

Traveling after COVID¹

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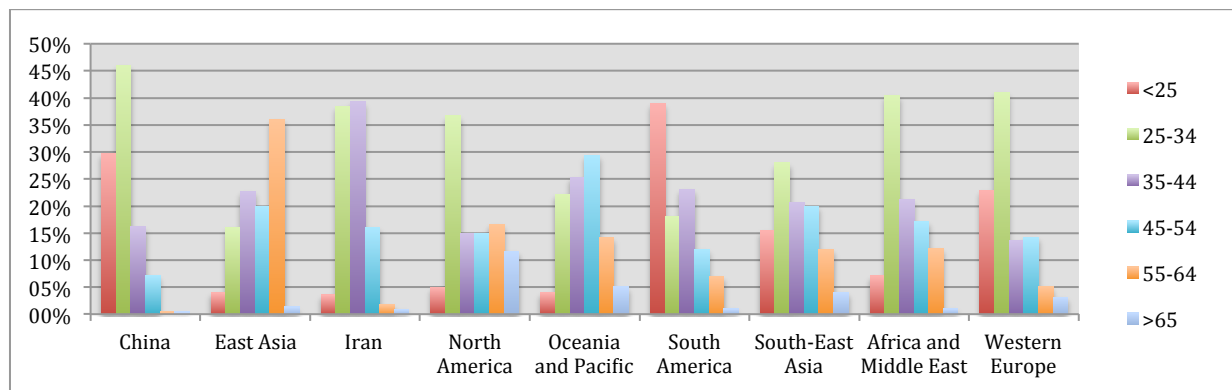
The questionnaire on the propensity to travel after COVID-19 was designed to capture individuals' feelings about travelling after COVID-19. It was shared online through professional and academic networks specialized in tourism issues. As a result, a large but unknown proportion of the respondents are individuals working or studying in the tourism field. A total of 1,764 questionnaires were collected online in 30 days, from 18 April to 18 May 2020. The main respondents were from European countries (794), followed by Asia (605), America (168), Oceania and the Pacific (99) and Africa and the Middle East (98). French accounted for 29% of respondents, followed by Chinese (15%), Iranians (7%), Colombians (5%) and Australians (5%). Women were almost twice as likely as men to have responded to this survey (64.9% of respondents were women, compared to 34.5% of men). Only respondents from Iran and South Korea had the opposite trend in the gender ratio of respondents.

Table 1- Top 10 Nationalities and Countries of residence

	Nationality	Country of residence
	French	513
	Chinese	273
	Iranian	128
	Colombian	89
	Australian	82
	Korean	77
	Vietnamese	66
	American	47
	Thai	36
	German	32

The average age of respondents was between 25 and 34 years, although differences appear between nationality groups with respondents generally older in East Asia (55-64) and Oceania and the Pacific (45-54).

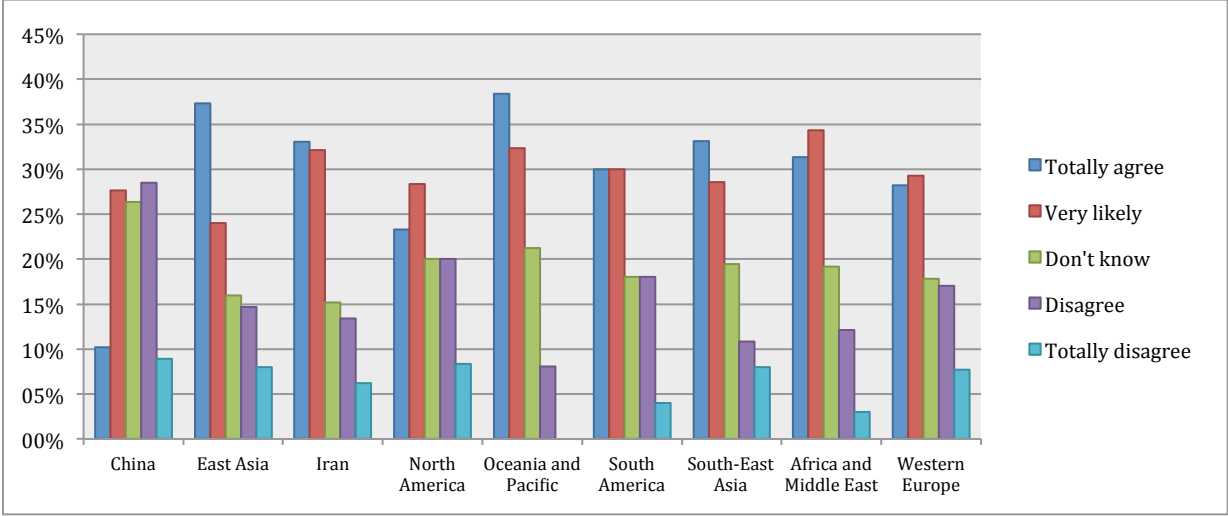
Figure 1 – Age bracket of respondents for the main group of nationalities of respondents



