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Light at the end of the tunnel: Visitors’ virtual reality (versus in-person) attraction site tour-related behavioral intentions during and post-COVID-19

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\begin{abstract}
Consumer behavior is changing as a result of the COVID-19 pandemic, thus compelling attraction sites to find new ways of offering safe tours to visitors. Based on protection motivation theory, we develop and test a model that examines key drivers of visitors’ COVID-19-induced social distancing behavior and its effect on their intent to use virtual reality-based (vs. in-person) attraction site tours during and post-COVID-19. Our analyses demonstrate that visitor-perceived threat severity, response efficacy, and self-efficacy raise social distancing behavior. In turn, social distancing increases (decreases) visitors’ intent to use virtual reality (in-person) tours during the pandemic. We find social distancing to boost visitors’ demand for advanced virtual tours and to raise their advocacy intentions. Our results also reveal that social distancing has no effect on potential visitors’ intent to use virtual reality vs. in-person tours post-the pandemic. We conclude by discussing vital implications that stem from our analyses.
\end{abstract}

\section{Introduction}

The “severe acute respiratory syndrome coronavirus 2” (SARS-CoV-2) virus that produces COVID-19 has instigated a global pandemic with over 54 million confirmed cases across 191 countries, and a death toll of over 1.3 million\textsuperscript{1} (Dong, Du, & Gardner, 2020). Due to the pandemic’s public health risk, many governments have imposed significant mobility restrictions on their citizens (e.g., lockdown, social distancing, travel bans, quarantine), which are slowing down the world economy (Nicola et al., 2020). In this environment, the tourism sector is experiencing a major impact on its business (Zenker & Kock, 2020). For example, canceled flights, vacant hotels, and closed attraction sites are a common sight in recent months (Gössling, Scott, & Hall, 2020), thus putting tourism and travel on hold and yielding substantial employee layoffs and financial loss. Travel restrictions are considered imperative to control the spread of COVID-19 (Niewiadomski, 2020), with many cases being linked to tourist/tour groups (Yang, Zhang, & Chen, 2020). Countries worst-impacted by the pandemic (e.g., the United States, India, Brazil, Spain, France) tend to be those attracting high tourist numbers (Beech, Ribin, Kurmanaev, & Maclean, 2020; Statista, 2020).

Given their typically high-contact nature, travel/tourism services have suffered significant loss as a result of COVID-19, and now face an uncertain future. For example, after being temporarily closed during lockdown, attraction sites in some countries are currently rebuilding their clientele. However, many of their visitors’ disposable incomes are considerably affected by the pandemic (e.g., through job loss). That is, the 3–4% global tourism growth predicted for 2020 has dramatically shifted to a 20–30% pandemic-induced decline (UNWTO, 2020), with cumulative tourism/travel-related GDP loss amounting to $2.1 trillion (WTTC, 2020). While tourism is vulnerable to crises and disasters (Cró & Martins, 2017; Rosselló, Becken, & Santana-Gallego, 2020), evidence shows its disruption as never before by COVID-19, which is described as an amalgamation of “a natural disaster, a socio-political crisis, an economic crisis, and a tourism demand crisis” (Zenker & Kock, 2020, p. 2). Consequently, there is a need to examine the pandemic’s effect on the travel/tourism sector, and to devise ways to convert this disruption into transformative opportunities (Sigala, 2020). At the same time, consumers’ travel/tourism-related mindset is shifting, including by avoiding crowded destinations in favor of more remote, tranquil options (Zenker & Kock, 2020). Research is therefore needed to answer the “questions of how the tourism industry can respond to and recover from the crisis” (Gretzel et al., 2020, p. 188).

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Given these issues, we explore how attraction sites are adapting to COVID-19-induced social distancing and its expected effect on consumers’ intent to purchase virtual reality (VR)-based (vs. in-person) site tours, both during and post-the pandemic. While VR has been previously viewed as a threat to the travel/tourism sector (Cheong, 1995), today it offers an important opportunity for attraction sites to overcome the pandemic’s challenges. VR, defined as “computer-mediated, interactive environments capable of offering sensory feedback to engage consumers … and drive desired consumer behaviors” (Hollebeek, Clark, Andreasen, Sigurdsson, & Smith, 2020, p. 1), is increasingly deployed to create personalized, convenient virtual site visits (e.g., to landmarks, museums, zoos, theaters; Bright, 2020; Herrmann, 2020), particularly during COVID-19.

This study offers the following contributions. First, based on Rogers’ (1983) protection motivation theory, we empirically examine how consumers’ appraisal of COVID-19, including (a) the perceived severity of its threat and one’s perceived susceptibility to contracting the virus, and (b) their coping appraisal, gauged by response efficacy and self-efficacy, affect consumers’ motivation to protect themselves through social distancing. Given its focus on impending health threats and individuals’ motivation to self-protect from the threat, protection motivation theory offers a relevant framework in our research context.

Second, we examine the relationship between consumers’ social distancing-based protection behavior on their intent to use VR-based (vs. in-person) attraction site tours both during and after the pandemic. Our rationale is that while COVID-19 currently exerts a disruptive effect on attraction sites in many countries, others are planning to reopen soon. Therefore, investigation of the pandemic’s present and future effects on attraction sites is required, in particular for VR-based (vs. in-person) tours, as outlined. By examining the role of social distancing as a self-protective behavior against COVID-19, we illuminate its effect on consumers’ intent to visit attraction sites, either in-person or virtually, during and post-the pandemic, thus unlocking new insight (Zenker & Kock, 2020).

Third, we explore consumers’ VR-based tour needs in terms of VR’s technological advancement level, and its effect on their tour-related advocacy intent, or their resolve to recommend a VR-based tour to others (Ozturk & Gogtas, 2016). This is important because consumers’ uptake of virtual (vs. in-person) tours is rapidly growing since the pandemic’s onset (Debusmann, 2020), which may extend to impact their future tour-related intentions. We therefore explore the role of VR-based tours’ technological advancement level on consumers’ tour-related advocacy intent, which represents a proximal predictor of behavior (Fishbein & Ajzen, 1975).

In section 2, we review relevant literature on protection motivation theory, social distancing, and VR tours, followed by an overview of the hypothesis development in section 3. In sections 4 and 5, we present the methodology and results, respectively. In section 6, we conclude by discussing our results, outlining their implications, and addressing the study’s limitations.

