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EFFECTS OF COVID-19 PANDEMIC ON TOURISTIC CONSUMPTION IN KUŞADASI

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ABSTRACT

The COVID-19 pandemic is an unprecedented outbreak affecting the world and sectors globally. It has affected countries' economies and social and political structures, especially the health sector, in a difficult situation. The research aims to determine the effects of COVID-19 on tourist consumer behavior. In this context, research was conducted on 539 visitors in Kuşadası and the surrounding area. In addition to frequency distributions for the demographic characteristics of the participants, reliability, validity, the t-test, the ANOVA test, and correlation analysis were performed. As a result, it was determined that the participants' perceptions of touristic consumer behavior during the COVID-19 pandemic created a statistically significant difference according to the participant's age, marital status, and educational status variables. The research determined that as the age of the participants increased, their perception levels towards the dimensions of touristic consumer behaviors after COVID-19 increased, and the perception levels of married participants towards tourism tendency and hygiene were higher than those of single participants. As the education level of the participants increased, the perception levels of COVID-19 towards tourism tendencies, food and accommodation, and hygiene increased. These findings suggest that age, marital status, and educational status are crucial in shaping individuals' perceptions of touristic consumer behaviors after COVID-19. Older participants may have a greater understanding and concern for hygiene and safety measures, while married individuals may prioritize these factors more than single individuals. Higher education levels may also lead to a more informed and cautious approach towards tourism tendencies, food, accommodation, and hygiene.

Keywords: COVID-19, Pandemic, Tourist Behavior, Touristic Consumption, Kuşadası

JEL Codes: Z32, Z33, E20

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INTRODUCTION

The elasticity of the demand dimension of the tourism sector is affected by sudden changes due to crises, natural disasters, war, epidemics, etc. and can have significant adverse economic effects. At the end of 2019, the COVID-19 outbreak in Wuhan, China, became a global health problem that caused a significant crisis for the whole world in a short time (Gralinski & Menachery, 2020, p. 1). Affecting more than 90% of the world's population, COVID-19 is considered the most severe problem to weaken the global economy since World War II. During this time, with travel bans, quarantine restrictions, the closure of borders and tourist accommodations, and the suspension of flights worldwide, the COVID-19 pandemic has devastated the tourism sector. Although the tourism sector stakeholders are different, they have a significantly intertwined structure. There have been many similar outbreaks in the past few years. For example, crises such as the Swine Flu in 2009 (Haque and Haque, 2018: 6) and the Ebola outbreak in 2013 (Mizrachi & Fuchs, 2016, p. 1) affected the tourism sector and caused it to shrink. Although these are pandemics, the COVID-19 outbreak has caused much more significant impacts than previous crises due to the global restriction or closure of travel, business, and life activities (Higgins-Desbiolles, 2020, p. 611).

While tourists are free to avoid destinations associated with risk, the consequences of catastrophic events at tourist destinations can be inevitable and quite profound. Intense and prolonged restrictions and lockdowns due to COVID-19 have led to significant changes in the daily lives of individuals, resulting in new working systems. This situation has also influenced the formation of many new fields of study. At this point, the research subject is the effects of COVID-19 on tourist behavior. Understanding how the pandemic has altered tourist behavior is crucial for the tourism industry to adapt and recover. Researchers are examining travel preferences, safety concerns, and the shift toward sustainable tourism practices to provide insights and recommendations for the sector's future. Additionally, this research can help policymakers develop strategies to mitigate the impact of future crises on tourist behavior and ensure a more resilient and sustainable tourism industry.

1. METHODOLOGY AND RESEARCH

When all adverse events, such as epidemics, are analyzed from a tourism perspective, it is seen that they cause rapid changes in tourist demands and expectations. It is essential to reveal the changes by examining the effects of COVID-19 on the behavior of potential tourists. A survey technique was used to collect research data. In order to measure tourists' perceptions of tourist consumption after COVID-19, the literature was examined, and the scale developed by Wen, Huimin, and Kavanaugh (2005) on SARS and adapted into Turkish by Öztürk and Tankuş (2020) according to COVID-19 was used. The questionnaire form consists of two sections: a section for learning the demographic

information of the participants and a section for determining tourist consumer behaviors after COVID-19. Considering the research population and sample and the purpose of the research, a question was added about whether they had at least two or more vacation experiences in the last five years. There are five questions to determine the demographic characteristics of the participants (gender, age, marital status, education level, and income level). After COVID-19, the touristic consumer behavior scale consists of 22 propositions in total, including the general impact dimension (4 propositions), the attitude and preference dimension (10 propositions), and the hygiene and safety dimension (8 propositions). These main dimensions are divided into sub-dimensions within themselves. The general impact dimension of COVID-19 consists of the impact on the life sub-dimension (2 propositions) and the impact on the tourism dimension (2 propositions). The leading dimension of attitude and preference consists of the sub-dimensions of tendency towards tourism (8 statements) and attitude towards tours (2 statements). The leading dimension of hygiene and safety comprises the food and accommodation (2 statements) and hygiene (6 statements) sub-dimensions. The answers to the statements in the scale were scored on a 5-point Likert scale.

The research population consists of those who visit the Kuşadası district of Aydın province in Turkey. Kuşadası was preferred because it is an important tourist destination. Kuşadası Port is one of the most important cruise ports in the world in terms of the number of passengers and the number of ships, with an annual capacity of 2,400 (T.C. Aydın Governorship 2022). Since the size and exact number of the sample group are unknown, the "Sample Size Calculated for Different Population Sizes" table developed by Neuman (2010) was used to determine the sample. According to Neuman (2010, p. 351), for population sizes between 1,000,000 and 10,000,000, the sample size is determined as 400 at a 95% confidence level. In order to increase the representativeness of the determined sample number and to increase the validity of the analysis, it was tried to exceed the determined sample number. The voluntary participation of the sample group in the research was considered. The questionnaires were administered online by sharing links to save time and money. The survey forms obtained online were analyzed using the SPSS package program, which was in line with the purpose of the research.

The limitations of the research are that it was conducted only on visitors to Kuşadası, the results obtained cannot be generalized, and the findings are evaluated only for this region. In the survey study, 552 people were interviewed. Of the forms obtained, 13 incomplete or incorrectly completed questionnaires were not included in the analysis. In this direction, data were obtained from 539 questionnaire forms, and analyses were carried out through the SPSS package program. First, whether the data were normally distributed for interpretative statistical analyses was examined. The study applied correlation (Pearson correlation) analysis to determine the statistical relationships between the dimensions that constitute the effects of individuals' perceptions of tourist consumption after COVID-19. T-tests and ANOVA tests were conducted to determine whether there was a significant difference

between the demographic characteristics of the participants and post-COVID-19 tourist consumer behaviors. A 95% confidence interval with a 5% margin of error was considered in statistical analyses.

