



# Article The Effects of Media Encouragements on Coronavirus Vaccination Decision and Public Interest in Traveling Abroad

Aleksandar Radic <sup>1</sup><sup>1</sup>, Bonhak Koo <sup>2</sup>, Jinkyung Jenny Kim <sup>3</sup>, Antonio Ariza-Montes <sup>4</sup>, Alejandro Vega-Muñoz <sup>5</sup> and Heesup Han <sup>6,\*</sup>

- <sup>1</sup> Independent Researcher, Gornji Kono 8, 20000 Dubrovnik, Croatia; aleradic@gmail.com
- <sup>2</sup> Department of Hospitality and Retail Management, College of Human Sciences, Texas Tech University, P.O. Box 41240, Lubbock, TX 79409, USA; Bonhak1986@gmail.com
- <sup>3</sup> School of Hotel and Tourism Management, Youngsan University, 142 Bansong Beltway, Haeundae-gu, Busan 48015, Korea; jennykim1120@gmail.com
- <sup>4</sup> Social Matters Research Group, Universidad Loyola Andalucía, C/Escritor Castilla Aguayo, 4, 14004 Córdoba, Spain; ariza@uloyola.es
- <sup>5</sup> Public Policy Observatory, Universidad Autónoma de Chile, Santiago 7500912, Chile; alejandro.vega@uautonoma.cl
- <sup>6</sup> College of Hospitality and Tourism Management, Sejong University, 98 Gunja-Dong, Gwanjin-Gu, Seoul 05006, Korea
- \* Correspondence: heesup.han@gmail.com

Abstract: A lack of knowledge exists about individuals' vaccination decisions and their relation to their tourism behaviors. In this regard, this study examines the willingness of international travelers to take a COVID-19 vaccine prior to traveling. A quantitative research design with a survey method and the ordinary least square (OLS) multiple regression analysis was used to test the hypotheses. The media encouragement positively affected the travelers' attitude toward the behavior and their injunctive social norm, whereas the travelers' attitude toward the behavior and injunctive social norm positively affected their COVID-19 vaccination intention. The regression results also proved the mediating effect of both attitudes toward the behavior and injunctive social norm in the relationship between media encouragement and COVID-19 vaccination intention. This research successfully provided evidence regarding the role of media encouragement in travelers' willingness to take the COVID-19 vaccination.

**Keywords:** coronavirus vaccination; international traveling; attitude; media encouragement; injunctive social norm; socio-demographic factors

# 1. Introduction

The COVID-19 pandemic led to the fallout of international tourism in 2020/2021, which was mainly due to government-issued lockdowns and government-issued travel restrictions and bans [1]. In 2020, international tourism more precisely experienced an almost complete annihilation under the COVID-19 pandemic as international tourist arrivals declined by 84% between March and December compared to the same period in 2019 [2]. Moreso, international tourist arrivals dropped by 65% between January 2021 and May 2021 compared to the same period in 2020 [3]. There is hope that COVID-19 vaccinations and passports will assist with the recovery of international tourism [1].

However, one needs to bear in mind that the COVID-19 pandemic is still an ongoing health crisis [4] that devastated international tourism [1] and changed international travelers' attitudes, norms, and behavior [5]. In the late spring and early summer of 2021, COVID-19 passports, used as proof of having a COVID-19 vaccination, were introduced by various countries [1]. These COVID-19 passports were part of the wider reopening protocols that were issued by various countries, and international travelers who were eligible for COVID-19 passports were able to travel freely in some countries [6]. Moreover,



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**Copyright:** © 2022 by the authors. Licensee MDPI, Basel, Switzerland. This article is an open access article distributed under the terms and conditions of the Creative Commons Attribution (CC BY) license (https:// creativecommons.org/licenses/by/ 4.0/). COVID-19 passports, used as proof of COVID-19 vaccination, were designed to facilitate free movement inside the country and/or several countries, and included the EU Digital COVID Certificate; however, COVID-19 passports were not a precondition to free movement, as travelers who received a negative test result and/or recovered from COVID-19 also had the right to travel freely [7].

The positive effect of travelers' attitudes and injunctive social norms on COVID-19 passports was influenced by the International Air Transport Association (IATA) Travel Pass Initiative, a mobile app that can receive and verify COVID-19 digital vaccine certificates [8]. Furthermore, COVID-19 vaccine certificates covered 74 countries, representing 85% of global traffic by the end of November 2021 [8]. Hence, it appears that international travelers' positive attitudes and injunctive social norms towards COVID-19 passports are evident, as there is a surging number of travelers that are utilizing these COVID-19 passports for international travel, tourist attractions and restaurants [9]. Accordingly, all EU member states are accepting COVID-19 passports as a part of their travel and tourism reopening strategy [10], while on the other hand, a handful of countries, such as Mexico, Colombia and Morocco, do not require COVID-19 passports for international travelers [11]. Lastly, certain countries, such as China, Japan, South Korea, Malaysia, and New Zealand are imposing strict measures in the form of mandatory quarantine, even for international travelers that possess COVID-19 passports [11]. Furthermore, more recently, the U.S. has implemented COVID-19 passports as a pathway towards travel and tourism recovery [12].