2. Theoretical background

2.1. Protection motivation theory

Protection motivation theory, which proposes that individuals’ threat- and coping appraisal generate their motivation to protect themselves from perceived health threats (Rippetoe & Rogers, 1987; Rogers, 1983), is widely adopted in the tourism literature (Badu-Baiden, Adu-Buahen, & Otou, 2016; Chen, Dai, Zhu, & Xu, 2020). First, threat appraisal comprises (a) perceived threat severity, defined as the “beliefs about the significance or magnitude of the threat” (Witte, 1996, p. 320). The higher a perceived threat’s severity, the more extensive individuals’ self-protection behaviors, and (b) perceived susceptibility, defined as “beliefs about one’s risk of experiencing the threat” (e.g., by contracting COVID-19; Witte, 1996, p. 320). More susceptible individuals are predicted to engage in a greater range of self-protective measures (Rogers, 1975), including COVID-19-imposed social distancing. Overall, threat appraisal focuses on the threat’s nature, its perceived seriousness, and the propensity of it eventuating to affect the individual (Norman, Boer, & Seydel, 2005).

Second, coping appraisal involves the assessment of health-protective behavioral alternatives and responses to avoid the threat and its consequences. It focuses on the effectiveness of the coping response as well as its implementation to impede the threat. Coping responses that help individuals avert the threat yield perceived response- and self-efficacy (Rogers, 1975). Response efficacy refers to “beliefs about whether the recommended coping response will be effective in reducing the threat to the individual” (Milne, Sheeran, & Orbell, 2000, p. 109). Self-efficacy denotes the “individual’s beliefs about whether (s)he is able to perform the recommended coping response” (Milne et al., 2000, p. 109). For example, consumers may consider the degree to which social distancing, a coping behavior recommended by health organizations, can reduce their risk of contracting COVID-19 (i.e., response efficacy) and whether they are capable of maintaining their physical distance from others (i.e., self-efficacy).

Threat- and coping appraisals drive individuals’ motivational intentions and course(s) of action to protect themselves from the threat. Protection motivation is “an intervening variable that arouses, sustains, and directs activity to protect the self from danger” (Conner & Norman, 2005, p. 9). Overall, protection motivation theory posits that individuals’ motivation to defend themselves from a threat is a function of the threat’s perceived severity, one’s own susceptibility to being adversely impacted by the threat, one’s self-efficacy in overcoming the threat, and one’s perceived efficacy of particular responses to the threat (Rogers, 1975). For example, consumers may be motivated to adapt their behavior by practicing social distancing to protect themselves from COVID-19.

Despite its positive role in curbing the pandemic, social distancing is “the very antithesis of our expectations of the experience of hospitality and tourism” (Baum & Hai, 2020, p. 2). While COVID-19 continues to spread, social distancing has rapidly become the new normal that compels consumers globally to stay at home, cancel their planned site visits, and learn about how to stay safe (Chubb, 2020). That is, due to COVID-19, consumers’ ability to visit attraction sites has been reduced to an unprecedented degree (Baum & Hai, 2020). Therefore, attraction sites are considering new ways to bring their service to consumers. One such technique is VR technology, which by offering virtual site visits, can instigate the consumer’s sense of being there (i.e., telepresence; Hollebeek, Clark, et al., 2020; Loureiro, Guerreiro, & Ali, 2020).

VR-based tours therefore exist as an innovative potential means for attraction sites’ survival during COVID-19 (Kwok & Koh, 2020). Given the expected lack of medical treatment or remedy for COVID-19 until (mid-) 2021 (Grenfell & Drew, 2020), attraction sites’ adoption of new channels to maintain client demand is key. Before reviewing literature on VR-based tours, we synthesize the budding social distancing literature.

2.2. Social distancing

Social (or physical) distancing is a set of non-pharmaceutical precautions to stop the spread of contagious diseases, including COVID-19, by preserving a physical distance of 1.5–2 m between individuals and limiting face-to-face encounters (Li & Li, 2020; Hollebeek, Smith, et al., 2020). It “is designed to reduce interactions between people in a broader community, in which individuals may be infectious, but have not yet been identified” (Wilders-Smith & Friedman, 2020, p. 2). As COVID-19 is primarily transmitted by respiratory droplets that require physical proximity, social distancing has proven its effectiveness in flattening the curve and controlling the epidemic (Wilders-Smith & Friedman, 2020).

Likewise, the Center for Disease Control and Prevention posits that social distancing or “limiting face-to-face contact with others is the best
way to reduce the spread of … COVID-19.” Therefore, in the absence of COVID-19-based medical treatment or vaccine, social distancing remains a major intervention to control its dissemination (Kissler, Tedijanto, Lipsitch, & Grad, 2020), thus impacting tourism and attraction sites.

Social distancing has proven useful during COVID-19, as it has saved critical care units from being overwhelmed with patients (Ferguson et al., 2020). It has also helped reduce mortality rates, thus yielding monetary savings (Greenstone & Ngam, 2020). Social distancing may need to stay in place until the global population has largely reached immunity, or an effective vaccine and treatment are available (Kissler et al., 2020). During the pandemic, interest in VR-based tours has spiked (Debusmann, 2020), given its capacity to overcome social distancing-imposed mobility- and social restrictions.

Social distancing limits human presence and touch, thus complicating consumers’ meaningful tourism experiences. Given social distancing’s restriction of conventional face-to-face service interactions (Hollebeek, Smith, et al., 2020), tourism businesses globally are rapidly adopting technology-based alternatives (e.g., VR-based tours) to continue their service delivery (Gössling et al., 2020). Given consumers’ perceived threat of contracting COVID-19, they are likely to amend their travel plans (Zhang, Yang, Wang, Zhan, & Bian, 2020), yielding their expected willingness to adopt VR-based (vs. in-person) tours during the pandemic, as discussed further in the next section.

2.3. Virtual reality-based site tours

While COVID-19 is restricting consumer mobility, technology-mediated service delivery offers a viable alternative, as discussed (Ke et al., 2020; Singh et al., 2020). For example, VR-based tours enable organizations to abide by government-imposed social distancing or lockdown requirements, while still permitting a value-laden consumer experience (Debusmann, 2020).

Prior research has established VR’s benefits for management, sales, marketing, distribution, and heritage preservation, to name a few (Gibson & O’Rawe, 2018; Moorhouse, tom Dieck, & Jung, 2018). In tourism, VR can be used to create “a virtual environment by the provision of synthetic or 360-degree real life captured content with a capable non-, semi-, or fully-immersive VR system, enabling virtual touristic experiences that stimulate the visual sense and potentially [the user’s] ‘additional [or] other senses … either prior to, during, or after travel” (Beck, Rainoldi, & Egger, 2019, p. 591). Pre-COVID-19, attraction sites (e.g., museums, theme parks) were increasingly adopting VR technology to innovate their offerings (Jung et al., 2018; Lee, Jung, tom Dieck, & Chung, 2020) or to offer an enhanced user experience (Bruno et al., 2010). However, during COVID-19, VR technology has become an important platform for tourism businesses to maintain their revenue stream. For example, attraction sites including The Louvre, Guggenheim Museum, Vatican City, Yosemite National Park, and many others are offering virtual tours to locked-down global audiences (Jones, 2020).