¹ The author would like to thank Christine Jacquemin from RTA (www.be-rta.com) and the former and current students of

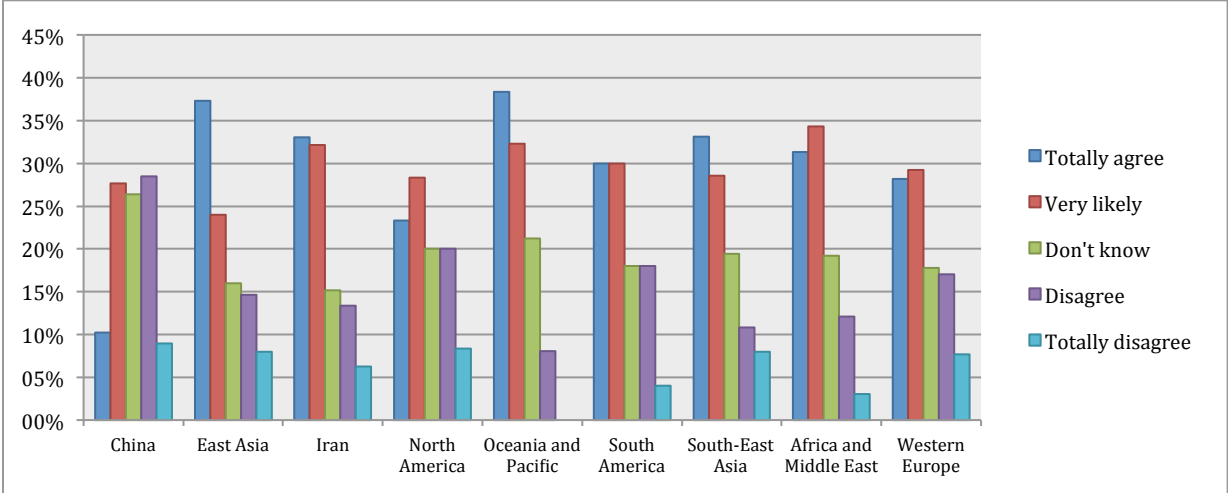
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Question 1 – I don't think I will change my behaviour and I wish I could continue to travel as before