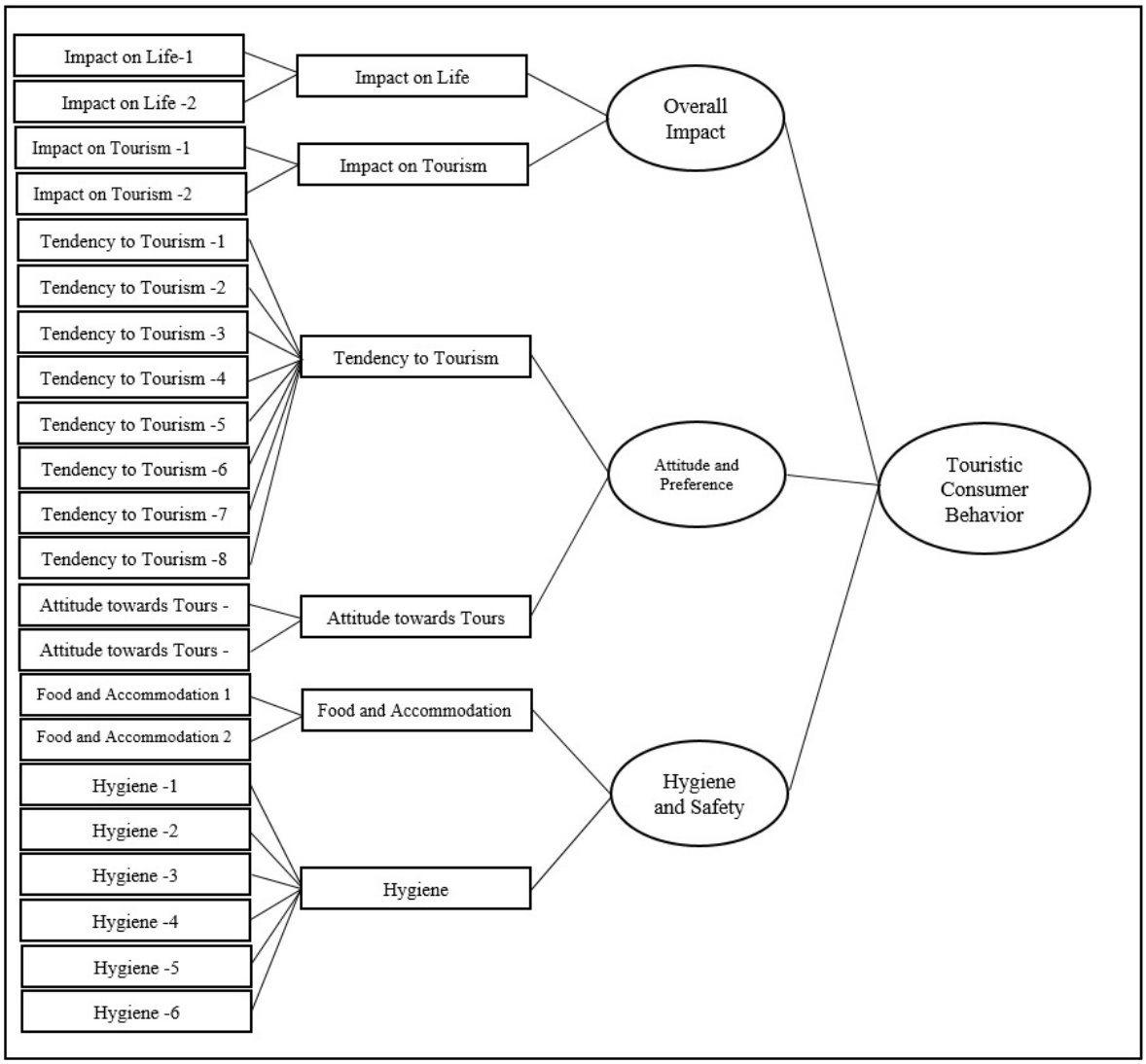

Figure 1. Symbolic Model of the Research

Hypotheses were formed to determine whether there is a significant difference between the demographic characteristics of the participants and post-COVID-19 tourist consumer behaviors.
Hypothesis 1 was formed to determine whether there is a statistically significant difference between the gender variables of the participants and their perceptions of the dimensions of touristic consumer behaviors after COVID-19. In this direction,

Hypothesis $_{1.1}$: "There is a statistically significant difference between the gender status of the participants and their perceptions towards the general effects dimension of post-COVID-19 touristic consumer behaviors."

Hypothesis $_{1.2}$: "There is a statistically significant difference between the gender status of the participants and their perceptions towards the attitude and preference dimension of post-COVID-19 touristic consumer behaviors."

Hypothesis $_{1.3}$: "There is a statistically significant difference between the gender status of the participants and their perceptions towards the hygiene and safety dimension of tourist consumer behaviors after COVID-19."

Hypothesis 2 was formed to determine whether there is a statistically significant difference between the age variables of the participants and their perceptions of the dimensions of touristic consumer behaviors after COVID-19. In this direction,

Hypothesis $_{2.1}$: "There is a statistically significant difference between the age status of the participants and their perceptions towards the general effects dimension of touristic consumer behaviors after COVID-19."

Hypothesis $_{2.2}$: "There is a statistically significant difference between the age status of the participants and their perceptions towards the attitude and preference dimension of post-COVID-19 touristic consumer behaviors."

Hypothesis $_{2.3}$: "There is a statistically significant difference between the age status of the participants and their perception levels towards the hygiene and safety dimension of tourist consumer behaviors after COVID-19."

Hypothesis 3 was formed to determine whether there is a statistically significant difference between the participant's marital status variable and their perceptions of the dimensions of touristic consumer behaviors after COVID-19. In this direction,

Hypothesis $_{3.1}$: "There is a statistically significant difference between the marital status of the participants and their perceptions towards the general effects dimension of touristic consumer behaviors after COVID-19."

Hypothesis $_{3.2}$: "There is a statistically significant difference between the marital status of the participants and their perceptions towards the attitude and preference dimension of post-Covid-19 touristic consumer behaviors."

Hypothesis $_{3.3}$: "There is a significant difference between the marital status of the participants and their perception levels towards the hygiene and safety dimension of post-Covid-19 touristic consumer behaviors."

Hypothesis 4 was formed to determine whether there is a statistically significant difference between the participants' educational status variable and their perceptions of the dimensions of touristic consumer behaviors after COVID-19. In this direction,

Hypothesis $_{4.1}$: "There is a statistically significant difference between the educational level of the participants and their perceptions towards the general effects dimension of touristic consumer behaviors after COVID-19."