VR technology, which provides “computer-mediated interactive environments capable of offering sensory feedback to engage consumers … and drive desired consumer behaviors” (Hollebeek, Clark, et al., 2020, p. 1), can be used to foster consumer immersion or telepresence in real time (Gutentag, 2010). Telepresence refers to a user’s perception of actually being in the computer-mediated environment (Cummings & Bailleston, 2016; Jung & Dieck, 2017), which is facilitated by sensory feedback that reflects the virtual platform’s personalized response to the user’s actions (Cowan & Ketron, 2019). VR-based tourism offerings can provide a hedonic (e.g., fun), functional (e.g., learning), or social (e.g., communal) visitor experience (Lee et al., 2020; Voss, Spangenberg, & Grohmann, 2003).

Tourism-based VR’s benefits are well-documented in the literature (Bogicevic, Geo, Kandampully, Liu, & Rudd, 2019). For example, VR applications have been shown to boost consumer engagement, including for consumers who are unable to physically visit the site (e.g., due to lacking financial means, physical disability, or COVID-19-imposed lockdown; Moorhouse et al., 2018). Moreover, by allowing geographically-dispersed individuals to interact through a virtual platform, VR-based tours support social interactivity and connectivity (Jung et al., 2018). Given these benefits, many companies are investing in developing such platforms. For example, Google’s Heritage on the Edge allows tourists to visit UNESCO World Heritage sites and Amazon Explore provides an interactive virtual experience of visiting historic/cultural sites (Bloom, 2020).

Despite these benefits, VR applications differ with respect to their technological capabilities (Beck et al., 2019). Specifically, more advanced VR platforms (e.g., BNEXT VR Headset, Samsung Galaxy Gear, Oculus Rift) typically generate higher user-perceived telepresence (vs. more basic (e.g., Google Cardboard-based) applications; Hollebeek, Clark, et al., 2020; Lee et al., 2020), as discussed further below. We next develop a research model and an associated set of hypotheses for empirical testing.

3. Hypothesis development

Based on our review, we next develop and test a promotion motivation theory-informed model that examines attraction site visitors’ threat- and coping appraisal during COVID-19. In particular, we zoom in on consumers’ coping response of social distancing and its anticipated effect on their intent to visit an attraction site during- and post-the pandemic (see Fig. 1).

3.1. Effect of threat- and coping appraisals on social distancing

As discussed, protection motivation theory proposes threat severity and -susceptibility as key threat appraisal facets (Rogers, 1983). While the former represents the seriousness of harm that the threat can cause, the latter addresses one’s perceived risk of being affected by the threat. During COVID-19, the pandemic’s perceived threat typically correlates positively with the uptake of virus-preventative measures globally (Dryhurst et al., 2020). That is, high perceived threat severity yields elevated self-protection against the impending threat (Floyd, Prentice-Dunn, & Rogers, 2000; Milne et al., 2019). Similarly, high consumer-perceived susceptibility of contracting the virus will see elevated self-protection (Bengel, Belz-Merk, & Farin, 1996). Likewise, Harris, Ali, and Ryu (2018) identify perceived threat severity and -susceptibility as major drivers of consumers’ restaurant avoidance (i.e., protection behavior) after a foodborne illness outbreak. During COVID-19, consumer attitudes toward social distancing vary across individuals (Hollebeek, Smith, et al., 2020). For example, those that perceive themselves to be less susceptible to contracting the virus are more likely to adopt looser social distancing practices (Seres et al., 2020). We hypothesize:

H1a. Consumers’ perceived severity of COVID-19’s threat positively affects their social distancing behavior.

H1b. Consumers’ perceived susceptibility to contracting COVID-19 positively affects their social distancing behavior.

Protection motivation theory also identifies the chief coping appraisal dimensions of response efficacy and self-efficacy (Rogers, 1983), as discussed. First, consumers hold personal beliefs about the efficacy of recommended responses against the threat (e.g., social distancing). That is, their perceptions of social distancing’s effectiveness as a coping response to combat COVID-19 will vary. Second, self-efficacy reflects consumers’ self-perceived ability to effectively perform the recommended coping response of social distancing.
According to meta-analyses conducted by Milne et al. (2000) and Floyd et al. (2000), response efficacy and self-efficacy positively influence individuals’ protection behaviors. For example, both response- and self-efficacy are reported as predictors of cancer-related preventive behaviors, including screening and self-examination (Norman et al., 2005). Fisher, Almanza, Behnke, Nelson, and Neal (2018) further corroborate these results by showing that both response- and self-efficacy favorably affect cruise ship passengers’ intent to wash their hands during the norovirus. Therefore, the higher consumers’ perceived response efficacy of COVID-19-imposed social distancing and the higher their perceived self-efficacy of performing social distancing, the more motivated they are to protect themselves from the virus through social distancing. We posit:

H2a. Consumers’ perceived response efficacy of social distancing positively affects their social distancing behavior.

H2b. Consumers’ perceived social distancing self-efficacy positively affects their social distancing behavior.

3.2. Social distancing’s effects during the pandemic

Social distancing has revolutionized consumers’ activities outside the home and consumer perceptions of these activities (De Vos, 2020). To stay connected to others, consumers are therefore increasingly adopting virtual, technology-based interactions during the pandemic (Hollebeek, Smith, et al., 2020). The virus has thus motivated consumers to seek new ways of interacting with businesses to satisfy their needs, thus impacting their consumption patterns.

The tourism value chain is dramatically impacted by COVID-19, as its coping interventions (e.g., social distancing, lockdown) affect the sector’s usual operations (Gossling et al., 2020). Therefore, attraction sites are innovating their service delivery modes, including by adopting VR-based site tours, as discussed. VR-based tours allow consumers to virtually visit attraction sites by replicating the site’s physical environment (Errichietto, Micera, Atzeni, & Del Chiappa, 2019), while also overcoming traditional site visit-related issues (e.g., queuing, crowding; Jung & Dieck, 2017). During high COVID-19-imposed uncertainty, virtual site visits allow consumers to cope with the situation, satisfy their visitation needs, and fight boredom (Bright, 2020).

Fisher et al. (2018) report that cruise ship passengers sought to avoid personal contact during a simulated norovirus outbreak. To curtail the virus, passengers were found to avoid crowded areas on board and to minimize touching common surfaces (e.g., buffet area; Wang & Ackerman, 2019). COVID-19 is likely to shift consumers’ travel-related mindset, including by evading crowded sites or destinations in favor of more tranquil options (Zenker & Kock, 2020). We posit that during COVID-19, consumers practicing higher levels of social distancing will display a reduced intent to visit an attraction site in-person and instead be more inclined to opt for VR-based site tours. We hypothesize:

H3a. Consumers’ adopted social distancing level positively affects their intent to use virtual reality-based attraction site tours during the pandemic.