Hence, COVID-19 passports support the fundamental right to free movement and travel [7]. The international tourist arrivals across the globe are nowhere near the levels before the COVID-19 pandemic, thus, it is projected, that in the EU, that the travel demand for the 2021 summer will increase with COVID-19 vaccination efforts, as COVID-19 passports have been functional since 1 July 2021 [13]. Furthermore, with widespread COVID-19 vaccinations and the implementation of COVID-19 passports, Croatia managed to come close to 2019 record levels of international tourist arrivals, prior to the COVID-19 pandemic, and some parts of Croatia have even remarkably exceeded the 2019 levels in August 2021 [14]. Hence, public figures, public health authorities, and other stakeholders in the international travel and tourism sector are in a position to counteract COVID-19 vaccination misinformation on social media and promote COVID-19 passports as a way towards normalizing its function within international travel. As Steffens et al. [15] outline, such an act is of paramount importance due to the influencing power on the silent audience. Furthermore, as various traditional media channels have transitioned to an online form, they are positioned to offer their personal information regarding their COVID-19 vaccination status for general public viewing [16] and, thus, boost the general public's acceptance of COVID-19 passports as a way towards the normalization of international travel. Furthermore, as international travelers' COVID-19 risk perception plays an important role in their decision to travel [17], communication strategies are instrumental in mitigating COVID-19 risk perceptions [18].

The COVID-19 vaccinations, COVID-19 passports and their implications have been studied from ethical and legal aspects [19–23]. However, to the best of the authors' knowledge, only a few studies investigated COVID-19 vaccinations and COVID-19 passports' acceptance from a travel and tourism aspect [1,24,25]. In a recent study by Radic et al. [1], which is based on the extended Norm Activation Model, the authors concluded that the acceptance of COVID-19 vaccinations and COVID-19 passports is directly influenced by an awareness of consequences related to the COVID-19 pandemic, the individuals' ascribed responsibility, and personal norms. Moreover, mass media coverage in a previously mentioned study showed the positive and significant effects on the awareness of these consequences and the acceptance of COVID-19 vaccinations as a precondition of international traveling [1]. Furthermore, Gursoy et al. conducted a one-way ANOVA to investigate travelers' willingness to take the COVID-19 vaccine once it is available [24]. The authors concluded that the travelers' pro-vaccine behavior has also increased with the widespread and increased availability of COVID-19 vaccines [24]. Finally, Suess et al. applied the Health Belief Model to examine the travelers' willingness and support towards COVID-19 vaccination before travel [25]. The authors concluded that mass media strongly influences travelers' beliefs and trust regarding COVID-19 risks because frequent travelers are willing to take a COVID-19 vaccine before traveling [25].

The use of COVID-19 vaccinations/passports is shown in Figure 1. The COVID-19 vaccination/passports hold specific information related to the travelers' COVID-19 vaccination status, COVID-19 test results, and recovery from the disease into one scannable QR code. A simple QR code technology on paper or a smartphone application verifies a traveler's COVID-19 status. Thus, COVID-19 vaccinations/passports allow travelers to book/take flights, and travel freely across countries while enjoying hospitality and tourism services.

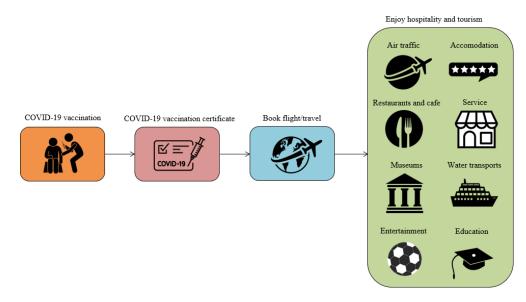


Figure 1. COVID-19 vaccination/passports and international travel.

The study described here builds on the pioneering studies by Radic et al. [1], Gursoy et al. [24], and Suess et al. [25] because it sets out to broaden the body of knowledge that is related to the acceptance of COVID-19 vaccination as an instrument towards the normalization of international travel. This research more precisely explores this acceptance based on the multi-step flow theory [26] and the effect of media encouragement on attitudes toward behaviors, injunctive social norms, and COVID-19 vaccination intentions. Furthermore, the effect of demographic variables, such as gender, age, education, and place of residence regarding COVID-19 vaccination intentions are taken into consideration in this study. In order to fulfill this specific task, the following research question is addressed:

• How is the media encouragement affecting COVID-19 vaccination acceptance as the instrument towards the normalization of international travel?

The key motivation for this study is to discover the role of media encouragement in order to increase the willingness to take the COVID-19 vaccination, as the instrument for the normalization of international travel. Our secondary motivation is to provide a conceptual model that will be helpful for policymakers and decision-makers in the hospitality and tourism industries. The analysis, through assessing the seven hypotheses, successfully answered the proposed research question, which extends the current knowledge that is related to the acceptance of COVID-19 vaccination as a precondition to international traveling. Furthermore, the findings can guide tourism industry professionals in order to determine the likely path of demand recovery. The benefits of this study are:

 The study provides empirical evidence about the essential role of media encouragement in order to promote the COVID-19 vaccine as a prerequisite for international traveling;

- The study demonstrated that the attitude and injunctive social norm towards the COVID-19 passports are essential predictors of a travelers' intention;
- The proposed model shows a peculiar mechanism of COVID-19 vaccination acceptance among international travelers.