Hypothesis $_{4.2}$: "There is a statistically significant difference between the educational level of the participants and their perceptions towards the attitude and preference dimension of post-COVID-19 touristic consumer behaviors."

Hypothesis $_{4.3}$: "There is a statistically significant difference between the educational level of the participants and their perceptions towards the hygiene and safety dimension of tourist consumer behaviors after COVID-19."

Hypothesis 5 was formed to determine whether there is a statistically significant difference between the income levels of the participants and their perceptions of the dimensions of touristic consumer behaviors after COVID-19. In this direction,

Hypothesis $_{5.1}$: "There is a statistically significant difference between the income levels of the participants and their perceptions towards the general effects dimension of touristic consumer behaviors after COVID-19."

Hypothesis $_{5.2}$: "There is a statistically significant difference between the income levels of the participants and their perceptions towards the attitude and preference dimension of post-COVID-19 touristic consumer behaviors."

Hypothesis $_{5.3}$: "There is a statistically significant difference between the income levels of the participants and their perceptions towards the hygiene and safety dimension of tourist consumer behaviors after COVID-19."

2. FINDINGS

The frequency distributions of the participants' demographic characteristics, such as gender, age, marital status, education level, and income level, are presented in Table 1.

Table 1. Frequency Distribution of Participants' Demographic Characteristics

Gender	**f**	**%**	**Monthly Income**	**f**	**%**
Female	264	49,0	5500 TL and Less	151	28,0
Male	275	51,0	5501-7000 TL	142	26,3
Marital Status	**f**	**%**	7001-8500 TL	56	10,4
Married	279	51,8	8501-10000 TL	131	24,3
Single	260	48,2	10001 TL and more	59	10,9

Age Group	f	%	Education	f	%
18-24 years	29	5,4	Primary/High School	171	31,7
25-34 years	100	18,6	Associate / Bachelor's Degree	346	64,2
35-44 years	131	24,3	Postgraduate	22	4,1
45-54 years	197	36,5			
55 Years and older	82	15,2			

In the literature, the Cronbach Alpha coefficient, one of the most commonly used methods to test the reliability of scales, was utilized (Işık & Tırak, 2016, p. 322). As the calculated Cronbach Alpha value approaches 1, the reliability of the scale increases (Özdamar, 2010, p.605).

A reliability test was applied to the data obtained from the questionnaire forms. As a reliability test, Cronbach's alpha internal consistency value was calculated with a 5% margin of error. Cronbach's alpha values for the scale consisting of 22 propositions and its main dimensions, namely the general impact dimension (4 propositions), attitude and preference dimension (10 propositions), and hygiene and safety dimension (8 propositions), were calculated separately and given in Table 2.

Table 2. Cronbach's Alpha Values for Dimensions and Sub-dimensions of the Scale

Main Dimensions	Cronbach's Alpha	Main Dimensions	Number of Propositions	Cronbach's Alpha
Overall Impact Size (4 Proposition)	,855	Impact on Life	2	,754
		Impact on Tourism	2	,716
Attitude and Preference Dimension (10 Propositions)	,936	Tendency to Tourism	8	,942
		Attitude towards Tours	2	,680
Hygiene and Safety Dimension (8 Proposition))	,908	Food and Accommodation	2	,806
		Hygiene	6	,903

When the calculated Cronbach's Alpha internal consistency values of the main dimensions and sub-dimensions of the scale are examined, they are interpreted as having high reliability (Özdamar, 2010, p. 605). Kalaycı (2016) and Arıkan (2011) found no reliability problem in analyzing the research on interpreting Cronbach Alpha values.

Table 3. Results of the Scale Factor Analysis

Dimensions	Attitude and Preference		Hygiene and Safety		Overall Impact	
	Factor Loads		Factor Loads		Factor Loads	
Tendency to Tourism 7	,849					
Tendency to Tourism 1	,799					
Tendency to Tourism 6	,795					
Tendency to Tourism 8	,779					
Tendency to Tourism 2	,778					
Tendency to Tourism 3	,763					
Tendency to Tourism 4	,733					

Tendency to Tourism 5	,592					
Attitude towards Tours10		,729				
Attitude towards Tours9		,592				
Hygiene 4			,864			
Hygiene 7			,814			
Hygiene 8			,805			
Hygiene 5			,774			
Hygiene 6			,719			
Hygiene 3			,713			
Food and Accommodation 2				,688		
Food and Accommodation 1				,660		
Impact on Life 1					,776	
Impact on Life 2					,753	
Impact on Tourism 3						,883
Impact on Tourism 4						,752
Variance Explained %	42,926		14,668		7,726	
Eigenvalue	9,444		3,227		1,700	
KMO value 0,922 and Bartlett's value 0,000, Chi-Square: 8714,613, Significance: ,000						

As a prerequisite for applying factor analysis, the values of Kaiser Meyer Olkin's (KMO) and Bartlett's tests must be appropriate according to specific ranges. Since the KMO value is above 0.50 and Bartlett's test value is 0.000, the prerequisites for factor analysis are met (Hair et al., 2010, pp. 95–96). When the factor analysis results were analyzed, 22 propositions were grouped under three main factors. Firstly, the perception component of the effects of COVID-19 on attitude and preference, which consists of 10 propositions, explains 42.926% of the attributes tried to be measured on this scale. Consisting of 8 propositions, the perception component of COVID-19's effects on hygiene and safety explains 14.668% of the features in this scale. Consisting of 4 propositions, the perception component for the general effects of COVID-19 explains 7.726% of the features tried to be measured on this scale. When analyzed, the scale used explains that 65.320% of the traits tried to be measured.

In the second part of the questionnaire form, the scale, consisting of three main dimensions and six sub-dimensions depending on these main dimensions, was tested to measure whether it showed a normal distribution. The skewness and kurtosis values of the scale used were examined, and it was determined that the data showed a normal distribution since these values were between -1.5 and +1.5 (Tabachnick & Fidell, 2013). Since the data obtained from the questionnaire forms showed a normal distribution, the independent sample t-test and one-way ANOVA tests, which are parametric, were applied to determine the significant difference between dependent and independent variables.

Table 4. Comparison of Main Dimensions of Participants' Perceptions of Touristic Consumer Behaviors after COVID-19 According to Gender Variable

Variable	Group	n	$\overline{X}$	ss.	t value	p
Overall Impact	Female	264	3,86	,863	-,106	,915
	Male	275	3,87	,748		
Attitude and Preference	Female	264	3,49	,832	-1,594	,111
	Male	275	3,60	,763		
Hygiene and Safety	Female	264	3,45	,843	-1,242	,215
	Male	275	3,53	,719		

A t-test was used to examine how the participants felt about the different aspects of tourist behavior after COVID-19 based on gender. The results showed that the general impact dimension had a significance level of 0.915, the attitude and preference dimension had a significance level of 0.111, and the hygiene and safety dimension had a significance level of 0.215. Since these values are greater than 0.05, there is no significant difference between the participants' perceptions of these dimensions and their gender status.