H3b. Consumers’ adopted social distancing level negatively affects their intent to use in-person attraction site tours during the pandemic.

VR tours’ technological advancement level is also likely to generate consumers’ differing tour evaluations (Hollebeek, Clark, et al., 2020). That is, the more advanced the deployed VR technology, the better the consumer’s typical tour experience (Wei, Qi, & Zhang, 2019). Tourism-based VR ranges from non-immersive to fully immersive applications, with limited intention being paid to their differences to date (Beck et al., 2019). We expect more advanced VR systems to boost an elevated capacity to immerse consumers in their high-fidelity site visit and generate telepresence.

Consumers who take social distancing more seriously, in particular, are expected to prefer visiting high (vs. low)-fidelity virtual environments (Thurman & Mattoon, 1994), because while their extensive social distancing behavior largely precludes them from physically visiting attraction sites, they still seek to optimize their virtual visit experience (Hollebeek, Smith, et al., 2020). Moreover, consumers practicing high levels of social distancing will also want others to stick to the social distancing protocol, given its optimal outcomes if - and only if - everyone adheres to it. That is, we expect consumers’ social distancing level to affect their advocacy intent for social interaction-minimizing, high-fidelity VR tours to others (Itani, Kassar, & Loureiro, 2019;
Stokburger-Sauer, 2011). We postulate:

H4a. Consumers’ adopted social distancing level positively affects their intent to use more advanced virtual reality-based site tours during the pandemic.

H4b. Consumers’ adopted social distancing level positively affects their intent to advocate virtual reality-based site tours to others.

3.3. Social distancing’s post-pandemic effects

COVID-19 will be around at least until the development of an effective treatment and/or vaccine, which are expected to arrive by mid-to late-2021 (Grenfell & Drew, 2020). Until then, social distancing is expected to retain its precautionary value in combating the virus (Kissler et al., 2020), including for attraction sites (Baum & Hai, 2020). Given these issues, we investigate whether consumers’ intent to visit attraction sites, either in-person or virtually, post-the pandemic will be affected by the current social distancing protocol. That is, after a period of obligatory social distancing, to what extent may consumers have gotten used to limiting their social interactions, thus affecting their future site tour-related behaviors?

The future availability of medical interventions against COVID-19 will render consumers less reliant on social distancing to stay safe. Therefore, while consumers may retain a level of caution vis-à-vis social interactions in the future, they are expected to practice higher levels of social distancing during (vs. post-) the pandemic (i.e., when a cure is available). Consequently, we expect consumers’ short- (i.e., during the pandemic) and long-term (i.e., post-pandemic) social distancing behavior to differ (Jang & Peng, 2007). We postulate:

H5a. The effect of consumers’ adopted social distancing level on their intent to use virtual reality-based site tours post- (vs. during) the pandemic will be weaker.

H5b. The effect of consumers’ adopted social distancing level on their intent to use in-person site tours post- (vs. during) the pandemic will be weaker.

4. Methodology

4.1. Research design and sample

We deployed a self-administered, web-based Qualtrics survey to collect our convenience sampling-based data. The respondents were sourced from an online panel of demographically and geographically diverse consumers in the United States, where the travel/tourism sector makes a major contribution to GDP. Participants resided in different states and were thus not restricted to specific U.S.-based areas. The number of confirmed COVID-19 cases and deaths reported in the U.S. also renders it one of the most affected countries by the virus (Dong et al., 2020), demonstrating its relevance for this research.

The survey link was shared with the panel members, who were compensated for their participation. At the start of the survey, respondents were given a definition of VR-based site tours, examples of such tours, and a brief explanation of the technology behind these tours. We also outlined the research objective. The survey proceeded with relevant screening questions (e.g., the request to name a focal attraction site) to ensure the respondents’ awareness of and interest in local/international attraction sites. Those who were unable to specify an attraction site were excluded from further participation. This procedure was important since the personalized survey questions referred back to the participant’s identified site (e.g., Burj Khalifa, the Colosseum, Eiffel Tower, French Quarter (New Orleans), Glacier National Park, Independence Hall, The Louvre, Navy Pier, Sydney Opera House, The Zócalo, Walt Disney World Resort, the Vatican Museum).

The respondents also reported on their perceived severity of COVID-19 and their perceived susceptibility to contracting the virus. Further, they were asked to state social distancing’s response efficacy and their perceived self-efficacy in implementing social distancing. Moreover, their social distancing behavior during the pandemic, behavioral intentions toward using VR-based (vs. in-person) attraction site tours (during and post-the pandemic), and their desired VR-based tour’s technological advancement level were solicited. Finally, we collected the respondents’ familiarity with VR-based tours and their demographic information.

Of the 529 informants who accessed the survey, 181 passed the screening questions and agreed to participate in the study. After dropping a further seven incomplete responses, the final sample included 174 complete responses, yielding an effective 32.8% response rate. Respondents’ average age is 40.14 (STD = 11.75). Reported average annual household income is $79,279 (STD = $32,982). For our partial least squares (PLS)-based analyses, we followed the guideline that recommends a sample size exceeding: (1) 10 times the number of indicators of the measure with the larger indicator number, or (2) 10 times the greatest number of structural paths linked to a particular modeled latent construct (Hair, Hult, Ringle, & Sarstedt, 2016). Our sample size is also in line with Cohen’s power analysis at 80%statistical power (Hair et al., 2016). The sample characteristics are summarized in Appendix 1.

4.2. Measures

We measured threat severity by adapting Witte’s (1996) instrument to capture COVID-19’s perceived seriousness. We also gauged consumers’ perceived susceptibility to contracting COVID-19 by using a four-item measure (Rippetoe & Rogers, 1987; Witte, 1996), and social distancing-based response efficacy with a three-item scale (Floyd et al., 2000; Rippetoe & Rogers, 1987; Witte, 1996). Moreover, a three-item self-efficacy measure was used to capture respondents’ belief about their own ability to apply social distancing (Witte, 1996). Respondents’ social distancing level was gauged by deploying an eight-item scale assessing respondents’ physical distancing behavior, including the extent of their avoidance of public gatherings and crowded places. For all measures, seven-point Likert scales were used, which ranged from 1 (strongly disagree) to 7 (strongly agree). All of our deployed measures were of a reflective nature (Diamantopoulos & Siguaw, 2006).

Participants were then asked to share their intent to visit their named attraction site, both in person and via a VR-based tour during the pandemic. They were also requested to report on their intent to recommend the VR-based site tour to others. Moreover, participants reported on their likelihood of an in-person (vs. VR-based) visit to their named site after the pandemic (i.e., when an effective pharmaceutical intervention/vaccine is available). Respondents’ reported intent to use these tours was gathered on a five-item measure sourced from existing intention scales (Davis & Warshaw, 1992; Miniard & Cohen, 1981). Seven-point Likert scales were again used to rate our intention measure (1 = extremely unlikely to 7 = extremely likely).