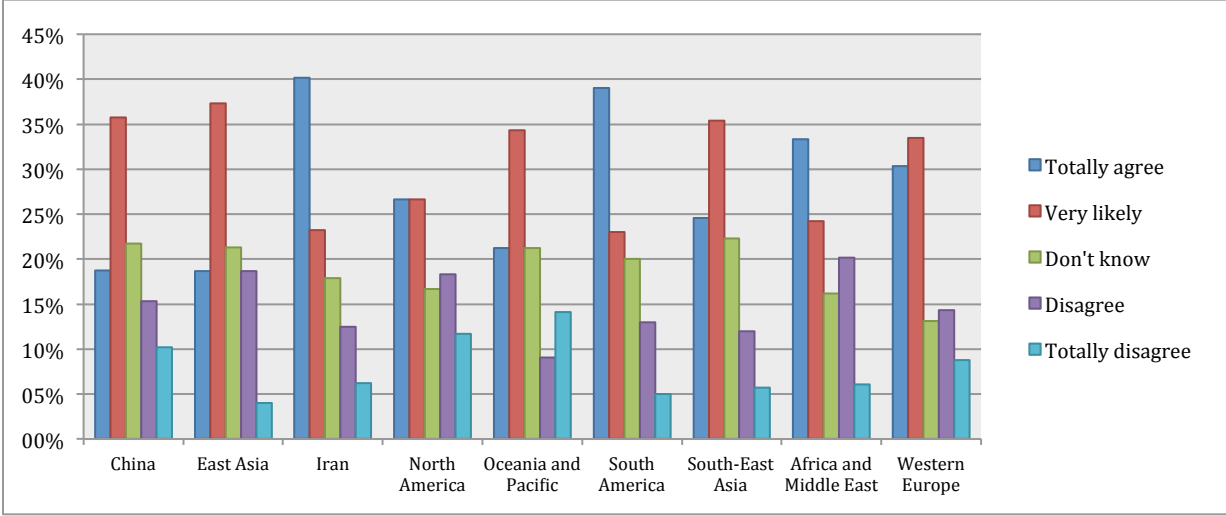
When asked about the likelihood of changing behaviour after COVID, respondents from China were the only group for which the average rating of responses was neutral (3.07). For the other nationality groups with higher rates for East Asia and Oceania and Pacific, it is highly likely, if not certain, that most will not change their behaviour. In other words, most do not wish to change their behaviour. In average, about 20% only disagree or totally disagree to not change their behaviour and consider that they won't continue to travel as before.

Question 2 – I am afraid that my financial situation as a result of this health crisis will not allow me to travel for at least a year.



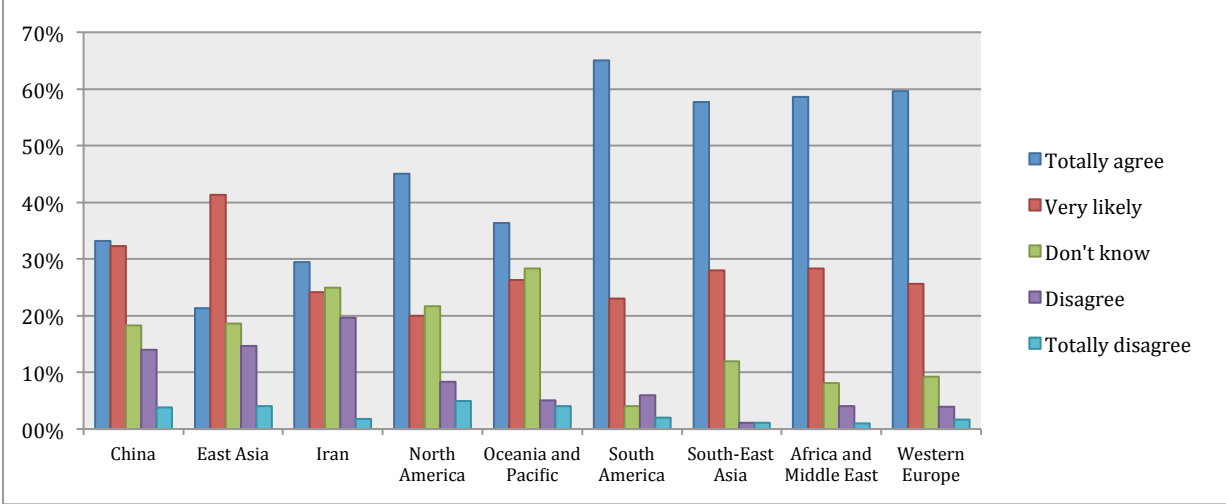
Mainly for respondents from Iran (3.54) and South America (3.73), and to a lesser extent to Africa and the Middle East (3.39), it is most likely that their financial situation will not allow them to travel. For respondents from Asia, Oceania and the Pacific, this is still uncertain, while Westerners (Europeans – 2.72 and North Americans – 2.50) seem quite confident that they won't be constrained by their financial situation. Note that we are on younger samples of respondents for the latter.