Table 5. Comparison of Participants' Perceptions of Touristic Consumer Behaviors after COVID-19 According to Gender Variable

Variable	Group	n	$\overline{X}$	ss.	t value	p
Impact on Life	Female	264	3,80	,918	,040	,968
	Male	275	3,79	,809		
Impact on Tourism	Female	264	3,92	,886	-,238	,812
	Male	275	3,94	,820		
Tendency to Tourism	Female	264	3,47	,848	-1,627	,104
	Male	275	3,58	,774		
Attitude towards Tours	Female	264	3,57	,882	-1,264	,207
	Male	275	3,66	,836		
Food and Accommodation	Female	264	3,46	,949	-1,034	,302
	Male	275	3,54	,878		
Hygiene	Female	264	3,44	,881	-1,188	,235
	Male	275	3,53	,767		

As a result of the t-test, the participants' perceptions of the sub-dimensions of touristic consumer behaviors after COVID-19 were examined according to the gender status of the participants, and the significance level of the participants' impact on life dimension was calculated as p=0,968; the significance level of the impact on tourism dimension was calculated as p=0,812; the significance level of the tendency towards tourism dimension was calculated as p=0,104; the significance level of the attitude towards tours dimension was calculated as p=0,207; the significance level of the food and

accommodation dimension was calculated as p=0,302; the significance level of the hygiene dimension was calculated as p=0,235. Since these values are greater than 0.05, there is no significant difference between the participants' perceptions of these dimensions and their gender status.

Table 6. Comparison of Main Dimensions of Participants' Perceptions of Touristic Consumer Behaviors after Covid-19 According to Age Variable

Variable	**Group**	**n**	$\overline{X}$	**F**	**p**
Overall Impact	18-24 years	29	3,17	40,481	,000*
	25-34 years	100	3,30		
	35-44 years	131	3,76		
	45-54 years	197	4,13		
	55 Years and older	82	4,32		
Attitude and Preference	18-24 years	29	3,19	10,385	,000*
	25-34 years	100	3,21		
	35-44 years	131	3,52		
	45-54 years	197	3,68		
	55 Years and older	82	3,81		
Hygiene and Safety	18-24 years	29	3,03	6,819	,000*
	25-34 years	100	3,24		
	35-44 years	131	3,54		
	45-54 years	197	3,60		
	55 Years and older	82	3,61		

As a result of the one-way ANOVA test, the participants' perceptions of the dimensions of touristic consumer behaviors after COVID-19 were examined according to their age. The significance level of the participants' general impact dimension was calculated as p = 0,000; the significance level of the attitude and preference dimension was calculated as p = 0,000; and the significance level of the hygiene and safety dimension was calculated as p = 0,000. Since these values are less than 0.05, it is determined that there is a significant difference between the participants' perceptions of these dimensions and their age status.

As a result of the Tukey test applied from the post hoc tests, the perceptions of the participants between the ages of 35-44 towards the general effects dimension of touristic consumer behavior after COVID-19 are higher than the participants between the ages of 18-24 (p-value = 0.000) and 25-34 (p-value = 0.000). Participants aged 45-54 years have higher perceptions of the general effects of post-Covid-19 touristic consumer behaviors than participants aged 18-24 years (p-value = 0.000), 25-34 years (p-value = 0.000), and 35-44 years (p-value = 0.000). Participants aged 55 years and over have higher perceptions of the general effects of post-Covid-19 touristic consumer behaviors than participants aged 18-24 years (p-value = 0.000), 25-34 years (p-value = 0.000), 35-44 years (p-value = 0.000) and 45-54

years (p-value = 0.000). As the age of the participants increases, their perceptions towards the general effects dimension of post-COVID-19 tourist consumer behaviors also increase.

Participants aged 35–44 have higher perceptions of the attitude and preference effects dimension of post-COVID-19 touristic consumer behaviors than participants aged 25–34 (p-value = 0,022). Participants aged 45–54 have higher perceptions of the attitudes and preference effects dimension of post-COVID-19 touristic consumer behaviors than participants aged 18–24 (p-value = 0.013) and 25–34 (p-value = 0.000). Participants aged 55 years and over have higher perceptions of the attitude and preference effects dimension of post-Covid-19 touristic consumer behaviors than participants aged 18–24 years (p-value = 0.002), 25–34 years (p-value = 0.000), and 35–44 years (p-value = 0.049).

Participants aged 35–44 have higher perceptions of the hygiene and safety effects dimension of post-COVID-19 tourist consumer behaviors than participants aged 18–24 (p-value = 0.010) and 25–34 (p-value = 0.028). Participants aged 45–54 have higher perceptions of the hygiene and safety effects dimension of post-COVID-19 touristic consumer behaviors than participants aged 18–24 (p-value = 0.002) and 25–34 (p-value = 0.002). Participants aged 55 and over have higher perceptions of the hygiene and safety effects dimension of post-COVID-19 touristic consumer behaviors than participants aged 18–24 (p-value = 0.005) and 25–34 (p-value = 0.013).

Table 7. Comparison of Participants' Perceptions of Touristic Consumer Behaviors after COVID-19 According to Age Variable

Variable	Group	n	$\overline{X}$	F	p
Impact on Life	18-24 years	29	3,00	32,821	,000*
	25-34 years	100	3,26		
	35-44 years	131	3,71		
	45-54 years	197	4,04		
	55 Years and older	82	4,27		
Impact on Tourism	18-24 years	29	3,34	33,790	,000*
	25-34 years	100	3,34		
	35-44 years	131	3,80		
	45-54 years	197	4,22		
	55 Years and older	82	4,37		
Tendency to Tourism	18-24 years	29	3,16	10,736	,000*
	25-34 years	100	3,17		
	35-44 years	131	3,50		
	45-54 years	197	3,67		
	55 Years and older	82	3,80		
Attitude towards Tours	18-24 years	29	3,29	6,775	,000*
	25-34 years	100	3,34		
	35-44 years	131	3,58		
	45-54 years	197	3,71		
	55 Years and older	82	3,89		
	18-24 years	29	3,13	2,346	,054

Food and Accommodation	25-34 years	100	3,36		
	35-44 years	131	3,53		
	45-54 years	197	3,57		
	55 Years and older	82	3,59		
Hygiene	18-24 years	29	3,00	7,504	,000*
	25-34 years	100	3,21		
	35-44 years	131	3,55		
	45-54 years	197	3,61		
	55 Years and older	82	3,61		

As a result of the one-way ANOVA test, the participants' perceptions of the sub-dimensions of touristic consumer behaviors after COVID-19 were examined according to their age status. The significance level of the participants' impact on life dimension was calculated as p = 0.000; the significance level of the impact on tourism dimension was calculated as p = 0.000; the significance level of the tendency towards tourism dimension was calculated as p = 0.000; the significance level of the attitude towards tours dimension was calculated as p = 0.000; the significance level of the food and accommodation dimension was calculated as p = 0.054; the significance level of the hygiene dimension was calculated as p = 0.000. Since the significance level of the food and accommodation dimension is greater than 0.05, there is no significant difference between the participants' perceptions of this dimension and their age status. Since the significance level for the dimensions of impact on life, impact on tourism, a tendency towards tourism, attitude towards tours, and hygiene is less than 0.05, there is a significant difference between the participants' perceptions towards these dimensions and their age status.

