataset.

Next, having the definitive set of data, descriptive statistics and visualizations that served to provide synthetic information on some aspects of the sample were executed through SPSS and Tableau. These included summary representations (both graphic and textual) of the sample's gender, age, education, residential area, and gross household income; measures of the central tendency that gave indications about the central location of the distribution of data; and measures of dispersion, such as variances and standard deviations, which described the degree of variability of observations with respect to a central trend index. These analyses were helpful to get a comprehensive understanding of the sample of interest.

Subsequently, reliability analysis of the survey items used to measure the TPB and perceived health risk constructs was performed to validate part of the conceptual model of the research. More specifically, in social

sciences, constructs are often measured by surveys questions; hence, they usually consist of dimensions (or factors), represented by observable indicators. The construct is "the product of a well-founded scientific reflection, an idea developed to allow categorization and description of some directly observable behaviors" (Crocker & Algina, 1986). In this case, the constructs of interest were the three predictors of the Theory of Planned Behavior (Ajzen, 1985) and the health risk perception, which have been measured by 13 survey indicators. Indicators are observable variables that indicate the unobservable construct, by means of a reflective or formative relation (Rossi, 2018). In this research the indicators are reflective, meaning that the construct is the cause for the indicators, and not vice versa (as in the formative relation).

Every act of measurement involves errors, that can be of two types: random or systematic (Sturgis, 2016b). To keep the incidence of errors under control, the concept of reliability was introduced and applied to this research. Reliability was assessed through Cronbach's alpha (Cronbach, 1951). Cronbach's alpha is a measure of internal consistency of the items used to measure a latent factor (Forero, 2014). The alpha coefficient takes values between 0 and 1 and it is commonly assessed through the criteria presented in *Table 1*. In accordance with the alpha coefficient, computed through SPSS Reliability Analysis, it was decided whether each construct was reliable or not and if it was worthy to keep all the items used to measure it or if it was more appropriate to eliminate some of them.

< 0.6	Unacceptable
$0.6 \leq \alpha < 0.7$	Sufficient
$0.7 \leq \alpha < 0.8$	Fair
$0.8 \leq \alpha < 0.9$	Good
$\alpha \ge 0.9$	Excellent

Table 1. Cronbach's Alpha Commonly Reported Cut-off Criteria (Rossi, 2018)

Thereafter, in order to validate Schwartz's conceptual model (1992) with the data of this study, a Confirmatory Factor Analysis (CFA) was carried out using the R function *lavaan*. CFA pertains to the Structural Equation Modeling (SEM) techniques; it is extremely helpful because it allows to assess to which extent the latent variables (in this case, Tradition, Conformity, Security, Hedonism, Stimulation, Self-direction, Power, Achievement, Universalism, and Benevolence) of the model we are using are effectively measured by the observed items of the questionnaire (Cole, 1987). In other words, it served to verify that the hypothesized relationships between the observed indicators and the latent constructs were actually validated with the sample data, providing also parameters for model fitting (Cole, 1987; Gorsuch, 2015). Unlike Exploratory Factor Analysis (EFA), CFA places restrictions on the parameters of the model by specifying the measurement model before investigating the data, meaning that it can test the theory defined *a priori* against the sample data collected (Gorsuch, 2015; Sturgis, 2016b). Indeed, differently from EFA, CFA factor loadings are fixed to zero for indicators that are not supposed to measure the factor (Sturgis, 2016b).

Consequently, sample data were uploaded in R and Schwartz's PVQ model was described before running the function. Moreover, the *lavaan* package used allowed the author to extract factor loadings for each of the ten values (latent variables) and for each of the 1014 respondents. These factor loadings were extracted in a .csv file that was employed as database for the following cluster analysis.

One of the main reasons why research employs cluster analysis in business settings is to understand how people/customers are related to each other, enabling researchers to create tailored market segmentations. In social sciences, it is important to notice that one size does not fit all: running models and interpreting data based on sub-groups of people/customers subjectively defined *a priori* might result in misleading findings. In order to create groups that reflected the actual profile responses, this study used latent variable modeling, which is part of the larger set of SEM techniques. When latent variable modeling deals with latent variables that are categorical, as in the case of this research, there are two possible types of analysis (LCA), if the manifest variables are categorical as well, or *Latent Profile Analysis* (LPA), if the manifest variables are continuous (Bartholomew, Steel, Moustaki, & Galbraith, 2002). This study employed Latent Profile Analysis because the data source was based on the results of CFA and the final dataset used for the latent variable modeling consisted of the factor loadings previously extracted, which are continuous variables. LPA represented one of the foundations of the entire data analysis because it enabled the author to recognize subgroups (profiles) of travellers that were arising from the considered sample and were based on

the different responses provided to the PVQ section of the questionnaire. As a matter of fact, the different profiles identified represented the different value patterns characterizing the sample population.

LPA pertains to the broader category of Finite Mixture Models (FMMs). The main difference between FMM and other clustering algorithms is that the former offers a model-based clustering approach that obtains clusters using a probabilistic model that describes the distribution of data. Hence, instead of finding clusters with some arbitrarily chosen distance measure, it employs a model that describes the distribution of the data of interest and, according to this model, it assesses the probabilities that some cases are members of certain latent profiles (Grün & Leisch, 2008). Another difference is that LPA can be considered flexible and precise, disclosing unexplained heterogeneity that might be overlooked or only partially disclosed by other clustering techniques (Gray, 2019), such as K-Means and Hierarchical clustering, which could have been unreliable for the purposes of this research.

FMM delivers a probabilistic representation of heterogeneity in a determined number of latent classes (profiles in the case of LPA) (Deb, 2008). The number of profiles must be specified before running the analysis. Indeed, in order to find the optimum number of profiles for a specific study, it is necessary to conduct multiple tests, every time hypothesizing a different number of profiles and then compare the model parameters obtained. In this research, different models have been tested in R with the functions *tidyLPA* and *dplyr*: the number of profiles of the models tested ranged from a minimum of 2 profiles to a maximum of 14 profiles. The solution chosen was a model with 9 different values profiles. Among these, 6 profiles showing interesting value patterns were selected for further investigations (more details about the model parameters and a justification of the choice of the 9-profile model will be provided in the following *Data Analysis Results* section).

Once obtained the value segments, the first Hypothesis was tested. First, a frequency analysis of the intentions to travel within Italy in the transitional phase was carried out for each of the 6 selected profiles. Then, cumulative percentages were computed: the percentages of respondents answering "Strongly disagree", "Disagree", or "Somewhat disagree" have been combined to form the "Negative Intentions" total percentage for each of the selected segments; by the same token, the percentages of respondents answering "Somewhat agree", "Agree", or "Strongly agree" have been combined to form the "Positive Intentions" total percentage

for each of the selected segments. The percentage of people answering "Neither agree nor disagree" was considered "Undecided Intentions". For each of the 6 profiles selected, these cumulative percentages were compared to the respective cumulative percentages of the whole sample, so that it was possible to assess whether Positive, Negative, or Undecided Intentions of people pertaining to a certain profile were above or below the sample average.

Finally, to answers Hypotheses 2-8, this study preferred to use Path analysis rather than Multiple Linear Regression, which is the technique usually chosen to test TPB (Fishbein & Ajzen, 2010). Path analysis is one of the main components of SEM and its purpose is to examine a set of relationships between one or more independent variables and one or more dependent variables, namely the outcome/response variables (Sturgis, 2016a). Differently from CFA, Path Analysis usually works with observed variables (Sturgis, 2016a); however, in this case, Path analysis and CFA were mixed together, since some of relations this study wanted to measure involved also latent variables. Path analysis was preferred over Multiple Linear Regression because it allowed to study at once direct and indirect effects of independent variables on the outcome variable, it ensured more flexibility, and it admitted convenient multi-group comparisons.

Path analysis is a methodology based on a causal interpretation of the relationships present in a pluri-equational regression model (Blalock, 1975; Duncan, 1966; Gallo, 1991). The hypotheses of causality are formulated on the basis of theoretical evaluations and must be validated by first defining the conceptual model. Once the model has been specified, path analysis can be used to verify the theory's ability to explain the structure of the data collected. It typically fits into the study of model-oriented causality (Gallo, 1991).