Consumers’ VR-based visit’s technological advancement need was measured as follows: “When visiting [named attraction site], if you are choosing between different VR-based site tours, which would you prefer?” (measured on seven-point Likert scales: 1 = extremely basic to 7 = extremely advanced). We also gauged respondents’ familiarity with VR-based site tours by deploying the following single-item measure: “I am familiar with virtual reality-based site tours” (measured on a seven-point Likert scale: 1 = strongly disagree to 7 = strongly agree). Overall, respondents were relatively familiar with VR-based tours (mean = 5.1).

We included respondents’ familiarity with VR-based tours, age, and income as covariates, as these factors can affect respondents’ intent to
use VR-based and in-person site tours (e.g., Khan, Hollebeek, Fatma, Islam, & Riivits-Arkonsuo, 2020). Examination of the skewness and kurtosis statistics indicated that these were within the acceptable range of ±2 (George & Mallery, 2016). An overview of our measures, items/s/loadings, skewness, and kurtosis values is offered in Appendix 2.

5. Results

5.1. Reliability and validity

To test our hypotheses, we deployed PLS-based structural equation modeling by using SmartPLS (3.3.2). We conducted PLS path analysis with 5000 bootstrapped subsamples, which is suitable for studying relatively small sample sizes (Hair, Risher, Sarstedt, & Ringle, 2019). Before examining the path coefficients, the measures’ reliability and validity were checked. The outer model’s results suggest the measures’ adequate internal consistency, with the lowest Cronbach’s alpha equaling 0.77, thus exceeding the minimum threshold of 0.7 (Cronbach, 1951).

We also checked all measures’ composite reliability, with the lowest score being (0.85). Further, the items significantly loaded on their respective latent variables (p < 0.01), without any problematic cross-loadings, thus corroborating the measures’ convergent validity. We verified discriminant validity by first conducting the hetero-trait–monotrait (HTMT) test. The inter-factor HTMT values were below the 0.85 cut-off, offering evidence of discriminant validity (Henseler, Ringle, & Sarstedt, 2015). To further test discriminant validity, we compared the square root of the average variance extracted (AVE) of the multi-item measures with their respective inter-factor correlations. None of the inter-factor correlations exceeded the square root of the AVE, corroborating discriminant validity. Moreover, all variance inflation factors were below 3, specifying that multicollinearity is not a problem in our data (Hair et al., 2016). Cronbach’s alpha, composite reliability, mean, standard deviation, and AVE values are presented in Table 1.

5.2. Common method bias

We next conducted common method bias (CMB) testing to ensure this did not undesirably affect our findings. Using Harman’s single-factor test, we conducted a one-factor measurement model by using exploratory factor analysis (Podsakoff, MacKenzie, Lee, & Podsakoff, 2003). The single-factor model explained significantly less than 50% of the observed variance. We also applied the marker factor criterion by examining the respondent’s time taken to complete the survey, which is theoretically unrelated to the other modeled factors. The marker variable’s addition to the model did not yield any significant change to the attained results. Consequently, we did not find CMB to be of concern in our data.

5.3. Path analysis

To test the model’s hypothesized path coefficients, we deployed nonparametric bootstrapping. As an overall measure of model fit, the standardized root mean squared residual (SRMR) was 0.056, thus remaining below the 0.08 threshold (Hu & Bentler, 1999). Our results also offer support for most of our hypotheses, as shown in Table 2.

Two-dimensional threat appraisal was hypothesized to raise consumers’ social distancing behavior in the face of COVID-19 (H1a-b). The hypothesized positive effect of perceived threat severity on social distancing (H1a) is supported (β = 0.35, p < 0.05). The results however show that the effect of consumers’ perceived susceptibility to contracting the virus on their social distancing behavior (H1b) is nonsignificant (β = 0.04, p > 0.1). Therefore, though H1a is supported, H1b remains unsupported. In H2, consumers’ coping appraisal, which includes response- and self-efficacy, is suggested to heighten social distancing behavior. H2a suggests that response efficacy increases social distancing behavior, which is supported (β = 0.29, p < 0.05). Likewise, H2b, which predicts that self-efficacy increases social distancing behavior, is also supported (β = 0.33, p < 0.05). Our full support for H2 therefore suggests that consumers’ coping appraisal drives their protective social distancing behavior.

In H3, social distancing is hypothesized to increase (decrease) consumers’ intent to visit their named attraction site through VR-based (in-person) tours, respectively, during COVID-19. The results reveal that the higher a consumer’s exercised social distancing, the greater his/her intent to use VR-based site tours during the pandemic (β = 0.21, p < 0.05), with a corresponding reduced intent to visit the site in-person (β = −0.33, p < 0.05). Thus, H3a-b are supported, suggesting social distancing’s important effect on consumers’ intent to visit their named attraction site in-person during the pandemic. We also find social distancing to drive the consumer’s need for advanced (vs. basic) VR-based site tours (β = 0.22, p < 0.05), supporting H4a. Moreover, the results show that social distancing drives respondents’ intent to advocate VR-based site tours to others by nudging them toward these (vs. in-person) tours during the pandemic (β = 0.23, p < 0.05), thus supporting H4b.

H5a suggests that the effect of social distancing on consumers’ intent to use VR-based site tours post-(vs. during) the pandemic will be weaker. The results show that social distancing during the pandemic has a nonsignificant effect on respondents’ intent to use VR-based site tours post-the pandemic (β = 0.03, p > 0.1) compared to social distancing’s

Table 1
Correlations, Reliability, AVE, and descriptive statistics.

|          | 1     | 2     | 3     | 4     | 5     | 6     | 7     | 8     | 9     | 10    | Mean | STD  |
|----------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|------|------|
| 1 Social Distancing | 0.84  |       |       |       |       |       |       |       |       |       |      |      |
| 2 Perceived Severity | 0.57  | 0.90  |       |       |       |       |       |       |       |       |      |      |
| 3 Perceived Susceptibility | 0.35  | 0.47  | 0.80  |       |       |       |       |       |       |       |      |      |
| 4 Response Efficacy | 0.61  | 0.53  | 0.56  | 0.85  |       |       |       |       |       |       |      |      |
| 5 Self-efficacy | 0.63  | 0.41  | 0.20  | 0.61  | 0.81  |       |       |       |       |       | 5.54 | 0.96 |
| 6 VR Tour Intentions (D) | 0.45  | 0.36  | 0.34  | 0.32  | 0.22  | 0.64  |       |       |       |       | 5.35 | 1.23 |
| 7 In-Person Tour Intentions (D) | -0.09 | -0.02 | 0.19  | -0.08 | -0.31 | 0.33  | 0.95  |       |       |       | 4.60 | 1.94 |
| 8 VR Tour Intentions (P) | 0.19  | 0.29  | 0.33  | 0.30  | 0.15  | 0.52  | 0.31  | 0.91  |       |       | 5.18 | 1.30 |
| 9 In-Person Tour Intentions (P) | 0.05  | 0.01  | 0.20  | 0.23  | -0.05 | 0.02  | 0.17  | -0.09 | 0.86  |       | 5.51 | 1.17 |
| 10 VR Advancement Needs | 0.25  | 0.24  | 0.30  | 0.41  | 0.27  | -0.2  | -0.24 | -0.29 | 0.33  |       | 5.52 | 1.25 |
| 11 Advocacy Intentions toward VR Tour | 0.35  | 0.36  | 0.29  | 0.47  | 0.44  | 0.51  | 0.05  | 0.41  | 0.18  | 0.42  | 0.84 | 5.49 |
| Compoise Reliability | 0.95  | 0.94  | 0.88  | 0.88  | 0.85  | 0.92  | 0.98  | 0.96  | 0.93  |       | 0.90 |      |