As a result of the Tukey test applied to the post hoc tests, the perceptions of the participants aged 35–44 years on the effects of COVID-19 on life are higher than those of the participants aged 18–24 years (p-value = 0.000) and 25–34 years (p-value = 0.000). Participants aged 45–54 have higher perceptions of the effects of COVID-19 on life than participants aged 18–24 (p-value = 0.000), 25–34 (p-value = 0.000), and 35–44 (p-value = 0.002). Participants aged 55 years and over have higher perceptions of the effects of COVID-19 on life dimensions than participants aged 18–24 years (p-value = 0.000), 25–34 years (p-value = 0.000), and 35–44 years (p-value = 0.000). As the age of the participants increases, their perceptions of the effects of COVID-19 on life dimensions also increase.

As a result of the Tukey test applied as a post hoc test, participants aged 35–44 years have higher perceptions of the effects of COVID-19 on tourism than participants aged 18–24 years (p-value = 0.027) and 25–34 years (p-value = 0.000). Respondents aged 45–54 have higher perceptions of the impacts of COVID-19 on tourism than respondents aged 18–24 (p-value = 0.000), 25–34 (p-value = 0.000), and 35–44 (p-value = 0.002). Participants aged 55 and over have higher perceptions of the impacts of COVID-19 on the tourism dimension than participants aged 18–24 (p-value = 0.000), 25–34 (p-value =

0.000), and 35–44 (p-value = 0.000). As the age of the participants increases, their perceptions of the effects of COVID-19 on tourism also increase.

Participants aged 35–44 have higher perceptions of the impact of COVID-19 on tourism orientation than participants aged 25–34 (p-value = 0.015). Respondents aged 45–54 have higher perceptions of the impact of COVID-19 on tourism orientation than respondents aged 18–24 (p-value = 0.011) and 25–34 (p-value = 0.000). Participants aged 55 and over have higher perceptions of the impact of COVID-19 on tourism orientation than participants aged 18–24 (p-value = 0.002) and 25–34 (p-value = 0.000). As the age of the participants increases, their perceptions of COVID-19 on tourism also tend to increase. Participants aged 45–54 have higher perceptions of the effects of COVID-19 on attitudes towards tours than participants aged 25–34 (p-value = 0.003). Participants aged 55 and over have higher perceptions of the effects of COVID-19 on attitudes towards tours than participants aged 18–24 (p-value = 0.009) and 25–34 (p-value = 0.000). As the age of the participants increases, their perceptions of the effects of COVID-19 on their attitudes towards tours also increase.

Participants aged 35–44 years have higher perceptions of the effect of COVID-19 on hygiene than participants aged 18–24 years (p-value = 0.008) and 25–34 years (p-value = 0.014). Participants aged 45–54 years have higher perceptions of the effect of COVID-19 on hygiene than participants aged 18–24 years (p-value = 0.001) and 25–34 years (p-value = 0.001). Participants aged 55 years and over have higher perceptions of the effect of COVID-19 on hygiene than participants aged 18–24 years (p-value = 0.004) and 25–34 years (p-value = 0.007). As the age of the participants increases, their perceptions of COVID-19 in terms of hygiene also increase.

Table 8. Comparison of Main Dimensions of Participants' Perceptions of Touristic Consumer Behaviors after Covid-19 According to Marital Status Variable

Variable	**Group**	**n**	$\overline{X}$	**ss.**	**t value**	**p**
Overall Impact	Married	279	3,88	,785	,518	,605
	Single	260	3,84	,800		
Attitude and Preference	Married	279	3,60	,793	1,714	,087
	Single	260	3,48	,802		
Hygiene and Safety	Married	279	3,65	,731	5,101	,000*
	Single	260	3,32	,800		

As a result of the t-test, the participant's perceptions of the dimensions of touristic consumer behaviors after COVID-19 were examined according to their marital status, and the significance level of the participants' general impact dimension was calculated as p = 0.605; the significance level of the attitude and preference dimension was calculated as p = 0.087; and the significance level of the hygiene and safety dimension was calculated as p = 0.000. Since the significance values for the general impact, attitude, and preference dimensions are greater than 0.05, there is no significant difference between the

participants' perceptions of these dimensions and their marital status. Since the significance value for the hygiene and safety dimension is less than 0.05, there is a significant difference between the participants' perceptions of the hygiene and safety dimension and their marital status. Married participants have higher perceptions of the effect of COVID-19 on hygiene and safety than single participants.

Table 9. Comparison of Sub-Dimensions of Participants' Perceptions of Touristic Consumer Behaviors after COVID-19 According to Marital Status Variable

Variable	Group	n	$\overline{X}$	ss.	t value	p
Impact on Life	Married	279	3,82	,846	,639	,523
	Single	260	3,77	,883		
Impact on Tourism	Married	279	3,94	,837	,315	,753
	Single	260	3,92	,869		
Tendency to Tourism	Married	279	3,60	,804	2,001	,046*
	Single	260	3,46	,816		
Attitude towards Tours	Married	279	3,63	,848	,414	,679
	Single	260	3,60	,873		
Food and Accommodation	Married	279	3,60	,862	2,506	,012*
	Single	260	3,40	,957		
Hygiene	Married	279	3,67	,774	5,529	,000*
	Single	260	3,29	,834		

As a result of the t-test, the participants' perceptions of the sub-dimensions of touristic consumer behaviors after COVID-19 were examined according to the participant's marital status, and the significance level of the participants' impact on life dimension was calculated as p = 0,523; the significance level of the impact on tourism dimension was calculated as p = 0,753; and the significance level of the attitude towards tours dimension was calculated as p = 0,679. Since these values are greater than 0.05, there is no significant difference between the participants' perceptions of these dimensions and their marital status.