The variables that in a generic equation of the path analysis model have a coefficient other than zero belong to the group of direct causes of the dependent variable of that equation. The variables that through intermediate variables influence the dependent variable of an equation (direct causes of direct causes, for example) belong to the group of indirect causes (Gallo, 1991). Path Analysis results in Maximum Likelihood Estimates (Regression weights, Variances, Squared Multiple Correlations) that indicate whether the causal relationship between the variables considered is significant or not and how strong it is. In this research, three different Path models were designed using SPSS Amos and applied to gradually test Hypotheses 2, 3, 4, then 5, and lastly, 6, 7, 8. The first model was conceived to test the Theory of Planned Behavior, so only Intentions, Attitudes, Subjective Norms, and Perceived Behavior Control were included (see Appendix, *Figure A1*). Then, the Health Risk Perception construct was integrated in the second model to assess if its contribution was significant and if it increased the ability of the model to explain Intentions. The second model is illustrated in Appendix, *Figure A2*. In this model, as specified in the *Hypotheses and Conceptual Framework* section, Attitudes, Subjective Norms, and Perceived Behavioral Control (the predictors of TPB) were considered direct causes of Intentions, whereas the Perceived Health Risk was considered a direct cause of attitudes and an indirect cause of Intentions.

Finally, to test the last three hypotheses, the ten values of Schwartz were integrated within the model as background factor (*Figure 5*). In the last model, it can be observed that, on a higher level, the ten basic values are dived in four latent constructs representing the higher order values (C = Conservation, OC = Openness to Change, SE = Self-enhancement, ST = Self-transcendence). Then, a wider latent factor called "Values" combines all the four higher order values. This SEM model was designed to evaluate the impact that values altogether have on the explanation of the variance in intentions to travel within Italy in the transitional phase. The causal relationships between the four higher order values and the three determinants of behavior were not considered separately because the results would have been multiplied, hence too noisy and confusing. Therefore, the comprehensive effect of Values is investigated. Furthermore, this last model was applied both to the entire sample and to the segments extracted through the LPA via a multi-group Path analysis, which served to verify whether the influence of the predictors of the behavior was changing across people who prioritized different higher order values.

Figure 5 presents the third model and highlights the causal relationships that have been designed to test the hypotheses of the present research.



Figure 5. Path Analysis Model 3: TPB + Perceived Health Risk + Schwartz's Values

Data Analysis Results

5.1 Dataset Preparation

A Missing Value Analysis was the first analysis carried out to filter out cases that provided flawed responses. It emerged that 854 answers were largely incomplete; thus, they were removed from the dataset because they could not be useful for further examination. As a matter of fact, many respondents gave up the survey at an early stage. Eventually, the dataset employed for further investigations consisted of 1014 valid answers, which was still a satisfying sample size.

5.2 Descriptive Statistics

Next, descriptive statistics and visualizations were performed to have a clearer sense of the data. The most relevant results are summarized in *Figure 6* and *Table 2*.



Figure 6. Distribution of intentions to travel within Italy in the transitional phase

Across the sample, intentions were clearly left-skewed, as *Figure 6* shows. We can observe a strong tendency towards indecision, slightly positive, or positive responses to the question: "Do you intend to travel within Italy in the transitional phase?". This partly confirms Italian media information (QuiFinanza, 2020) about a

general hesitation of people to go on vacation after the (first) peak of the pandemic, although showing a more confident trend towards the positive decision to travel. Indeed, only 14.6% of the respondents said that they were not considering going on vacation in Italy in the next 6 months. However, compared to the percentage of people that travelled domestically in 2018 and 2019 (91.8%), this result shows a strong negative change of direction for 2020.

Descriptive Statistics	Negative Intentions (N=148)		Positive Intentions (N=587)		Undecided Intentions (N=279)	
	Mean	Std Dev	Mean	Std Dev	Mean	Std Dev
Attitudes	3.84	1.17	4.97	1.16	4.47	1.02
Subjective Norms	3.75	1.06	5.16	0.80	4.28	0.60
Perceived Behavioral Control 1 – Financial Resources	3.48	1.57	4.89	1.31	4.04	1.13
Perceived Behavioral Control 2 – Time Resources	3.76	1.55	5.22	1.09	4.25	1.00
Perceived Health Risk	3.58	1.32	3.08	1.38	3.61	1.01
Age Profile	3.81	1.30	3.72	1.35	3.78	1.36
Gender	1.53	0.50	1.50	0.50	1.54	0.50
Macro-region	2.92	1.35	2.55	1.30	2.76	1.36
Education	2.41	0.63	2.38	0.65	2.42	0.68

Table 2. Descriptive Statistics divided according to Intentions to Travel within Italy in the next 6 months *Note:* Attitudes, Subjective Norms, Perceived Behavioral Control (1&2), Perceived Health Risk were measured on a scale from 1 to 7 (from Strongly disagree to Strongly agree); Age was measured on a scale from 1 to 5 (1=18-24; 2=25-34; 3=35-44; 4=45-54; 5=55+); Gender took value 1 for males and 2 for females; Macro-region was measured on a scale from 1 to 5 (1=North-west; 2=North-east; 3=Centre; 4=South; 5=Islands); Scores for Education could range from 1 to 4 (1=18-24 non-classified; 2=Up to end of secondary education; 3=University and higher; 4=Prefer not to say). Attitudes, Subjective Norms, and Perceived Health Risk consist of the mean of the observed variables used to measured them.

Furthermore, a comparison between the most interesting responses (for the purpose of this research) of people with different intentions to travel within Italy in the transitional situation was carried out. *Table 2* shows that people having different intentions to travel within Italy in the transitional phase were mainly differentiated by Attitudes, Subjective Norms, and Perceived Behavioral Control: the more positive the intention, the more positive the three predictors of behavior. It can also be noticed that Perceived Health Risk is slightly lower for

people who have positive intentions to travel, meaning that, compared to the other two groups, for them is less likely that their travelling activity will lead to infect themselves or other people. On the other hand, people with different intentions to travel seem to be balanced in terms of gender, age, and education. Indeed, there is an equilibrium between male and female respondents, who are on average in their 40s and have achieved up to a secondary education or a university degree.



Figure 7. Distribution of Residential Areas Across Different Intentions Groups

Lastly, looking at the residential area, it is fair to say that people from the South and the Islands tend to be more cautious with the decision to go on vacation (*Figure 7*). As a matter of fact, when considering negative intentions to go on vacation, it can be observed that most respondents (27%) come from the Southern part of Italy and those from the Islands consist of 12.8%. This changes completely when considering positive intentions to go on vacation: Southern respondents decrease to 21.8% and the number of residents from the Islands that would like to travel drops to 6.6%.

These considerations are also confirmed by one-way ANOVA analysis: Attitudes, Subjective Norms, Perceived Behavioral Control, Perceived Health Risk, and Residential Area statistically differ in terms of the Intentions to travel (p < 0.01), whereas Age, Education, and Gender do not (p > 0.01).

5.3 Reliability Analysis

Cronbach's alpha was computed for the constructs measured by the 13 items independently designed by the author and inserted in the general survey. Therefore, we are talking about the three antecedents of behavior and the perceived health risk construct. This analysis was useful to assess the internal consistency and to understand whether the latent variables (the four constructs) were effectively measured by the items drafted for the survey. The results are presented in *Table 3*.

Reliability Statistics	Cronbach's Alpha	N of Items
Attitudes	0.893	4
Subjective Norms	0.783	4
Perceived Behavioral Control	0.671	2
Perceived Health Risk	0.877	3

Table 3. Reliability Statistics of Attitudes, Subjective Norms, PBC, and Perceived Health Risk

Table 3 shows good alpha coefficients for Attitudes and Perceived Health Risk, which are very close to the 0.9 threshold of excellence. Subjective Norms also present a fairly good Cronbach's alpha value, whereas, as expected, Perceived Behavioral Control shows a still sufficient, but not satisfying, alpha coefficient. This is caused by the fact that the two items selected to measure PBC (see *4.3 Survey and Instruments*) were not consistent with each other, one measuring the perceived impact of financial resources on the decision to travel, and the other measuring the perceived impact of time resources on the decision to travel. It is easy to guess that these two control factors have not that much in common with each other, hence they are not good items to measure a general PBC construct. As a matter of fact, their effect on the intentions to travel in Italy in the transitional phase has been considered separately in the following analyses.

Furthermore, when considering excluding items within Attitudes, Subjective Norms, and Perceived Health Risk, Cronbach's alpha did not manifest any remarkable improvement (*Table 4*). Therefore, all the items were kept.