Question 3 – I believe that my travels will initially be less far from my home country with priority for my country of residence or border countries.



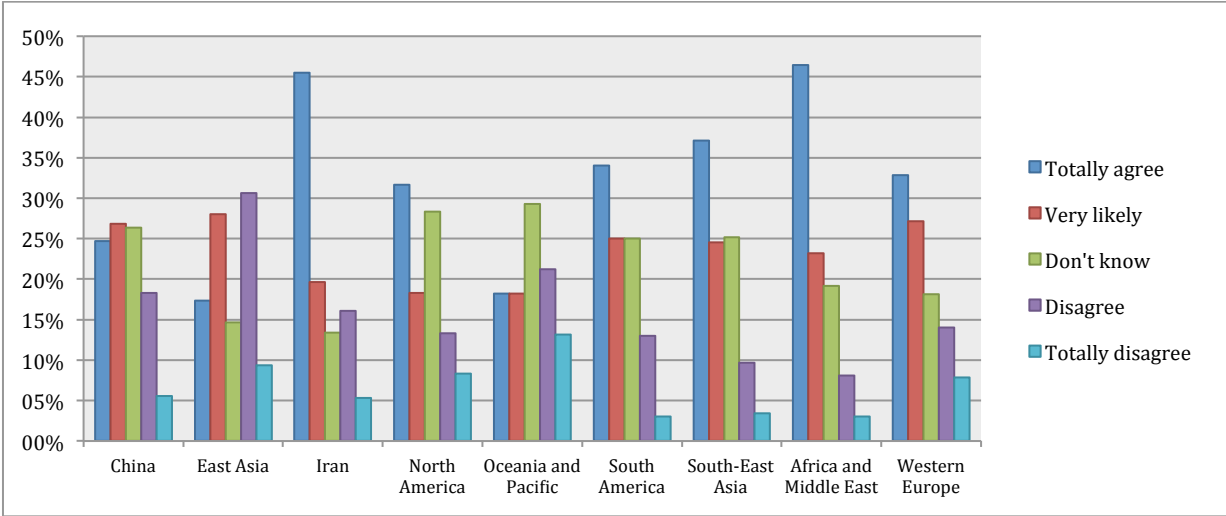
With an average greater than 3, all nationality groups think that their trips will initially be less far from their country of origin, with priority given to their country of residence or border countries. Differences are only observed in the degree of certainty with, in particular, a higher degree of certainty for Iranians and South Americans and to a lesser extent to those from Africa and Middle East.

Question 4 – I would like a different form of tourism, more respectful of the visited communities and of nature.



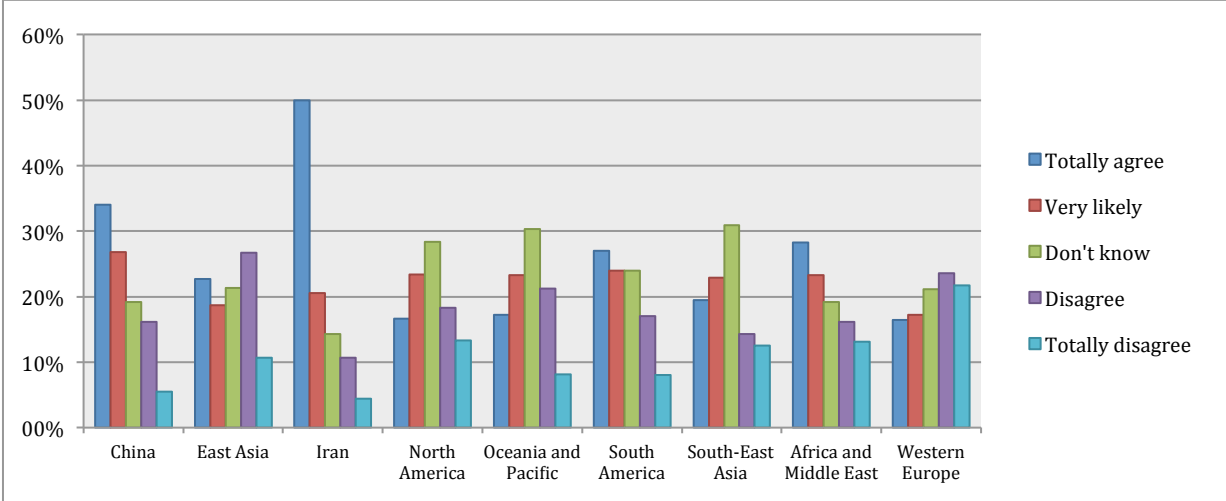
Although all nationalities or groups of nationalities want a different form of tourism, more respectful of nature and the communities visited, there is a stronger conviction for sustainable tourism among groups of nationalities with younger respondents (South America, South-East Asia, Africa and Middle East, and Western Europe). However, this observation is less clear-cut for certain nationalities (Iran) or groups of nationalities (Oceania and the Pacific) for which there are either uncertainties or divergences of the same proportion as the certainties about this ambition.