Notes: Correlations are provided below the diagonal; correlations equal to or greater than 0.15 are significant (p < 0.05); square root of AVE refer diagonal; STD = standard deviation; D = During pandemic; P = Post-the pandemic; ” not applicable.
significant effect on respondents’ intent to use VR-based tours during the pandemic ($\Delta \beta = 0.18$, $p < 0.05$). The difference between the two effect sizes ($\Delta \beta = 0.46$) is significant ($p < 0.05$). Thus, social distancing’s effect on consumers’ intent to use VR-based site tours post-the pandemic is weaker and nonsignificant (vs. its significant effect during the pandemic), supporting H5a.

H5b stipulates that social distancing’s effect on consumers’ intent to purchase in-person site tours post- (vs. during) the pandemic will be weaker. The results again reveal a nonsignificant effect on consumers’ intent to purchase in-person site tours post-the pandemic ($\beta = 0.13, p > 0.1$) compared to social distancing’s significant effect on respondents’ intent to purchase these tours during the pandemic ($\beta = -0.33, p < 0.05$). The difference between the two effect sizes ($\Delta \beta = 0.46$) is significant ($p < 0.05$). Thus, social distancing’s effect on consumers’ intent to purchase in-person site tours post-the pandemic is weaker (nonsignificant) compared to its significant effect during the pandemic. Hence, the results support H5b.

The findings also show that social distancing’s effect on consumers’ adoption of VR-based and in-person site tours post-the pandemic is nonsignificant. Therefore, though consumers are exercising social distancing during the pandemic, their future intent to purchase future VR-based or in-person site tours is unlikely to be affected by their current social distancing precautions, and they are likely to return to in-person site visits (mean during pandemic = 4.6; mean post pandemic = 5.51), as well as to continue taking VR-based site tours (mean during pandemic = 5.35; mean post pandemic = 5.18) post-the pandemic, as the nonsignificant difference in their respective means suggests.

6. Discussion, implications, and further research

6.1. Discussion

COVID-19 has significantly impacted consumption behavior (e.g., by limiting consumer mobility, imposing social distancing; Baum & Hai, 2020), creating new challenges for attraction sites. Consumers are practicing social distancing by staying at home as much as possible, maintaining a physical distance of 1.5–2 m from others in the service-scape, and avoiding crowds, which attraction sites need to consider in their service (re)design.

To overcome these challenges, attraction sites are increasingly introducing VR-based (vs. in-person) tours. While the adoption of VR-based tours during the pandemic has intuitive appeal, empirically derived insight into consumer responses to these initiatives remains scant, thus exposing an important research gap explored in this paper. Using protection motivation theory, we investigated the role of consumers’ COVID-19-related perceived threat appraisal, which comprises the perceived severity of the pandemic’s health threat and one’s perceived susceptibility to contracting the virus, on social distancing behavior, both during and after the pandemic. We also examined the role of consumers’ virus-related coping appraisal, which comprises self- and response efficacy during and after the pandemic. Moreover, we investigated social distancing’s effect on consumers’ intent to purchase a VR-based (vs. in-person) site tour during and after the pandemic, consumers’ desired VR tour’s technological advancement level, and their intent to engage in VR-based (vs. in-person) tour-related advocacy behavior.

Our results reveal COVID-19’s relatively high perceived threat severity, leading consumers to practice high levels of protective social distancing during the pandemic. Consumers’ perceived response efficacy of government-imposed social distancing was also found to be comparatively high. Moreover, we found consumer-perceived social distancing-related self-efficacy to positively affect their social distancing behavior. These associations are in line with prior research that posits threat severity to raise protection behaviors against infectious diseases (Dryhurst et al., 2020; Floyd et al., 2000). We therefore identify social distancing as an effective COVID-19-related coping mechanism.

Though COVID-19 is viewed as a threat, consumer-perceived susceptibility to contracting the virus was not found to significantly drive social distancing behavior. That is, perceived susceptibility is not significant in driving participants to adopt social distancing to fend off COVID-19. This nonsignificant result suggests that perceived susceptibility exhibits a conflicting pattern of effects on consumers’ social distancing-based protection motivation (Harris et al., 2018; Norman et al., 2005), potentially given individuals’ perceived modest risk of contracting the virus (e.g., as they are not in a high-risk (e.g., elderly) group).

We also illuminated the future impact of social distancing during the pandemic on consumers’ intent to purchase VR-based (vs. in-person) site tours post-the pandemic. Our findings suggest that social distancing will not have a lasting effect on consumers’ future tour purchase intentions, particularly once an effective COVID-19 treatment or vaccine is available. That is, post-the pandemic, consumers will consider both in-person and VR-based site tours, thus counteracting anecdotal evidence that suggests that social distancing’s effect on tourism is here to stay after the pandemic (e.g., Oguz, Gordon, & Cruz, 2020). Based on our findings, we suggest that tourists will switch to alternative, non-social
distancing-based protection methods (e.g., vaccine) once available. We therefore envisage that current social distancing-enforced gaps in the tourism sector will largely dissolve post-the pandemic, thus offering good news to attraction site- and broader tourism providers. This again suggests that tourism is vulnerable to pandemics and crises (Cró & Martins, 2017; Rosselló et al., 2020). Moreover, our results suggest that consumers’ decision-making for VR-based (vs. in-person) tours remains unaffected by COVID-19-imposed social distancing post-the pandemic. In other words, they are then expected to consider both VR-based and in-person tours, thus retrieving attraction sites’ strategic opportunity for on-site visitation. We next discuss important theoretical implications that arise from our analyses.