	Cronbach's Alpha if Item Deleted		Cronbach's Alpha if Item Deleted		Cronbach's Alpha if Item Deleted
ATT1	0.860) SN1	0.730	RISK1	0.810
ATT2	0.850) SN2	0.694	RISK2	0.867
ATT3	0.872	2 SN3	0.694	RISK3	0.796
ATT4	0.868	3 SN4	0.797		

Table 4. Reliability Statistics - Effect of exclusion of items on constructs' alpha

5.4 PVQ Confirmatory Factor Analysis

As we have previously seen, Schwartz's PVQ 21 items (Schwartz et al., 2001) were integrated as part of the socio and psychographic items representing the basic background information of Prof. Glückstad's survey section. The items assessing value inclinations have been reported from existing works (ESS, round 9, 2018), and the good internal consistency of these questions has been already proven (Bamberg, Herrmann, Kynast, & Schmidt, 2001). Hence, it was decided to proceed directly with the Confirmatory Factor Analysis (CFA), in order to evaluate to what extent the sample data was fitting Schwartz's PVQ measurement model.

In R, the PVQ model applied to ESS (Schwartz, 2003) was first described and linked to the sample data. Then, using the function *lavaan*, a summary of measures of fit was obtained; the most interesting results are presented in *Table 5*. *Table 5* specifies that the p-value of the Chi-square test is significant. Statistical significance for the test would indicate poor fit of the model to the data because the null hypothesis states that the model fits perfectly. Having a significant p-value, we must reject the null hypothesis. However, it must be noticed that this measure is sensitive to sample size: with larger samples it is more likely to obtain statistical significance, as in this case (Crowson, 2016). Therefore, it is good practice to evaluate other measures of fit.

χ^2	df	CFI	TLI	SRMR	RMSEA (90% CI)
881.840	144	0.891	0.840	0.067	0.071 (0.067; 0.076)

Note. For χ^2 value, p < 0.001. df = degrees of freedom; CFI = Comparative Fit Index; TLI = Tucker-Lewis Index; SRMR = Standardized Root Mean Square Residual; RMSEA = Root Mean Square Error of Approximation; CI = Confidence Interval.

Looking at the Comparative Fit Index (CFI) and the Tucker-Lewis Index (TLI), the values obtained show a goodness of fit because they are very close to the cut-off figure, which is ≥ 0.9 for both of them (Kline, 2016).

Furthermore, the goodness of fit is confirmed also by the Standardized Root Mean Square Residual (SRMR) and the Root Mean Square Error of Approximation (RMSEA) indexes, which are below the acceptable 0.08 threshold (Hooper, Coughlan, & Mullen, 2008). Overall, we can conclude that sample data was fitting the PVQ measurement model fairly good.

Finally, with the same R function, confirmatory factor scores were extracted. Indeed, SEM is also useful to "assign scores to sample units in the latent dimensions based on their responses. This score (also known as a "Factor Score") is a numerical value that indicates a person's relative spacing or standing on a latent variable" (Rizopoulos, 2006, p. 2). Factor scores are computed for all the records in the database and for each dimension considered, and they can be valuable for further analysis; often, they are used to classify subjects, as in the current case. As a matter of fact, factor scores have formed the dataset applied to carry out the following cluster analysis.

Both factor scores and cluster analysis do not find their foundation in pre-determined hypotheses, but they are rather built from survey responses. Being identified *a posteriori* from the data collected and not *a priori* from theoretical suggestions, they are generally considered more reliable (Hu, 2002). However, they can also be subjected to local biases (culture, habits, etc.).

5.5 Latent Profile Analysis

Cluster analysis has been conducted through a latent variable modeling technique, called Latent Profile Analysis (LPA). LPA does not provide a single model with a specified optimum number of profiles as a result; however, it is possible to test several models with different numbers of profiles and evaluate which is the best-fitting for the case of study. This procedure has been followed also by this research: first, models with a number of classes ranging from 2 to 14 have been estimated in R through the function *tidyLPA*. Then, measures of fit were computed and analyzed (*Table 6*).

The model eventually chosen was the one with 9 classes. As a matter of fact, it is the model with the lowest AIC value. When choosing the best number of classes of a latent class or profile analysis, we generally look

Classes	LogLik	AIC	BIC	SABIC	Entropy	BLRT_val	BLRT_pvalue
2	-1544.1	3350.25	3994.99	3578.92	0.729	682.4322	0.0099
3	-1404.8	3203.58	4173.15	3547.46	0.698	278.6726	0.0099
4	-1314.5	3155.07	4449.47	3614.16	0.751	180.5069	0.0099
5	-1244.6	3147.2	4766.43	3721.5	0.747	139.8687	0.3762
6	-1068.2	2926.4	4870.46	3615.9	0.769	352.8041	0.0099
7	-968.54	2859.08	5127.97	3663.79	0.777	199.3175	0.0099
8	-988.55	3031.1	5624.81	3951.01	0.796	-40.0126	0.9307
9	-821.15	2828.31	5746.85	3863.43	0.808	334.7884	0.0099
10	-788.47	2894.94	6138.32	4045.28	0.834	65.3630	0.9307
11	-725.11	2900.22	6468.43	4165.77	0.858	126.7192	0.4059
12	-643.74	2869.47	6762.5	4250.22	0.865	162.7525	0.0495
13	-590.61	2895.22	7113.08	4391.18	0.887	106.2514	0.1881
14	-563.58	2973.16	7515.85	4584.32	0.894	54.0653	0.1485

for the lowest values of AIC and BIC. However, in this case, they are contrasting: 9-class model's AIC is the lowest, but 9-class model's BIC is not. Therefore, it is recommended to compare other values.

Table 6. Fit values for LPA 2:14 class models

It can be observed that the model with 9 profiles has also the lowest log-likelihood associated with a significant Bootstrap Likelihood Ratio Test (BLRT p-value <0.01). Indeed, lower log-likelihood values are preferred, and BLRT p-value should be significant in order to consider choosing a model. Finally, the 9-class model was also selected because it was the one with the lowest number of classes that had an entropy value above the 0.8 cutoff. In fact, an LPA output is an estimate of the probability that a respondent falls into each of the profiles selected. This information is best outlined by the entropy value, that takes value 0 when the probability to pertain to a class are equal for all respondents, and value 1 when all subjects have the maximum probability to belong to one class (Bock, 2020). Entropy can be useful to exclude models when its value is below the acceptable threshold of 0.8 (Bock, 2020). Finally, the choice of the 9-profile model was supported by the fact that none of the 9 segments included less than 4% of the respondents. Therefore, all the profiles reached a valid size (Ma & Lai, 2018). At this point, the 9 profiles selected have been visualized to identify significant differential value patterns. *Figure 8* and *Figure 9* show the distribution of the standardized means of the 10 values' factor scores across the 9 segments extracted. In both graphs, we can observe Conservation higher order values in yellow shades, Openness to Change in green shades, Self-enhancement in red shades, and Self-transcendence in blue shades.



Figure 8. Distribution of the standardized value means of CFA factor scores across segments 1-4



Figure 9. Distribution of the standardized value means of CFA factor scores across segments 5-9

The literature points out that people may be characterized by several value priorities, although usually a dominant value pattern can be observed (Bardi & Schwartz, 2003). Likewise, segments identified through LPA generally show one or two higher order values that play a dominant role within the segment.

Each segment is characterized as follows:

- Segment 1 presents high figures for each Schwartz's value. However, a remarkable dominance of the Conservation higher order value can be detected.
- Segment 2 presents positive coefficients only for Self-transcendence; all the other values coefficients fall below 0.
- Segment 3 presents very high figures for all the values represented. However, Openness to Change and Self-enhancement are dominant compared to the other higher order values.
- Segment 4 shows a prevalence of Self-transcendence and Conservation over the other higher order values. High Self-direction should be taken into consideration.
- 5) Segment 5 does not present any significant dominance of higher order values. However, it can be noticed that Hedonism and Power are prevailing over the other values.
- 6) Segment 6 exhibits a clear preponderance of the Self-enhancement higher order value.
- Segments 7 and 8 display very low figures for almost all the values, which fall far below 0 compared to the other segments.
- Segment 9 shows a predominance of the Openness to Change higher order value. Self-transcendence and Self-enhancement are also quite high, but not as much as Openness to Change.