The significance level of the participants' tendency towards the tourism dimension was calculated as p = 0,046; the level of significance of the food and accommodation dimension was calculated as p = 0,012; and the level of significance of the hygiene dimension was calculated as p = 0,000. Since these values are less than 0.05, there is a significant difference between the perceptions of the participants towards these dimensions and their marital status. Married participants' perceptions of the effects of COVID-19 on tourism tendencies, food and accommodation, and hygiene are higher than those of single participants.

Table 10. Comparison of Main Dimensions of Participants' Perceptions of Touristic Consumer Behaviors after COVID-19 According to Education Level Variable

Variable	Group	n	$\overline{X}$	F	p
Overall Impact	Primary/High School	171	3,84	,064	,938
	Associate/Bachelor's Degree	346	3,87		
	Postgraduate	22	3,87		
Attitude and Preference	Primary/High School	171	3,46	3,611	,028*
	Associate/Bachelor's Degree	346	3,56		
	Postgraduate	22	3,92		
Hygiene and Safety	Primary/High School	171	2,97	73,444	,000*
	Associate/Bachelor's Degree	346	3,70		
	Postgraduate	22	4,14		

As a result of the one-way ANOVA test, participants' perceptions of the dimensions of touristic consumer behaviors after COVID-19 were examined according to their educational status. The significance level of the participants' general impact dimension was calculated as p = 0.938. Since this value is greater than 0.05, there is no significant difference between the participant's perceptions of the general impact dimension and their educational status. The significance level of the participants' attitude and preference dimension was calculated as p = 0,028, and the significance level of the hygiene and safety dimension was calculated as p = 0,000. Since these values are less than 0.05, it is determined that there is a significant difference between the participants' perceptions of these dimensions and their educational status.

The perceptions of the participants at the graduate education level on the effect of COVID-19 on attitude and preference are higher than those at the primary/high school level. Graduate and associate's/undergraduate education level participants have higher perceptions of the effect of COVID-19 on hygiene than primary/high school participants. As the education level of the participants increases, their perceptions of Covid-19 on hygiene also increase.

Tablo 11. Katılımcıların Covid-19 Sonrası Turistik Tüketici Davranışlarına Yönelik Algılarının Eğitim Düzeyi Değişkenine Göre Alt Boyutların Karşılaştırılması

Variable	Group	n	$\overline{X}$	F	p
Impact on Life	Primary/High School	171	3,76	,255	,775
	Associate/Bachelor's Degree	346	3,81		
	Postgraduate	22	3,75		
Impact on Tourism	Primary/High School	171	3,93	,066	,936
	Associate/Bachelor's Degree	346	3,93		
	Postgraduate	22	4,00		
Tendency to Tourism	Primary/High School	171	3,44	3,601	,028*
	Associate/Bachelor's Degree	346	3,55		
	Postgraduate	22	3,90		
Attitude towards Tours	Primary/High School	171	3,54	2,803	,062
	Associate/Bachelor's Degree	346	3,62		
	Postgraduate	22	4,00		

Food and Accommodation	Primary/High School	171	3,00	43,628	,000*
	Associate/Bachelor's Degree	346	3,72		
	Postgraduate	22	3,95		
Hygiene	Primary/High School	171	2,96	67,731	,000*
	Associate/Bachelor's Degree	346	3,70		
	Postgraduate	22	4,20		

As a result of the one-way ANOVA test, the participants' perceptions of the sub-dimensions of touristic consumer behaviors after COVID-19 were examined according to their educational status. The significance level of the participants' impact on life dimension was calculated as p = 0,775; the significance level of the impact on tourism dimension was calculated as p = 0,936; and the significance level of the attitude towards tours dimension was calculated as p = 0,062. Since the significance level of these sub-dimensions is greater than 0.05, there is no significant difference between the participants' perceptions of these dimensions and their educational status.

There is a significant difference between the participants' perceptions of these dimensions and their educational status, as the significance level for the tourism trend sub-dimension (p = 0.028), the significance level for the food and accommodation sub-dimension (p = 0.000), and the significance level for the hygiene sub-dimension (p = 0.000) are less than 0.05. The perceptions of the participants at the postgraduate education level on the effect of COVID-19 on the tendency toward tourism are higher than those of the participants at the primary or high school level. Participants with associate's, undergraduate, and graduate education have higher perceptions of the effect of COVID-19 on food and accommodation than participants with primary or high school education. Participants with associate's, undergraduate, and postgraduate education levels have higher perceptions about the effect of COVID-19 on hygiene than participants with primary or high school education levels.

Table 12. Comparison of Main Dimensions According to Income Levels of Participants' Perceptions of Touristic Consumer Behaviors after COVID-19

Variable	**Group**	**n**	$\overline{X}$	**F**	**p**
Overall Impact	5500 TL and less	151	3,78	,916	,454
	5501-7000 TL	142	3,86		
	7001-8500 TL	56	3,83		
	8501-10000 TL	131	3,93		
	10001 TL and more	59	3,96		
Attitude and Preference	5500 TL and less	151	3,56	,035	,998
	5501-7000 TL	142	3,53		
	7001-8500 TL	56	3,54		
	8501-10000 TL	131	3,54		
	10001 TL and more	59	3,56		
Hygiene and Safety	5500 TL and less	151	3,55	,912	,457
	5501-7000 TL	142	3,39		

	7001-8500 TL	56	3,48		
	8501-10000 TL	131	3,53		
	10001 TL and more	59	3,51		

As a result of the one-way ANOVA test, participants' perceptions of the dimensions of touristic consumer behaviors after COVID-19 were examined according to their income levels. The significance level of the participants' general impact dimension was calculated as p=0.454; the significance level of the attitude and preference dimension was calculated as p=998; the significance level of the hygiene and safety dimension was calculated as p=0.457; and since these values are greater than 0.05, there is no significant difference between the participant's perceptions of the dimensions and their income levels.

Table 13. Comparison of Sub-Dimensions of Participants' Perceptions of Touristic Consumer Behaviors after COVID-19 According to Income Levels

Variable	**Group**	**n**	$\overline{X}$	**F**	**p**
Impact on Life	5500 TL and less	151	3,68	1,262	,284
	5501-7000 TL	142	3,80		
	7001-8500 TL	56	3,79		
	8501-10000 TL	131	3,88		
	10001 TL and more	59	3,91		
Impact on Tourism	5500 TL and less	151	3,88	,449	,773
	5501-7000 TL	142	3,93		
	7001-8500 TL	56	3,88		
	8501-10000 TL	131	3,98		
	10001 TL and more	59	4,01		
Tendency to Tourism	5500 TL and less	151	3,55	,044	,996
	5501-7000 TL	142	3,51		
	7001-8500 TL	56	3,53		
	8501-10000 TL	131	3,53		
	10001 TL and more	59	3,53		
Attitude towards Tours	5500 TL and less	151	3,60	,107	,980
	5501-7000 TL	142	3,60		
	7001-8500 TL	56	3,60		
	8501-10000 TL	131	3,61		
	10001 TL and more	59	3,68		
Food and Accommodation	5500 TL and less	151	3,47	,087	,986
	5501-7000 TL	142	3,53		
	7001-8500 TL	56	3,48		
	8501-10000 TL	131	3,51		
	10001 TL and more	59	3,51		
Hygiene	5500 TL and less	151	3,57	1,682	,153
	5501-7000 TL	142	3,34		
	7001-8500 TL	56	3,48		
	8501-10000 TL	131	3,53		
	10001 TL and more	59	3,51		