Question 5 – I now wish to avoid mass tourism destinations and large cities.



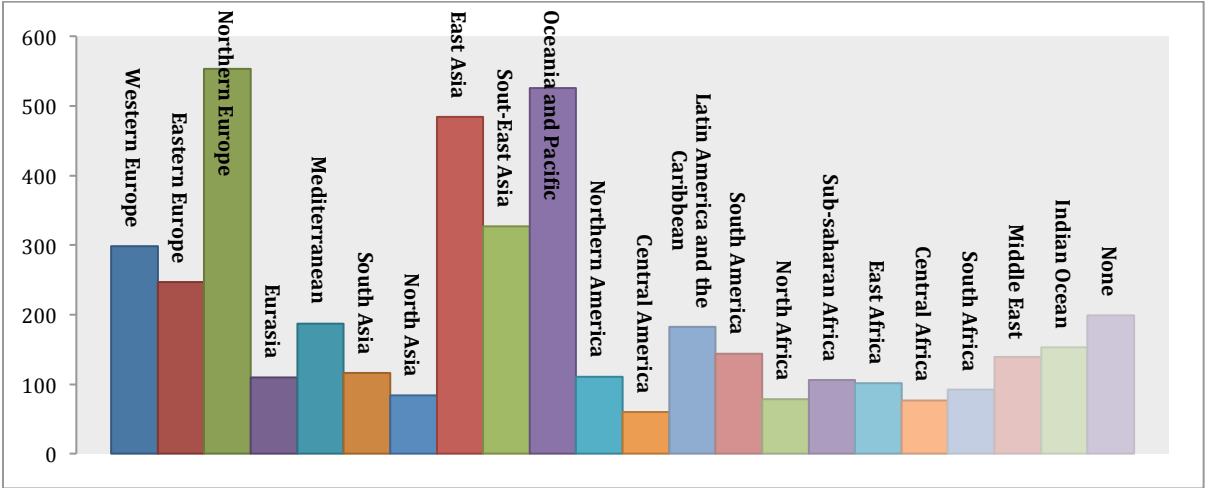
With the exception of the groups of nationalities from East Asia and Oceania and the Pacific, older on average than the others, for whom the intention to continue travelling to mass tourism destinations or major cities remains uncertain but still exists, the other groups of nationalities majoritarily expressed their desire to avoid these destinations.

Question 6 – I now believe that certain countries and regions are at risk from a health point of view and I no longer wish to visit them.