Having this scenario, a choice of only interesting segments was opted for. Indeed, 6 profiles were selected for further examination. The criterium employed to determine which were the most interesting segments was based on the differential value patterns shown in *Figure 8* and *Figure 9* and on Schwartz's conceptual framework (2012). Indeed, it was decided to keep profiles representing the predominance of each of the four higher order values: Segment 1 accounted for Conservation, Segment 2 for Self-transcendence, Segment 6 for Self-enhancement, and Segment 9 for Openness to Change. Furthermore, another noteworthy pattern emerged from

Segment 3 and Segment 4: the former was selected to represent Personal Focus, typical of people prioritizing Openness to Change and Self-enhancement, whereas the latter describes Social Focus, characterizing people who favor Conservation and Self-transcendence (Schwartz, 2012). A summary of the segments selected and of the personas represented is exhibited in *Table 7*.

	Segment 1 Conservation	Segment 2 Self- transcendence	Segment 6 Self- enhancement	Segment 9 Openness to Change	Segment 3 Personal Focus	Segment 4 Social Focus
	N=79	N=152	N=209	N=127	N=48	N=175
Persona	A traveller looking for safe experiences that preserve the status quo and do not harm or upset others	A traveller looking for conscious experiences that respect other travellers, communities at the destination, and the planet	A traveller looking for prestigious experiences that can enhance his/her status	A traveller looking for exciting and fun experiences that can valorize his/her personal growth	A traveller who values his/her own personal interests more than those of other people or of the planet	A traveller who values other people and the planet and who is more projected on the community rather than on himself/ herself
Age	Higher % than sample average of 35-44	Higher % than sample average of 55+	Higher % than sample average of 35-44 and 55+	Higher % than sample average of 25-34 and 45-54	Higher % than sample average of 18-24 and 35-44	Slightly higher % than sample average of 18-24 and 55+
Gender	Slightly more women than sample average	Similar to sample average	Slightly more women than sample average	More men than sample average	Genders are equally represented	More men than sample average
Residential Area	Higher % than sample average in both North East and Centre	Higher % than sample average in the North West	Higher % than sample average in the Islands	Higher % than sample average in the South and Islands	Higher % than sample average in the Centre and Islands	Higher % than sample average in the North East
Education	University and higher	Up to secondary education and University and higher	University and higher	University and higher	More University and higher than sample average	More Up to secondary education than sample average
Household Income (when stated)	25,000 to 39,999€/yr	15,000 to 39,999€/yr	25,000 to 39,999€/yr	20,000 to 29,999€/yr	25,000 to 29,999€/yr	20,000 to 44,999€/yr

Table 7. Personas selected for further analysis

5.6 Travelling Intentions

To test Hypothesis 1, a frequency analysis of the intentions to travel within Italy in the transitional scenario was performed. The percentage of people answering from "Strongly disagree" to "Strongly agree" was considered for each of the profiles. Then, cumulative percentages were calculated: "Strongly disagree", "Disagree", and "Somewhat disagree" together generated the percentage of Negative Intentions to travel for each persona; similarly, "Strongly agree", "Agree", and "Somewhat agree" generated the percentage of Positive Intentions to travel for each persona. People answering "Neither agree nor disagree" were classified as Undecided Intentions to travel (*Table 8*).

	Concernation	Self-	Self-	Openness to	Personal	Social
	Conservation	Transcendence	Enhancement	Change	Focus	Focus
Negative Intentions	19.9%	13.6%	14.7%	14.7%	21.8%	12.8%
Undecided	27.1%	24.9%	30.2%	24.9%	23.6%	26.6%
Positive Intentions	53.0%	61.5%	55.1%	60.4%	54.7%	60.6%

Table 8. Distribution of intentions to travel within Italy in the transitional phase across value segments These average percentages of Negative, Positive, and Undecided Intentions for each of the 6 profiles were compared to the respective average percentages of the entire sample, which are presented in *Table 9*.

	Whole Sample
Negative Intentions	14.6%
Undecided	27.5%
Positive Intentions	57.9%

Table 9. Distribution of intentions to travel within Italy in the transitional phase within the whole sample

We can observe that Conservation and Personal Focus have a higher percentage of Negative Intentions to travel and a lower percentage of Positive Intentions to travel than the general sample. Self-enhancement shows a similar pattern, but with percentages more comparable to those of the whole sample. Openness to Change presents a marginally higher percentage of Negative Intentions than the whole sample, but it also exhibits a

much higher percentage of Positive Intentions to travel. On the other hand, Self-transcendence and Social Focus show higher percentages of Positive Intentions and lower Negative Intentions compared to the average of the sample. This scenario partly confirms the first Hypothesis, presenting people that prioritize Self-transcendence and Openness to Change as profiles that are more likely to travel within Italy in the transitional phase, compared to Self-enhancement and Conservation, which are less likely to travel in the uncertain situation. Furthermore, people with a Social Focus tend to travel more than people with a Personal Focus in the transitional scenario.

It should be recalled that Personal Focus consists of Openness to Change and Self-enhancement, whereas Social Focus comprises Conservation and Self-transcendence. Segment 3 (Personal Focus) presents very high coefficients for Openness to Change and Self-enhancement; however, it must be noticed that there are also considerably high coefficients for Conservation, which might have had an impact on the negative tendency to travel of the segment. Furthermore, Segment 4 (Social Focus), besides Conservation and Self-transcendence, exhibits a remarkable figure also for Self-direction, which might have helped boost the positive intentions to travel for that segment. Additionally, this result might be justified by the fact that the travelling activity this early summer was socially accepted and well regarded among peers. Indeed, travelling in the transitional scenario was also favored by the Italian government that provided a bonus to travel for people who could not afford it, with the purpose of relaunching the tourism sector, hit by a severe economic crisis. On the other hand, people having a Personal Focus might be less inclined to travel if they perceive it as a risky activity, disregarding what the others think.

However, it can be easily pointed out that the differences between the percentages of the segments and those of the whole sample were not that remarkable. To prove the statistical validity of the differences in proportions across clusters, one-way ANOVA analyses were performed. These analyses evaluate the effect of a factor, that in this case is the belonging to contrasting value segments, on a dependent variable, namely the intentions to travel within Italy in the transitional scenario. Therefore, it was tested if the differences in intentions among individuals pertaining to Conservation and Openness to Change, to Self-transcendence and Self-enhancement, and to Personal Focus and Social Focus, were statistically significant. However, ANOVA analyses did not produce any significant result; hence, Hypothesis 1 cannot be statistically confirmed. This indicates that prioritizing contrasting higher order values does not directly imply a statistically significant difference in terms of intentions to travel within Italy in the transitional phase.

5.7 Path Analyses

To test Hypotheses 2-8 this study has recourse to Path analysis, one of the main Structural Equation Modeling techniques.

	DV 1 st level	DV 2 nd level	DV 3 rd level	IVs 1 st level	IVs 2 nd level	IVs 3 rd level	N
Model 1 Figure A1	Intentions	-	-	Attitudes, Subjective Norms, PBC1&2	-	-	1014
Model 2 Figure A2	Intentions	Attitudes	-	Attitudes, Subjective Norms, PBC1&2	Perceived Health Risk	-	1014
Model 3 Figure A3	Intentions	Attitudes	Attitudes, Subjective Norms, PBC 1&2	Attitudes, Subjective Norms, PBC1&2	Perceived Health Risk	Values	1014

Note. DV = Dependent Variable; IVs = Independent Variables.

Table 10. Path analysis models overview

This technique allows to investigate causal relationship between one or more dependent variables (Intentions, but also Attitudes, Subjective Norms, and Perceived Behavioral Control, depending on the model considered) and several independent variables (Attitudes, Subjective Norms, Perceived Behavioral Control, Perceived Health Risk, and Values, depending on the model considered). An overview of the three different models is presented in *Table 10*.

The first step was to test the Theory of Planned Behavior alone (see Appendix, *Figure A1*). This means that the effect of Attitudes, Subjective Norms, and Perceived Behavioral Control (1&2) on the Intentions to travel within Italy in the transitional phase was investigated. The results of the first Path analysis model are presented in *Table 11*. The model fit summary of this first Path analysis was overall satisfying. The absolute fit index RMSEA was equal to 0.047, which is below the optimum level of 0.050, showing an adequate overall goodness of fit. The increment fit indexes were also sufficiently good, although not excellent because they did not exceed

0.90: CFI = 0.89, TLI = 0.85, NFI = 0.87, and RFI = 0.82. Lastly, the χ^2 test was significant (p <0.01), suggesting a badness of fit; however, as we have previously seen, this test is sensitive to sample size.