As a result of the one-way ANOVA test, participants' perceptions of the sub-dimensions of touristic consumer behaviors after COVID-19 were examined according to their income levels. The significance level of the impact on life dimension of the participants was calculated as p=0.284; the significance level of the impact on tourism dimension was calculated as p=0.773; the significance level of the tendency towards tourism dimension was calculated as p=0.996; the significance level of the attitude towards tours dimension was calculated as p=0.980; the significance level of the food and accommodation dimension was calculated as p=0.986; the significance level of the hygiene dimension was calculated as p=0.153. Since the significance level of these sub-dimensions is greater than 0.05, no significant difference exists between the participants' perceptions of these dimensions and their income levels.

In line with the research model, correlation analysis was applied to determine the level and direction of the relationship between the main dimensions and sub-dimensions of the scale. Correlation coefficients are used to determine the direction and strength of the relationship between two variables, and the strength of the relationship increases as it approaches -1 and +1. At the same time, it decreases as it approaches 0. -1 indicates a negative exact relationship, and +1 indicates a positive exact relationship (Alpar, 2018, p. 403).

Table 14. Correlation Analysis Results between the Main Dimensions of Touristic Consumer Behavior after COVID-19

	Overall Impact	**Attitude and Preference**	**Hygiene and Safety**
Overall Impact	1		
Attitude and Preference	,565**	1	
Hygiene and Safety	,275**	,467**	1

When the correlation coefficients of the main variables in the scale are examined, there is a moderate, positive, and statistically significant relationship between the participants' perception levels towards the attitudes and preferences of COVID-19 and their perception levels towards its general effects ($r = 0.565$; $p < 0.05$). There is a low (weak), positive, and statistically significant relationship between the participants' perception levels regarding the effects of COVID-19 on hygiene and safety and their perception levels regarding its general effects ($r = 0.275$; $p < 0.05$). There is a moderate, positive, and statistically significant relationship between the participants' perception levels regarding the effects of COVID-19 on hygiene and safety and their perception levels regarding attitudes and preferences ($r = 0.467$; $p < 0.05$).

Table 15. Correlation Analysis Results between the Sub-Dimensions of Touristic Consumer Behavior after Covid-19

	Impact on Life	Impact on Tourism	Tendency to Tourism	Attitude towards Tours	Food and Accommodation	Hygiene
Impact on Life	1					
Impact on Tourism	,704**	1				
Tendency to Tourism	,553**	,496**	1			
Attitude towards Tours	,478**	,405**	,837**	1		
Food and Accommodation	,194**	,180**	,330**	,294**	1	
Hygiene	,269**	,235**	,476**	,377**	,626**	1

When the correlation coefficients of the sub-variables in the scale are examined, there is a high (strong), positive, and statistically significant relationship between the participants' perception levels of the impact of COVID-19 on tourism and their perception levels of its impact on life ($r = 0.704$, $p < 0.05$).

There is a moderate ($r = 0.553$; $p < 0.05$) and moderate ($r = 0.496$; $p < 0.05$) positive and statistically significant relationship between the participants' perception levels of COVID-19 towards tourism tendencies and their perception levels towards its effects on life, and a moderate ($r = 0.496$; $p < 0.05$) positive and statistically significant relationship with their perception levels towards its effects on tourism.

There is a moderate ($r = 0,478$; $p < 0.05$), moderate ($r = 0,405$; $p < 0.05$), and high ($r = 0,837$; $p < 0.05$) positive and statistically significant relationship between the participants' perception levels towards COVID-19's attitudes towards tours and their perception levels towards its effects on life, and a high ($r = 0,837$; $p < 0.05$) positive and statistically significant relationship with their perception levels towards its effects on tourism.

There is a low level ($r = 0,194$; $p < 0.05$), negligibly low level ($r = 0,180$; $p < 0.05$), weak level ($r = 0,330$; $p < 0.05$), and weak level ($r = 0,294$; $p < 0.05$) positive and statistically significant relationship between the participants' perception levels of COVID-19 towards food and accommodation and their perception levels towards its effects on life, its effect on tourism, and their perception levels towards its effect on tourism.

There is a low level ($r = 0,269$; $p < 0.05$) between the participants' perception levels of COVID-19 towards hygiene and their perception levels towards its effects on life; a negligibly low level ($r = 0,235$; $p < 0.05$), moderate ($r = 0.476$; $p < 0.05$), weak ($r = 0.377$; $p < 0.05$), moderate ($r = 0.626$; $p < 0.05$), and statistically significant positive correlations were found between the levels of perception

towards tourism tendency and the levels of perception towards attitudes towards tours, food, and accommodation.

While 9 of the hypotheses (Hypothesis $_{1.1.}$ - Hypothesis $_{1.2.}$ - Hypothesis $_{1.3.}$ - Hypothesis $_{3.1.}$ - Hypothesis $_{3.2.}$ - Hypothesis $_{4.1.}$ - Hypothesis $_{5.1.}$ -Hypothesis $_{5.2.}$ -Hypothesis $_{5.3.}$) were rejected, while 6 (Hypothesis $_{2.1.}$ -Hypothesis $_{2.2.}$ -Hypothesis $_{2.3.}$ -Hypothesis $_{3.3.}$ -Hypothesis $_{4.2.}$ -Hypothesis $_{4.3.}$) were accepted.

CONCLUSION

The COVID-19 pandemic is one of the biggest problems disrupting the global economy. Due to the unavailability or limited availability of vaccines and therapeutic medical interventions during the pandemic, many countries have implemented non-medical interventions such as home isolation, voluntary or compulsory quarantine, and social distancing rules. Such restrictions have hurt the tourism sector, which is particularly important for the economies of underdeveloped countries. Due to travel bans, limited travel opportunities, and canceled flights by airline companies worldwide, the tourism sector experienced a significant decline. Since the COVID-19 pandemic hurt economic growth, changes in procedures and practices were made in the fight against COVID-19 within the scope of normalization in the tourism sector. Although essential steps and practices were taken for the normalization process, many tourists postponed or canceled their travels. All these developments have significantly affected tourists' behavior. The COVID-19 pandemic has had many sociological, psychological, economic, and cultural impacts on tourist consumer behavior. Tourists have turned to outdoor activities such as nature walks, cycling, and camping. In addition, tourists have turned to accommodation establishments where measures have been taken against COVID-19 and hygiene standards are high (social distancing rules, the obligation to wear masks, cleaning protocols, etc.). These changes in tourist behavior reflect a shift towards prioritizing health and safety during travel. Furthermore, the pandemic has also increased reliance on technology for booking and planning trips as travelers seek to minimize physical contact and gather information about destinations remotely.