6.2. Theoretical implications

We derive the following theoretical implications from our analyses. First, our analyses extend existing protection motivation theory-based insight through its application to COVID-19, by deploying social distancing as the focal protective mechanism. Based on our attained insight, protection motivation theory offers a relevant theoretical frame to inform further COVID-19- or pandemic/crisis-related research, thus unlocking a wealth of avenues for further study. For example, to what extent does our identified positive association of consumers’ during-pandemic social distancing behavior on their intent to use VR-based (vs. in-person) tours generalize to other protective behaviors (e.g., frequent hand-washing, use of gloves/face-masks)?

Relatelly, our findings show that the higher a consumer’s adopted social distancing level, the greater his/her need for technologically advanced (vs. basic) VR-based site visits during the pandemic. Thus, while those practicing high levels of social distancing seek more advanced VR-based visits during the pandemic, those who adhere less to the social distancing protocol are more likely to opt for basic VR-based tours. This finding suggests that those exhibiting lower threat protection behaviors are likely to continue taking in-person tours for as long as possible leading up to government-imposed social distancing. That is, as these consumers primarily use VR-based site visits to bridge the lockdown period, we expect them to reassume their physical visits soon after social distancing restrictions are lifted (Hollebeek, Smith, et al., 2020), thus adding to the existing knowledge stock on protection motivation theory.

Second, though we identify a growing demand for VR-based site tours, our analyses suggest that VR-based visits will not replace on-site visitation in a post-pandemic era. Instead, consumers are predicted to consider both VR-based and in-person tours once an effective medical intervention for COVID-19 is available. Thus, as these treatments enter the market, alternate theoretical frames may gain prominence to investigate consumers’ COVID-19-related behavior, including the theory of planned behavior or regulatory focus theory (e.g., Hollebeek, Smith, et al., 2020), thus sparking a plethora of opportunities for further research. Moreover, as VR-based and in-person site visits continue to co-exist post-the pandemic, we advise tourism researchers to contemplate their respective optimal design in attraction sites’ strategic portfolios, both under regular market conditions and in the face of crisis (Hollebeek, Smith, et al., 2020).

6.3. Managerial implications

Our findings also offer a wealth of implications for attraction sites. The results first suggest that attraction sites stand to benefit from offering VR-based tours, allowing them to recuperate at least part of their COVID-19-compromised revenue. We also found that attraction sites planning to reopen during the pandemic (i.e., before the advent of an effective treatment/vaccine) will see lower visitor numbers, which is plausible given the widespread social distancing requirement. Therefore, to improve their rate of visitation during the pandemic, attraction sites are advised to develop and offer VR-based site visits.

Second, we reveal that the more prone consumers are to stick to the social distancing protocol, the greater their demand for more technologically advanced, immersive (vs. basic) VR-based tours during the pandemic (Bogicevic et al., 2020). For example, more advanced VR technology typically allows consumers to navigate the virtual environment using fully immersive applications (Beck et al., 2019). While tourism managers are faced with the dilemma of which VR tools to invest in, we recommend the implementation of more advanced, immersive VR technology (Tussyadiah, Kausar, & Soesilo, 2018), which tends to yield more favorable user evaluations and advocacy.

Third, post-the pandemic, VR-based site visits offer continued value to tourists, including to those wishing to have a ‘taste’ of the site prior to visiting it in-person, individuals desiring convenient armchair travel, those lacking the (e.g., financial) means to visit a desired (e.g., international) site, or those suffering from (e.g., physical) disabilities (Lin, Huang, & Ho, 2020; Olya & Han, 2020; Tussyadiah et al., 2018). VR-based tours are thus able to reach a greater target audience at an improved carbon footprint (i.e., through reduced travel-related pollution), while also allowing infinite potential visitor numbers at any given time, removing wait times (e.g., due to queuing, overcrowding), and being less susceptible to counterfeit entry tickets than in-person tours.

In line with these benefits, visitors are likely to consider both in-person and VR-based tours post-the pandemic. Thus, while we do not expect VR-based tours to replace traditional site visits, they have an important and growing role in supporting attraction sites’ revenue, both currently and in the future (Kabadayi, O’Connor, & Tuzovic, 2020; Zenker & Kock, 2020). For example, new COVID-19-based VR tour users are likely to continue considering these tours post-the pandemic. Attraction site managers are therefore advised to regularly update and innovate their VR-based tours (e.g., as new technological capabilities become available; Hollebeek & Rather, 2019). Given their outlined benefits, other or related sub-sectors (e.g., events, trade-shows, conferences) are also predicted to profit from expanding their service portfolio to include VR-based offerings. In sum, we identify VR-based tours as a powerful tool for attraction site and other tourism providers, both during (e.g., by allowing them to continue to operate) and after the pandemic (e.g., by expanding their reach, preparing for potential future crises; Martínez-Román, Tamayo, Gamero, & Romero, 2015).

6.4. Limitations and further research

Despite its contributions, this study is also subject to several limitations, from which we derive opportunities for further research. First, we deployed a cross-sectional research design that captures the observed data at a single point in time. It therefore overlooks the development of the modeled associations over time, which could be addressed in future longitudinal research.

Second, our findings are based on convenience sampling-based panel data, thus incurring potential bias and generalizability issues (Malhotra, 2019). Future researchers may therefore wish to adopt probability sampling methods (e.g., simple random sampling) to address this issue. Further, our results are based on a sample size of 174, which, while adequate, would benefit from further expansion in future research (Malhotra, 2019). Moreover, as we only considered VR technology, further researchers may wish to examine other technologies (e.g., augmented/mixed reality) and their potential unique dynamics (Trunfio & Campana, 2020).

Third, we focused on understanding consumers’ COVID-19-induced protection behavior to predict their intent to purchase VR-based (vs. in-person) site tours. We therefore did not consider consumers’ past behavior, which may correlate with their current/future behavior.
Relatedly, we only focused on social distancing as a protective measure against COVID-19, thus overlooking other potential measures (e.g., use of face-masks, sanitization).

Fourth, our data was collected from the United States, thus offering a limited representation of potential COVID-19 dynamics in other parts of the world. We therefore recommend the undertaking of further (empirical) pandemic-related research in/across other countries. Respondents were also requested to provide a focal attraction site that was used in the survey. However, this single-site focus can skew the responses toward site-specific dynamics, which may incur limited cross-site generalizability. Therefore, further researchers are advised to study multiple attraction sites to enable cross-site assessments. Moreover, it would be beneficial to have respondents experience a specific VR-based tour(s) before gauging their tour-related behavioral intentions.

7. Conclusion

Consumer behavior is shifting as a result of COVID-19, thus requiring attraction sites to identify novel ways of offering safe tours to their visitors. In response to the pandemic’s mobility restrictions and social distancing protocol, VR-based site visits offer a viable alternative that allows attraction sites to maintain a revenue stream during the pandemic. Our empirical results show that consumers intend to take VR-based site visits during the pandemic, while considering both VR-based and in-person site visits post-pandemic. Visitors also prefer more advanced (vs. basic) VR-based tours that typically offer a more immersive experience. Based on VR-based tours’ manifold outlined benefits, we recommend attraction site managers to offer these during and post-the pandemic.