The R^2 , the statistical percentage of the variance in the dependent variable that is comprehensively explained by all the independent variables, was $R^2 = 0.42$, meaning that the 42% of the variance in the intentions to travel within Italy in the transitional phase was explained by the three predictors of behavior. The relative contributions to the explanation of the Intentions are shown in *Table 11*.

			Estimate (B)	Standardized Estimate (β)	S.E.	C.R.	P-value
Intentions	÷	Attitudes	0.245	0.212	0.031	7.811	***
Intentions	←	Subjective Norms	0.884	0.585	0.052	17.028	***
Intentions	←	PBC1	0.167	0.180	0.023	7.124	***
Intentions	÷	PBC2	0.253	0.254	0.026	9.923	***

Note. *** indicates that p<0.01.

Table 11. Regression weights of Path analysis Model 1: TPB

It can be examined that all the three antecedents of behavior have a significant and positive effect on Intentions, indicating that an increase in one of the antecedents implies an increase in Intentions. Thus, Hypotheses 2, 3, and 4 are confirmed. Furthermore, Subjective Norms represent the predictor that has the highest impact, with a beta coefficient equal to 0.585. These are followed by Perceived Behavioral Control 2 (time control factor, with a $\beta = 0.254$), Attitudes ($\beta = 0.212$), and lastly by Perceived Behavioral Control 1 (financial control factor, $\beta = 0.18$). PBC takes lower values when volitional control is higher (Fishbein & Ajzen, 2010); therefore, it seems that Italians perceived to have more control over their financial resources than over their time availability to go on vacation.

Subsequently, the second step was to test the impact that Perceived Health Risk had on the TPB model and on Attitudes in particular (see Appendix, *Figure A2*). Indeed, this study has hypothesized that Perceived Health Risk has a direct negative impact on Attitudes. To assess this assumption, the regression weights of the second Path analysis model should be analyzed (*Table 12*). Here too, it can be observed that all the independent variables under investigation have a significant impact on their respective dependent variables. Thus, as

hypothesized, Perceived Health Risk has a significant negative effect on Attitudes (B = - 0.161), whereas Attitudes (B = 0.238), Subjective Norms (B = 0.791), and Perceived Behavioral Control (PBC1 B = 0.167 and PBC2 B = 0.253) have a significant positive effect on Intentions. Hence, Hypothesis 5 is verified. Again, Subjective Norms represent the most influent determinant of behavior (β = 0.584) and PBC 2 (time resources; β = 0.253) is affecting the intentions to travel more than PBC 1 (financial resources; β = 0.18).

			Estimate (B)	Standardized Estimate (β)	S.E.	C.R.	P- value
Attitudes	←	Perceived Health Risk	-0.161	-0.179	0.032	-5.094	***
Intentions	←	Attitudes	0.238	0.214	0.030	7.935	***
Intentions	←	Subjective Norms	0.791	0.584	0.043	18.205	***
Intentions	←	PBC1	0.167	0.180	0.023	7.128	***
Intentions	←	PBC2	0.253	0.253	0.026	9.910	***

Note. *** indicates that p<0.01.

Table 12. Regression weights of Path analysis Model 2: TPB & Perceived Health Risk

However, the collective impact that these four constructs have on explaining the variance in Intentions is not different from the first Path analysis model ($R^2 = 0.42$). This means that the effect of Perceived Health Risk, although significant, is completely mediated by the Attitudes towards travelling within Italy in the transitional scenario. Considering the summary of fit measures, we have again a general goodness of fit. Also in this case, the χ^2 test is significant, implying a badness of fit, however, all the other indexes indicate even better goodness of fit compared to the ones of the previous model. In fact, RMSEA = 0.037, CFI = 0.90, TLI = 0.89, NFI = 0.88, and RFI = 0.85.

Finally, the last step was to include Values as background factor in the third SEM model and evaluate whether they contributed to the explanation of Intentions and their predictors (see Appendix, *Figure A3*). *Table 13* shows that once again all the variables considered in the Path analysis had a significant effect on their respective outcome variables. It can be noted that Schwartz's Values had a direct positive significant impact on all the three antecedents of behavior (on Attitudes: B = 0.176; on Subjective Norms: B = 0.633; on Perceived Behavioral Control: PBC1 B = 0.4 and PBC2 B = 0.637), confirming Hypotheses 6, 7, and 8. Furthermore, the direct negative effect of Perceived Health Risk (B = -0.153) on Attitudes and the positive direct effect of Attitudes (B = 0.254), Subjective Norms (B = 0.797), and Perceived Behavioral Control (PBC1 B = 0.167 and PBC2 B = 0.249) on Intentions were verified also in this case. Again, it was Subjective Norms the predictor accounting the most in the explanation of the variance in Intentions (β = 0.576). Similarly, also in this case, time availability (PBC2 β = 0.245) was more influential than financial availability (PBC1 β = 0.179) for the decision to travel.

			Estimate (B)	Standardized Estimate (β)	S.E.	C.R.	P-value
Attitudes	←	Values	0.176	0.085	0.077	2.296	**
Subjective Norms	÷	Values	0.633	0.360	0.077	8.252	***
PBC1	←	Values	0.400	0.154	0.094	4.242	***
PBC2	←	Values	0.637	0.269	0.890	7.133	***
Attitudes	÷	Perceived Health Risk	-0.153	-0.178	0.03	-5.081	***
Intentions	←	Attitudes	0.254	0.216	0.032	7.991	***
Intentions	÷	Subjective Norms	0.797	0.576	0.045	17.752	***
Intentions	←	PBC1	0.167	0.179	0.023	7.115	***
Intentions	←	PBC2	0.249	0.245	0.026	9.667	***

Note. *** indicates that p<0.01. ** indicates that p<0.05.

Table 13. Regression weights of Path analysis Model 2: TPB & Perceived Health Risk & Values

The global effect that all the variables considered have on the explanation of the variance in the main dependent variable, namely Intentions to travel within Italy in the transitional phase, is slightly greater than the one in the other two Path analysis models: here, R^2 is equal to 0.43, showing a significant 0.01 increase. Of course, this does not represent a remarkable improvement, but it still proves that Values play a significant role when included in the TPB model as background factor; however, their impact is largely, but not completely, mediated by the three predictors of behavior.

Once again, the goodness of fit was acceptable, although less solid than in the other two cases. In fact, we observe an improvement in the RMSEA fit index (RMSEA = 0.03), whereas all the increment fit indexes

present lower values: CFI = 0.87, TLI = 0.85, NFI = 0.80, and RFI = 0.78. Finally, the chi-squared test was significant also in this case.

5.8 Cluster Comparisons

In the last part of the data analysis, a multi-group Path analysis was performed by applying the third SEM model to the sub-samples representing the different value segments extracted. These cluster comparisons aimed at identifying whether the causal relationships between the variables of interest changed across subjects who prioritize different higher order values.

Table 14 presents the first comparison between Conservation and Openness to Change value segments (see also Appendix, *Figure A4 & A5*). The two higher order values represented are placed in two opposite sides of the value continuum, hence they should differ in their motivational goals (Schwartz, 2012). Indeed, it can be noted that Attitudes do not significantly contribute to the explanation of Intentions in the case of Openness to Change, whereas they have a positive significant effect (B = 0.61) on Intentions in the case of Conservation.

			Conservation			Openness to Change			
			Estimate (B)	Standardized Estimate (β)	P-value	Estimate (B)	Standardized Estimate (β)	P- value	
Attitudes	←	Values	0.328	0.211	0.102	0.021	0.012	0.903	
Subjective Norms	←	Values	0.845	0.426	***	0.443	0.386	***	
PBC1	←	Values	0.153	0.064	0.597	0.169	0.092	0.337	
PBC2	←	Values	0.838	0.390	***	0.467	0.260	***	
Attitudes	←	Perceived Health Risk	-0.087	-0.116	0.335	-0.206	-0.201	**	
Intentions	←	Attitudes	0.610	0.454	***	0.119	0.120	0.117	
Intentions	←	Subjective Norms	0.574	0.547	***	0.700	0.455	***	
Intentions	←	PBC1	0.226	0.261	***	0.328	0.343	***	
Intentions	÷	PBC2	0.221	0.221	***	0.428	0.433	***	

Note. *** indicates that p<0.01. ** indicates that p<0.05.