The research aims to determine and compare the effects of Covid-19 on tourist consumer behavior. As a result of the factor analysis conducted within the scope of this purpose, the scale used explains 65.320% of the characteristics to be measured. This finding is higher than the factor analysis conducted by Öztürk and Tankuş (2020) on the same scale. It was determined that there was no significant difference between the gender variables of the participants and their perception levels towards the dimensions of post-COVID-19 tourist consumer behaviors. According to the t-test results for the dimensions of the scale, the findings obtained regarding the gender variable and the effects on post-Covid-19 life, attitude and preference, hygiene, and safety differ from the studies conducted by

Kabadayı and Kardeş (2020) and Öztürk and Tankuş (2020) in the literature. While there was no difference in hygiene according to gender in the study, Kabadayı and Kardeş (2020) stated that women gave more importance to hygiene than men in their study. The findings obtained regarding the gender variable and its effects on post-COVID-19 tourism and attitudes towards tours, food, and accommodation are supported by the study conducted by Öztürk and Tankuş (2020) in the literature.

It has been determined that there is a significant difference between the age variables of the participants and their perception levels towards the dimensions of touristic consumer behaviors after COVID-19. It has been determined that there is a significant difference between the participants' perceptions of general impact, attitude and preference, hygiene and safety dimensions after COVID-19, and their age status. According to the one-way ANOVA test results for the scale dimensions, a significant difference was found between the age variable and the effects on life after COVID-19, the effects on tourism, tourism tendency, attitudes towards tours, and hygiene. The results in the literature differ from those of the study by Öztürk and Tankuş (2020). In contrast, Kabaday and Kardeş's (2020) study produced results comparable to those of the general impact dimension of COVID-19. The study by Öztürk and Tankuş (2020) in the literature found a significant difference between the age variable and the effects on food and lodging after COVID-19, and the results obtained are consistent with these findings. When the results are examined, as the age of the participants increases, their perception levels towards the dimensions of post-COVID-19 tourist consumer behaviors increase.

It was determined that there was no significant difference between the participants' marital status and their perception levels regarding the general effects, attitudes, and preferences after COVID-19. At the same time, there was a significant difference in the hygiene dimension. According to the t-test results for the scale dimensions, no significant difference was found between the marital status variable and the effects on life after COVID-19, effects on tourism, attitudes towards tours, and food and accommodation. The study by Öztürk and Tankuş (2020) in the literature supports the results. The results differ from the study by Öztürk and Tankuş (2020) in the literature because there was a significant difference between the marital status variable and the post-Covid-19 tourism tendency and its effects on hygiene. When the results are examined, the tendency of married participants toward tourism and their perception levels towards hygiene is higher than that of single participants.

It was determined that there was no significant difference between the participants' educational status variable and their perception levels regarding the general effects of COVID-19. At the same time, there was a significant difference in the attitude and preference, hygiene, and safety dimensions. As the education level of the participants increases, their perceptions of the attitudes and preferences of COVID-19 on hygiene and safety also increase. The findings of Kabaday and Kardeş's (2020) study differ from this one. According to the one-way ANOVA test results for the scale dimensions, there is no significant difference between the educational status variable and the effects on life after COVID-

19, the effects on tourism, and the effects on attitudes towards tours. A significant difference was found between the educational status variable and the effects on the tendency towards tourism, food and accommodation, and hygiene after COVID-19. As the education level of the participants increases, their perceptions of COVID-19 on tourism tendencies, food and accommodation, and hygiene also increase.

It was determined that there was no significant difference between the income status of the participants and their perception levels towards the dimensions of touristic consumer behaviors after COVID-19. According to the one-way ANOVA test results for the scale dimensions, there is no significant difference between the income status variable and the effects on life after COVID-19, effects on tourism, tourism tendency, attitude towards tours, food, accommodation, and hygiene.

According to the results of the correlation analysis between the main dimensions and sub-dimensions of the scale, there is a statistically significant relationship between all scale dimensions. There is a moderate, positive, and statistically significant relationship between the perception levels of Covid-19 towards attitudes and preferences and the perception levels towards its general effects; a low (weak) relationship between the perception levels of Covid-19 towards its effects on hygiene and safety and the perception levels towards its general effects; and a moderate, positive, and statistically significant relationship between the perception levels of Covid-19 towards its effects on hygiene and safety and the perception levels towards attitudes and preferences. According to the correlation analysis between the sub-dimensions, the highest level of relationship ($r = 0.837$) was found between the attitude towards the tour dimension and the tendency towards the tourism dimension. In contrast, the lowest level of relationship ($r = 0.180$) was found between the food and accommodation dimension and the impact on the tourism dimension.

When the results of the study are compared with the studies in the literature, differences were found between the demographic characteristics of the participants, especially in terms of general impact, hygiene, and safety after COVID-19. The most important reason for the changes and differences in the attitudes and behaviors of tourists compared to the pre-pandemic period is the high-risk perception and fear caused by COVID-19 (Neuburger & Egger, 2020). At the same time, during the COVID-19 process, tourists take protective measures, especially in terms of hygiene, to reduce the risk, and then this situation becomes a habit (Silik et al., 2020; Aydın & Doğan, 2020; Chebli & Said, 2020; He & Harris, 2020; Wen et al., 2020; Shaikh, 2020; Çakıroğlu et al., 2020).

Regarding the long-term effects of the COVID-19 pandemic, it is predicted that tourists will prefer less popular destinations, increased interest in travel insurance, tourists' desire for more information, and preference to travel in low season (Chebli & Said, 2020), tourists will increase their tendency towards alternative tourism types where tourists participate in smaller groups, and individual travel will increase by turning to tourism types such as camping caravans (Aydın & Doğan, 2020;

Yenişehirlioğlu & Salha, 2020). Considering the findings obtained and the results of the studies in the literature, it is essential to be more sensitive about hygiene in tourism facilities and service providers, which is called the "new normal" that cannot be returned to COVID-19, and to reorganize and improve the scope of hygiene protocols, to create emergency plans, to develop services to reduce contacts, and to use automation systems more intensively.

As suggestions for future studies, it is essential to compare the results obtained by conducting the same or similar studies in different tourist destinations in different periods and to see the changes, differences, and similarities of the effects of COVID-19 in the long term.

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