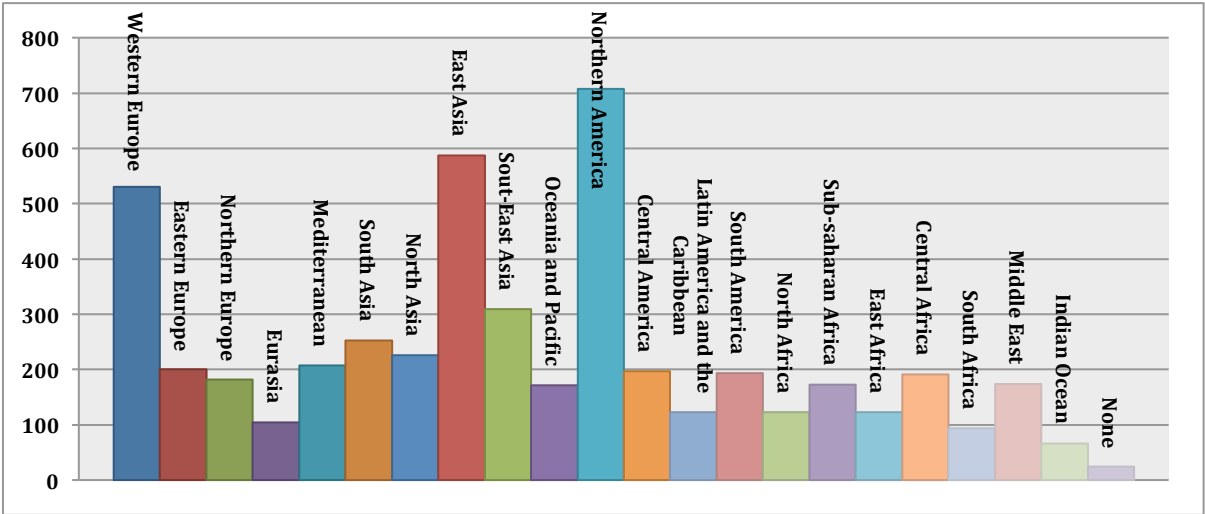
The idea that some destinations would now be more at risk than others from a health perspective is perceived very differently by the different nationality groups. Respondents of Iranian, Chinese and African or Middle East nationalities have a stronger propensity to view this assumption positively, in contrast to Western Europeans, for whom this is not the case. It is difficult to consider the age as an explanatory factor, since both the Chinese and the Western European samples of respondents are made up mainly of individuals under 34 years of age.

Question 7 – In view of the current health crisis, which countries or regions now seem to you to be the safest from a health perspective?



Although for 13% of the respondents, no destination seems safe today, three regions are however considered by about a third of the respondents as safe from a health perspective namely Northern Europe (31%), East Asia (27%) and Oceania and Pacific (26%).

Question 8 – In view of the current health crisis, which countries or regions now seem to you to be the least safe from a health perspective?



The question concerning the least safe countries from a health perspective, in view of the current crisis, also reveals a group of three regions of which two had the highest number of cases at the time of the questionnaire (Northern America – 39% and Western Europe – 29%). Paradoxically, East Asia, which was considered as one of the safest regions by 27% of respondents, is also considered as one of the least safe by 32% of respondents. This is due in part to the origin of the respondents and the geographic origin of the pandemic.

This document is a first restitution of the results: further statistical analysis will allow to complete this information and to provide more accuracy to the findings.

Annex

Table 2 – Summary of questions average

Nationality or group of nationalities	# of Respondents	Q1	Q2	Q3	Q4	Q5	Q6
China	235	3,07	3,02	3,43	3,82	3,46	3,73
East Asia	75	3,68	3,05	3,48	3,61	3,13	3,16
Iran	112	3,72	3,54	3,79	3,60	3,84	4,01
North America	60	3,38	2,50	3,38	3,92	3,52	3,12
Oceania and Pacific	99	4,01	3,15	3,37	3,86	3,07	3,22
South America	100	3,64	3,73	3,78	4,43	3,74	3,45
South-East Asia	175	3,68	3,20	3,61	4,40	3,82	3,21
Africa and Middle-East	98	3,79	3,32	3,59	4,39	4,02	3,37
Western Europe	663	3,53	2,72	3,62	4,38	3,63	2,83
Average	1764	3,55	2,99	3,56	4,12	3,59	3,16