Table 14. Regression weights of Path analysis 3 of Conservation vs Openness to Change clusters

Furthermore, Perceived Health Risk seems to be significant only for the Openness to Change segment (B = -0.206), contrary to what it was expected. As a matter of fact, individuals pertaining to this segment valorize their personal growth and they tend to be more risk-takers than others. However, it can be observed that within the segment under consideration (see *Table 7*) there is a higher percentage of respondents from the South of Italy and the Islands: the region of origin might in fact have played an important role in determining a higher concern of getting infected or transmit the infection by travelling in other areas of Italy. During the spring, the virus hit more severely the North of Italy and, luckily, did not cause the collapse of the healthcare system in the South and the Islands. This might have led individuals from these areas to be more cautious, in order to avoid repeating what happened in the North in the spring 2020, especially if we consider that the healthcare system in those regions is regarded as more fragile.

Nevertheless, the impact of the other antecedents of behavior is positive and significant in both cases. The segments are also comparable in terms of the effect that Values have on the predictors of behavior: in both scenarios, Values significantly impact only Subjective Norms (respectively B = 0.845 and B = 0.443). Interestingly, for people who prioritize Conservation, Values influence Subjective Norms to a greater extent than for subjects who prioritize Openness to Change, showing a stronger value disposition towards the valorization of other people's opinion, as the theory would suggests (Schwartz, 2012). Moreover, it is precisely Subjective Norms that, in both clusters (respectively $\beta = 0.574$ and $\beta = 0.455$) has the highest impact on Intentions, among the other predictors of behavior. However, the regression weight of Subjective Norms is greater in the case of Openness to Change (B = 0.7), possibly because, in that case, Attitudes do not significantly contribute to the explanation of Intentions. Indeed, PBC1 and PBC2 regression weights of are also higher for the second cluster.

Next, the second comparison between Self-transcendence and Self-enhancement higher order values, which stand on the opposite sides of the value continuum as well, is presented in *Table 15* (see also Appendix, *Figure A6 & A7*). It can be immediately observed that in the first cluster considered (Self-transcendence) the impact that Values have on the antecedents of behavior is not significant in any case. To understand why, it may be useful to recall *Figure 8*: Segment 2 was characterized by a dominance of Self-transcendence values, even

though the corresponding coefficients were rather low compared to those of the other segments. Moreover, all the other values coefficients fell below 0, indicating that people within that segment are not strongly characterized by Schwartz's values. This perhaps has jeopardized the comprehensive effect of Values on the three determinants of behavior.

Furthermore, in the first case, Perceived Health Risk does not have a significant impact on Attitudes either. This may be due to the fact that usually people who prioritize Self-transcendence do not tend to be risk adverse. On the bright side, the antecedents of behavior (Attitudes, Subjective Norms, and Perceived Behavioral Control 2) do have a positive significant effect on the response. Among them, it is Subjective Norms that by far has the highest impact on Intentions ($\beta = 0.525$).

			S	elf-transcendence			Self-enhancement	
			Estimate (B)	Standardized Estimate (β)	P-value	Estimate (B)	Standardized Estimate (β)	P-value
Attitudes	←	Values	-0.234	-0.090	0.382	0.295	0.111	0.183
Subjective Norms	←	Values	0.184	0.091	0.388	1.290	0.521	***
PBC1	÷	Values	0.519	0.156	0.121	1.197	0.291	***
PBC2	←	Values	0.047	0.016	0.870	1.137	0.309	***
Attitudes	←	Perceived Health Risk	-0.116	-0.143	0.106	-0.145	-0.202	**
Intentions	←	Attitudes	0.211	0.171	**	0.116	0.083	0.134
Intentions	←	Subjective Norms	0.837	0.525	***	0.974	0.651	***
Intentions	←	PBC1	0.009	0.009	0.894	0.201	0.223	***
Intentions	←	PBC2	0.267	0.257	***	0.282	0.289	***

Note. *** indicates that p<0.01. ** indicates that p<0.05.

Looking at the Self-enhancement cluster, it can be noticed that in this case Values have a significant effect on Subjective Norms (B = 1.29) and on Perceived Behavioral Control (on PBC1: B = 1.197; on PBC2: B = 1.137), but not on Attitudes. Moreover, Perceived Health Risk plays a significant role in the determination of Attitudes

Table 15. Regression weights of Path analysis 3 of Self-transcendence vs Self-enhancement clusters

(B = -0.145). This result was quite expected since individuals characterized by Self-enhancement values are more inclined to be risk adverse. Finally, it is worth observing that all predictors of behavior, except for Attitudes, have a positive significant effect on the Intentions to travel within Italy in the transitional phase, with Subjective Norms prevailing once again ($\beta = 0.651$).

Lastly, the results of the third comparison between Personal Focus and Social Focus clusters are presented in *Table 16* (see also Appendix, *Figure A8 & A9*). One may notice that the Personal Focus segment presents only two constructs that have a significant impact within the model: these are Attitudes (B = 0.644) and Subjective Norms (B = 1.048), which significantly impact the Intentions to travel within Italy in the transitional scenario. Interestingly, this is the only case in which Attitudes are the most influencing predictor of behavior (β = 0.554). All other variables do not produce any significant impact on their dependent variables. A possible justification may be found in the sample size: indeed, this was the smallest segment, counting only 48 responses. Moreover, as *Figure 8* illustrates, all the values coefficients within Segment 3 were remarkably high, potentially causing problems of statistical significance.

				Personal Focus			Social Focus	
			Estimate (B)	Standardized Estimate (β)	P-value	Estimate (B)	Standardized Estimate (β)	P-value
Attitudes	←	Values	-0.129	-0.059	0.711	0.475	0.233	**
Subjective Norms	←	Values	-0.053	-0.041	0.806	0.839	0.447	***
PBC1	←	Values	-0.546	-0.267	0.106	0.549	0.212	**
PBC2	←	Values	-0.462	-0.203	0.209	0.607	0.279	***
Attitudes	←	Perceived Health Risk	-0.183	-0.213	0.170	-0.222	-0.255	***
Intentions	←	Attitudes	0.644	0.554	***	0.312	0.247	***
Intentions	←	Subjective Norms	1.048	0.536	***	0.846	0.617	***
Intentions	←	PBC1	-0.165	-0.133	0.171	0.090	0.090	0.116
Intentions	←	PBC2	-0.100	-0.089	0.365	0.176	0.151	***

Note. *** indicates that p<0.01. ** indicates that p<0.05.

Table 16. Regression weights of Path analysis 3 of Personal Focus vs Social Focus clusters

On the other hand, by examining the Social Focus segment, it can be observed that all the relations considered (except for the effect of PBC1 on Intentions) are significant. Among the antecedents of behavior, Subjective Norms is both the one that is the most influenced by Values ($\beta = 0.447$) and the one that influences the most the Intentions to travel ($\beta = 0.617$). In this case, Perceived Health Risk has a statistically significant impact on the Attitudes (B = -0.222). Indeed, by looking again at *Figure 8*, we can see that Tradition and Universalism are the values with the highest coefficients: this might imply a greater attention towards the community and a feeling of concern about a potential spread of the virus through the travelling activity. This care about the others is also confirmed by the very high regression coefficient (B = 0.846) that Subjective Norms have on the Intentions to travel within Italy in the transitional scenario.

The last result adds up to the general emphasis given to Subjective Norms that can be observed across almost all the segments. This topic will be further explored in the *Discussion* section.

Discussion

6.1 Answers to the Research Questions

A comprehensive presentation of the findings of this study will be introduced in this section by providing a specific and critical answer to each of the research questions presented in the *Introduction*.

1) Do segments with different value priorities show different intentions to travel within Italy in the transitional phase (approximately the next six months)?

According to the literature, individuals who prioritize different values differ in their motivational goals and they tend to differ in their behavioral choices (Schwartz, 2012). Therefore, a travel alternative consistent with a subjective value disposition was expected to be favored compared to the opposite alternative. For their characteristics of risk avoidance and anxiety, individuals favoring Conservation and Self-enhancement, were expected to be less inclined to undertake an unpredictable activity, such as travelling within Italy in the transitional scenario. On the other hand, and for the opposite reasons, people prioritizing Openness to Change and Self-transcendence were expected to be more predisposed to travel in the uncertain situation caused by the pandemic.

This research found out that there seemed to be an inclination towards the supposed favored travel alternative of the different values segments (see *Table 8* and *Table 9*). As a matter of fact, individuals prioritizing Conservation and Self-enhancement exceeded the sample average in terms of negative intentions to travel within Italy in the transitional scenario. Conversely, subjects who valued more Openness to Change and Self-transcendence favored positive intentions to travel within Italy in the transitional positive intentions to travel within Italy in the transitional phase. However, only marginal differences in the intentions could be observed across contrasting segments; thus, the statistical validity to confirm that individuals with divergent value motivations differed in their intentions to travel was not proven.