Author contribution

Both authors contributed equally to the project and the writing of the article.

Impact statement

The study provides empirical evidence on how attraction sites can respond to and recover from the unprecedented crisis caused by COVID-19 pandemic. Findings show that visitor-perceived threat severity, response efficacy, and self-efficacy raise social distancing, which increases (decreases) visitors’ intent to use virtual reality (in-person) tours during the pandemic. For that, it is concluded that a relationship between consumer protection behavior (social distancing) included by COVID-19 pandemic. The study reveals that social distancing has no long-lasting effect that will impact consumers’ intentions toward attraction sites tours after the pandemic taking into consideration that a medical intervention is available. Social distancing has no effect on potential visitors’ intent to use virtual reality vs. in-person attraction tours post-the pandemic. Further, social distancing is found to boost visitor demand for advanced virtual tours and attract predominantly positive word-of-mouth toward this kind of tours. This is said important to examine as several attraction sites are starting to offer VR-based tours during the pandemic.

Declaration of competing interest

None.

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None.

Appendix 1. Sample characteristics

| Age (years) | Frequency | Percentage |
|-------------|-----------|------------|
| 18–27       | 43        | 24.71      |
| 28–37       | 35        | 20.11      |
| 38–47       | 53        | 30.45      |
| 48–57       | 25        | 14.37      |
| ≥58         | 18        | 10.34      |
| Household Income ($/year) | Frequency | Percentage |
| 25,000–50,000 | 25     | 14.37      |
| 50,001–75,000 | 76     | 43.67      |
| 75,001–100,000 | 42    | 24.14      |
| ≥100,000    | 31        | 17.82      |
| Marital Status | Frequency | Percentage |
| Married     | 98        | 56.32      |
| Never Married | 42   | 24.14      |
| Other       | 34        | 19.54      |
| Gender      | Frequency | Percentage |
| Female      | 83        | 47.70      |
| Male        | 91        | 52.30      |
| Education   | Frequency | Percentage |
| Some college but no degree | 12     | 6.89       |
| College degree | 125    | 71.84      |
| Graduate Degree | 37    | 21.26      |
| Ethnic Background | Frequency | Percentage |
| Asian/Pacific Islander | 12    | 6.89       |
| Black       | 23        | 13.21      |
| Hispanic    | 31        | 17.82      |
| White       | 101       | 58.05      |
| Other       | 7         | 4.02       |
### Appendix 2. Measures and loadings

| Measure                                      | Loading | Skewness | Kurtosis |
|----------------------------------------------|---------|----------|----------|
| **Social Distancing**                        |         |          |          |
| I currently practice social distancing       | 0.87    | -0.33    | 0.47     |
| I follow social distancing precaution to avoid getting COVID-19 pandemic | 0.75    | -0.65    | 0.89     |
| I apply social distancing recommendations in my daily life | 0.94    | -0.88    | 1.42     |
| I don’t gather in group                      | 0.89    | -1.31    | 0.94     |
| I am avoiding public gatherings              | 0.63    | -0.59    | 1.3      |
| I try to keep an appropriate physical distance or space from others | 0.92    | -0.36    | 0.67     |
| I try to do most of my activities (e.g., shop, work, learn) from home when possible | 0.86    | -1.07    | 1.43     |
| I am connecting with other through mobile, digital and virtual options | 0.82    | -1.06    | 1.66     |
| **Perceived Severity**                       |         |          |          |
| I think COVID-19 pandemic is serious         | 0.92    | -1.05    | 1.78     |
| I believe the threat of COVID-19 pandemic is significant | 0.94    | -0.82    | -0.17    |
| I think that COVID-19 pandemic is of high risk | 0.91    | -0.31    | 0.82     |
| COVID-19 pandemic is harmful                 | 0.83    | -0.81    | 1.42     |
| **Perceived Susceptibility**                 |         |          |          |
| There is high probability for someone to contract COVID-19 pandemic | 0.90    | -0.85    | 0.52     |
| I am at risk of getting COVID-19 pandemic    | 0.76    | 0.71     | -0.69    |
| COVID-19 pandemic is highly contagious       | 0.77    | -0.31    | -0.83    |
| It is possible that I will contract COVID-19 pandemic | 0.76    | 0.60     | -0.06    |
| **Response Efficacy**                        |         |          |          |
| The recommended response from healthcare authorities works in avoiding COVID-19 pandemic | 0.94    | -0.41    | 0.03     |
| The response of the accountable authorities and organizations toward COVID-19 pandemic is effective | 0.68    | 0.58     | 1.02     |
| The use of the recommended precaution by the health authorities, will stop COVID-19 pandemic from spreading | 0.90    | -0.42    | 0.00     |
| **Self-efficacy**                            |         |          |          |
| I can protect myself from being infected by COVID-19 pandemic by following health authorities’ recommendations | 0.87    | -0.59    | 0.78     |
| I can effectively follow the recommended precaution by the health authorities to avoid getting COVID-19 pandemic | 0.74    | -0.72    | 0.09     |
| Personally, I can deal with COVID-19 pandemic by following the recommended response by the government agencies | 0.83    | -0.41    | -0.86    |
| **Advocacy Intentions toward Virtual Reality Tours** |         |          |          |
| I would let my friends know about the virtual reality tours offered | 0.79    | 0.42     | -0.40    |
| I would spread the word around the virtual reality tours offered by the attraction site | 0.87    | -0.41    | -0.18    |
| I would recommend the virtual reality tours to potential visitors | 0.90    | -0.29    | -0.86    |
| I will share the benefits of virtual reality tours with others | 0.79    | -0.07    | 0.77     |
| **Perceived Susceptibility**                 |         |          |          |
| I think that COVID-19 pandemic is of high risk | 0.83    | -0.81    | 1.42     |
| I would try to keep an appropriate distance or space from others | 0.92    | -0.36    | 0.67     |
| I try to do most of my activities (e.g., shop, work, learn) from home when possible | 0.86    | -1.07    | 1.43     |
| I am connecting with other through mobile, digital and virtual options | 0.82    | -1.06    | 1.66     |
| **Perceived Susceptibility**                 |         |          |          |
| I think COVID-19 pandemic is serious         | 0.92    | -1.05    | 1.78     |
| I believe the threat of COVID-19 pandemic is significant | 0.94    | -0.82    | -0.17    |
| I think that COVID-19 pandemic is of high risk | 0.91    | -0.31    | 0.82     |
| COVID-19 pandemic is harmful                 | 0.83    | -0.81    | 1.42     |

**Notes:** D = During pandemic; P = Post-the pandemic; * indicates not applicable.

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