A possible justification may be found in the distribution of values within the segments considered: as *Figure* 8 and *Figure* 9 show, all the clusters selected for further examination presented a dominance of some higher

order values, although none of those segments was firmly characterized by just one precise higher order value. In other words, the segments might not be so strongly characterized by the considered higher order values to statistically differ in their behavior, as the theory would suggest (Schwartz, 2012).

2) Among attitudes, perceived norms, and perceived behavioral control, which is the predictor of behavior that influences the most the intentions to travel within Italy in the transitional phase? Does it change across contrasting value segments?

In this case, the theory does not suggest any precise answer; a behavior should be tested to identify what is the impact of each of its determinants. Different analyses have been performed to find the response to this research question. When considering the first Path analysis model, designed to test the Theory of Planned Behavior with the general sample data (*Table 11*), it is Subjective Norms that provides the largest contribution to the explanation of the variance in Intentions. This finding was also confirmed by the other two Path analysis models designed to test respectively the effect of Perceived Health Risk (*Table 12*) and Values as background factor (*Table 13*). The latter path analysis model was not only tested with the general sample data but was also applied to carry out comparisons between the different value segments identified. Again, Subjective Norms was the determinant of behavior that commonly accounted the most in the explanation of the variance in the Intentions to travel within Italy in the transitional scenario (*Table 14, Table 15*, and *Table 16*). The only case in which Attitudes prevailed over Subjective Norms was when considering the Personal Focus segment (*Table 16*).

This phenomenon may be explained by the fact that we are living a global crisis that not only affects everyone personally, but also involve all the people we are in contact with: each of us has a responsibility towards the people around us and this might bring individual considerations in the background. In other words, it is not a matter of what a person subjectively thinks about travelling, but rather of how other people perceive that action. Indeed, Attitudes often resulted to have a non-significant effect on Intentions, meaning that the personal disposition towards the travelling action was not relevant in terms of the final decision to go on holiday. Conversely, when people considered important evaluated the travelling activity positively (positive Subjective

Norms), respondents felt encouraged to undertake it, otherwise it was considered to be more respectful to let it go or, perhaps, postpone it. This implies that, in general terms, individuals gave more importance to their peers, even though their personality would lead them not to consider other people's needs of primary importance, as in the cases of Openness to Change and Self-enhancement. And, in these times, that should be a reassuring finding.

Interestingly, it was also observed that, in general, the perceived control over financial resources was influencing the intentions to travel domestically in the uncertain situation less than the perceived control over time resources. This means that volitional control was higher for financial resources than for time availability. Perhaps, after the first peak of the pandemic, potential economic issues were not perceived as critical for the decision to travel as one may believe. Certainly, they were influential in the majority of cases, however, not as much as the lack of time to take a period away from home. It would be interesting to evaluate if this perception will have changed after the second peak of the pandemic.

3) To which extent is the perceived health risk influencing the intentions to travel within Italy in the transitional phase? Does it change across contrasting value segments?

As pointed out by the literature (Quintal et al., 2010), the perception of risk negatively influences the intentions to perform a behavior through the mediation of the attitudes towards that behavior. This research verified that also Perceived Health Risk has a direct negative impact on the Attitudes towards travelling, therefore it has an indirect negative impact on the Intentions to travel within Italy in the transitional phase. The assumption implies that the effect of Perceived Health Risk can be considerable in the only case in which Attitudes have a significant effect on Intentions. This was confirmed with the general sample data (see *Table 12* and *Table 13*), where all the variables considered significantly impacted the dependent variables; the finding proved that those who think that it is more likely to be infected or infect others when travelling are expected to have less favorable Attitudes towards travelling within Italy in the uncertain situation caused by the pandemic, controlling for all other variables.

On the other hand, when considering the comparisons among the different value segments, it can be observed that individuals with different motivational goals differed in their perception of health risk. Indeed, it resulted that for subjects favoring Openness to Change, Self-enhancement, and Social Focus, the Perceived Health Risk had a direct negative significant effect on their Attitudes towards travelling within Italy in the transitional situation. Differently, this effect was not significant for individuals prioritizing Conservation, Self-transcendence, and Personal Focus (*Table 14, Table 15*, and *Table 16*). As we have previously seen, this result may be justified by the fact that individuals who value Self-transcendence tend to be less anxious and more inclined to take risks compared to the others; moreover, people emphasizing Personal Focus do not worry a lot about the community around them, prioritizing their personal interest, hence it is less likely that they have a marked perception of the risk of spreading the infection that the travelling activity may entail. However, for subjects who value Conservation, Perceived Health Risk was expected to play a significant role in decreasing positive Attitudes, because these people tend to be more anxious and risk-adverse compared to other segments. The conflicting finding may result from the distribution of values within that segment: *Figure 8* shows that Conservation is the higher order value prevailing, although all the other values have also rather high coefficients. Indeed, other values may have caused disturbance in the perception of health risk.

4) Do human values, intended as background factor, increase the ability of the conceptual model to explain the intentions to travel within Italy in the transitional phase?

The Theory of Planned Behavior (Fishbein & Ajzen, 2010) suggests that the potential significance of the background factors considered within the model must be always tested empirically. Therefore, this research proceeded in steps to demonstrate the significance of Schwartz's values as background factor within the TPB applied to the particular scenario under investigation. As *Table 13* displays, human values had a significant positive impact on Attitudes, Subjective Norms, and Perceived Behavioral Control, proving that they have a significant role in the prediction of the Intentions to travel within Italy in the uncertain situation caused by the pandemic. In this case, we can observe how Values had a stronger impact on Subjective Norms than on the other variables: this could be originated from the fact that the importance that people assign to the peers may derive to a larger extent from a personality or cultural trait rather than from other sources of information, such
as knowledge, demographic characteristics, or life experiences, that may be more relevant in the case of personal dispositions (Attitudes) towards travelling.

Furthermore, considering Values within the TPB designed for this case of study, significantly increased the ability of the model to explain the variance in the Intention to travel within Italy in the transitional phase. The contribution of Values, although significant, was overall rather marginal, with an R² increasing by only 1%. As a matter of fact, the impact of the background factor was almost, albeit not entirely, mediated by the effect of the three determinants of Intentions.

6.2 Limitations of the Study

First, one of the major limitations of this study consisted of the lack of resources, intended as time and financial resources, that would have been necessary to perform a second wave of the survey to assess whether the intentions have been confirmed and converted in actual behavior after the six-month time span, or whether some control factors intervened, impeding the behavioral performance. As a matter of fact, the longer the timespan between the expression of intentions and the behavioral performance, the higher the probability that intentions change (Fishbein & Ajzen, 2010).

Furthermore, for the same reasons, it was not possible to carry out a pivotal study to investigate behavioral, normative, and control beliefs as suggested by the expectancy-value theory (Fishbein, 1967). Indeed, the TPB explains that the antecedents of intentions follow directly from these three types of beliefs: exploring the set of behavioral, normative, and control beliefs that drive the antecedents of the behavior would have been beneficial to better understand the determinants of the attitudes, subjective norms, and perceived behavioral control with regards to the decision to travel within Italy in the transitional phase (Fishbein & Ajzen, 2010).

Secondly, this research included only one dimension of perceived risk, the perceived health risk; however, other dimensions of risk could have been related to the decision to travel within Italy in the uncertain situation caused by the pandemic. For instance, a comprehensive measure of perceived risk could have included social and performance risk (Horton, 1976; Murray & Schlacter, 1990). Again, this would have required a pilot study to extract other dimensions of risk that respondents considered applicable to the case under investigation.

In addition, at the time of the survey design (May 2020), borders across European countries were still closed and no certain decision about their reopening in the summer was expected soon. This study is therefore limited to the choice to travel to domestic destinations: the intentions to travel within the country in the second half of 2020 are likely to be skewed towards positive responses compared to the intentions to travel to other European destinations. Thus, it could have been relevant to compare the proportion of people intending to travel only within Italy with the proportion of people also willing to travel abroad.

Lastly, and perhaps most importantly, the findings raised by the research have a short validity over time. As a matter of fact, the Covid-19 emergency is in constant evolution and it is extremely difficult to frame a phenomenon the changes day by day. However, even though the results presented will not provide an exhaustive and conclusive analysis of the Italian travellers' intentions, which are constantly subjected to new information that may lead individuals to change their mind, they constitute a starting point to understand consumer behavior after the first wave of the pandemic and evaluate any potential modifications in light of the evolution of the crisis.

6.3 Recommendations for Future Research

This research explored Italian travellers' intentions to visit domestic destinations after the first peak of the pandemic. However, not only Italy was hit by Covid-19 the in the spring 2020. Thus, it would be interesting to extend the application of the model designed for this study to other populations, for instance to other European countries that experienced the crisis in a comparable way, or to other European countries that were less concerned by strict regulations to prevent the spread of the virus, or even to extra-European countries, to assess whether values can be considered cross-cultural also during a global crisis.

Furthermore, since we are witnessing a severe worsening of the situation in the entire European continent and unfortunately the second wave seems to be just around the corner, it would be extremely interesting to replicate the research after the second peak of the pandemic and, potentially, after the distribution of the vaccine. Indeed, evaluating to what extent people changed their intentions as the crisis and the restrictions have been protracted, would be useful for the whole tourism sector to assess its resilience over time and to strategically design tailored measures to recover.

Finally, using a mixed method that combines quantitative data collection (surveys and social media sentiment analysis) with in-depth interviews or focus groups to better understand the profound reasons why people have taken certain decisions and perhaps changed their intentions, might be very useful to gain more insights about the consumer behavior post-crisis.

6.4 Managerial Implications

This study has revealed that subjective norms constitute the most influencing antecedent of the intentions to travel within Italy in the transitional phase. This variable is intended as the subjective perception of the extent to which the performance of the examined behavior is accepted or not accepted by a particular group of peers. In other words, the more the community of peers (relatives, friends, mass and social media) endorses the decision to travel to domestic destinations in the transitional scenario, the higher the intention of a person to carry out the behavior.

This consideration leads the author to conclude that, for managers of the tourism sector and for regulators, leveraging the "community feeling" will become of fundamental importance. Indeed, for people to feel encouraged to travel in an uncertain situation, the action of travelling should be evaluated positively and supported by the entire community. After what we have experienced in the last couple of months (late August and September 2020), a great work must be done in this respect. As a matter of fact, after the Italians' return from vacation and the subsequent increase in the infection cases, the travelling activity was often condemned by the public opinion as an egoistic act that did not care about protecting the community after all the efforts and sacrifices of the spring. Of course, there were other factors which contributed to the increase of the infection cases (e.g., reopening of schools, reopening of offices, gatherings, crowding of public transport), however the travelling activity has been under the spotlight for a while.

Given that subjective norms play such a relevant role in determining the Italians' intentions to travel, it is essential for the tourism sector to recover its positive image and become again a sought-after and esteemed experience, not only among travellers but also among people who are not interested in travelling. Once the emergency stage has passed, this should be one of the priorities of the recovery and response phase. More specifically, the following recommendations might be considered: first, it will be key to generally promote travelling as something good for the sake of the country and to encourage individuals pertaining to segments that are more inclined to travel (Openness to Change, Self-transcendence, Social Focus) to start travelling again; second, it will be important to closely target those segments which are more likely to reject the idea of travelling after a second wave of the pandemic (individuals characterized by Conservation, Self-enhancement, and Personal Focus); lastly, promoting Italy as a safe destination and travelling as a safe activity could also help reducing the perception of health risk, hence to generally improve individual attitudes towards travelling domestically.

However, for these recommendations to be effective, a previous comprehensive restructuring of the travel sector will become crucial: a decentralization of attractions from big cities and mainstream destinations and a rethinking of the whole system of transportation and services should be stressed, together with a resounding advocacy of a sustainable and "slow" way of travelling. Furthermore, especially in this period, we have acknowledged the importance of data monitoring, which should be leveraged as an essential tool to manage tourism flows, and as communication medium to strengthen the coordination among all the stakeholders of the tourism sector. In general, a tighter and smoother collaboration among the local players of the travel industry, which in Italy are usually working independently, should be encouraged and solicited, perhaps via a more intense coordination among the several DMOs of the country.

These measures might represent a relevant leap forward to prevent the occurrence of phenomena such as overtourism, seasonal peaks, or over-crowding of specific cities, destinations, or events, which surely have been crucial to the sector economic development, but they have also been threatening its sustainable growth in the long run. Most importantly, considering the health crisis the world is facing, their re-occurrence might constitute a worrisome factor that could make tourists step back from their renewed willingness to travel postcrisis.

Conclusion

This research aimed at investigating the intentions of the Italian travellers to visit domestic destinations in the uncertain scenario generated by the first peak of the Covid-19 pandemic. The main goal was to identify which was the most influencing determinant of the behavior in question and define to what extent human values were impacting on the determinants of behavior and on the final intentions to travel. Moreover, the role of health risk perception with respect to the travelling activities in the aftermath of the first wave of the pandemic was explored.

The study revealed that in the summer 2020 there was a positive trend with regards to the intentions to travel within Italy in the transitional phase, although absolutely decreasing if we considered that 91.8% of the respondents travelled domestically in 2018 and 2019. Indeed, almost 58% of the survey participants showed a desire to go on vacation in the second half of the year, whereas 27% was undecided and 15% was not willing to travel in the uncertain situation after the first peak of the Covid-19 crisis. In particular, a stronger positive trend was observed among people favoring Openness to change and Self-transcendence higher order values; in contrast, individuals prioritizing Conservation and Self-enhancement appeared more reluctant to take some time away from home. However, the differences among the intentions of the considered value segments were not pronounced, hence the statistical evidence to prove that contrasting values segments considerably diverged in their intentions to travel within Italy in the transitional phase was not found.

Notwithstanding, the data analysis confirmed that values significantly contributed to the explanation of the intentions to travel domestically in the transitional scenario, through the mediation of attitudes, subjective norms, and perceived behavioral control. Similarly, the direct negative effect of perceived health risk on attitudes was proven to be statistically significant. Furthermore, subjective norms were recognized as the most relevant determinant of behavior, both in the general sample and across the different value segments identified, with the only exception of the Personal Focus segment where attitudes were predominant. On the other hand, the perception of health risk was found to be quite volatile across the selected value segments: indeed, its

impact was significant only for Openness to change, Self-enhancement, and Social Focus, showing a split trend through the value clusters.

The results of the present research demonstrated that Schwartz's ten basic human values offer a significant contribution to the decision-making process with respect to the travelling behavior in the aftermath of a global health crisis. As a matter of fact, the study provided evidence to affirm that, even in an very unstable situation such the one delineated by the transitional scenario, values act as stable guiding principles that drive consumer decisions, albeit mediated by the antecedents of behavior.

Lastly, as previously mentioned, it was proven that among the predictors of behavior it is subjective norms that plays the key role in determining the intentions to travel within Italy in the transitional phase. This finding may be valuable for regulators, managers, and operators of the tourism sector. In fact, following the harsh criticism against the vacationers in late August and September 2020 and the second wave of the pandemic which becomes more and more serious as the days go by, it will be high priority to fully recover the positive image of travelling among travellers, non-travellers, and the public opinion – of course when the emergency phase will be overcome. In addition, an extensive restructuring of the travel sector, with a focus on prevention of over-tourism, strengthening of the coordination among all the stakeholders, and data collection and monitoring, is suggested in the aftermath of the Covid-19 pandemic.

In conclusion, the insights provided by the present study represent a benchmark to evaluate how the consumer behavior will evolve as the health crisis progresses, also offering a foundation to start thinking about the design of new response strategies, to help the recovery of the tourism sector after this severe global crisis and to prove its resilience once again.

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Appendix: SEM Models Graphic Results



Figure A1. Path Analysis Model 1: Theory of Planned Behavior (TPB) (Standardized Estimates)



Figure A2. Path Analysis Model 2: TPB & Perceived Health Risk (Standardized Estimates)



Figure A3. Path Analysis Model 3: TPB & Perceived Health Risk & Values (Standardized Estimates)



Figure A4. Path Analysis Model 3 – Conservation (Standardized Estimates)



Figure A5. Path Analysis Model 3 - Openness to Change (Standardized Estimates)



Figure A6. Path Analysis Model 3 – Self-transcendence (Standardized Estimates)



Figure A7. Path Analysis Model 3 - Self-enhancement (Standardized Estimates)



Figure A8. Path Analysis Model 3 - Personal Focus (Standardized Estimates)



Figure A9. Path Analysis Model 3 - Social Focus (Standardized Estimates)