The paper is organized as follows. Section 2 provides an overview of the existing literature, provides the background for travelers' COVID-19 vaccination intentions, and develops the hypotheses regarding the factors affecting travelers' COVID-19 vaccination intentions. Section 3 details the research and analysis methods and presents the sampling procedure. Section 4 discusses the findings, and Sections 5 and 6 discuss the theoretical contributions and managerial implications and suggests avenues for further research.

#### 2. Literature Review

The multi-step flow theory proposes that media effectiveness is dependent on the balancing of opinion leaders during the information delivery process to a wider population [26]. In a recent study by Khubchandani et al., the authors outlined the utmost importance of media outlets and the public figure roles in the process of educating the general population about the COVID-19 vaccine as a means towards influencing the general population's attitude towards COVID-19 vaccination and, overall, decreasing vaccine hesitancy [27]. The COVID-19 pandemic offers a fruitful environment for the spread and growth of online misinformation with considerable real-world consequences, as malicious actors flourish in these rough circumstances, creating chaos for their own benefit [28]. Similarly, vaccine misinformation has a negative impact on people's vaccine attitudes, injunctive social norms, and behaviors [29]. Hence, having public figures presenting two sides of the story, which includes one with misinformation and the other one with correct information, while reasoning with a story that has accurate information, is more persuasive, as it functions in the form of reality testing [29]. There are significant concerns over the safety and efficacy of the COVID-19 vaccine, which leads to COVID-19 vaccination hesitancy in the general public, thus, evidence-based communication strategies that are presented by public figures are of paramount importance [30]. Furthermore, the role of negative and positive emotions in communication efforts should be evaluated and strengthened, as both negative and positive emotions shape attitudes and guide people in terms of what is acceptable and unacceptable social behavior [30]. Furthermore, public figures and policymakers should observe changes in attitudes, beliefs, feelings, and trends via social media posts, as such tactics provide a cost-effective, prompt, and are a precious instrument to measure public perceptions related to COVID-19 pandemic policy decisions [31].

Accordingly, it is the sole duty of the public health agency leaders to tap into the targeted audience's thoughts, attitudes, and injunctive social norms and address any concerns about the vaccination by using scientifically-based comments, and ultimately, promote the vaccination program [32]. Moreover, in order to positively affect the attitude towards COVID-19 vaccination, media encouragement must alleviate any concerns for vaccine-hesitant people [33]. Thus, in order to achieve COVID-19 vaccine acceptance, the mass media must circulate messages related to the efficacy of the COVID-19 vaccine [34]. Furthermore, COVID-19 vaccine acceptance is largely affected by perceptions and beliefs about whether others will take the COVID-19 vaccine, thus, media encouragement must reinforce information about growing intentions to accept the COVID-19 vaccines accordingly, in order to positively affect injunctive social norms [35]. Reiter et al. [36] outlined that public opinion leaders influence travelers' attitudes and travelers' injunctive social norms towards acceptance of the COVID-19 vaccine. More precisely, the communications narrative must transparently address vaccine efficacy issues for the populations ready to receive the COVID-19 vaccine while mitigating concerns about vaccine side effects for populations who are less ready to be vaccinated [36].

Moreover, public leaders, government and health officials need to clearly communicate in a transparent way, the vaccine approval process and the possible side effects of vaccination in order to strengthen positive injunctive social norms towards the acceptance of the COVID-19 vaccine [37]. The involvement of trusted public figures, who are seen as a part of a community, is crucial for media encouragement of the COVID-19 vaccination because these public figures have a positive influence on the community members' social norms and social identities, which are of great significance to changing mass behavior [38]. The COVID-19 pandemic showed a significant discourse in social media [39], with robust political polarization that correlates with public attitudes, beliefs, and feelings toward government measures [40]. Subsequently, even Xi Jinping, the President of China, stated that China would use their COVID-19 vaccines as a global public product for the global community to benefit humanity [41].

To successfully accomplish the COVID-19 vaccination campaign, public figures must include injunctive norm information in their messages [38]. Thus, based on the above theoretical background, literature review, and empirical findings, the following hypotheses are proposed:

**Hypothesis 1 (H1).** *Media encouragement has a positive impact on travelers' attitudes toward the behavior.* 

# **Hypothesis 2 (H2).** *Media encouragement has a positive impact on travelers' injunctive social norms.*

The attitude towards behavior is based on the individual's beliefs and evaluation of outcomes of certain actions [42], and it is a fundamental component of the theory of reasoned action [43] and the theory of planned behavior [44]. The attitude towards the COVID-19 vaccine showed a strong positive effect on the acceptance of COVID-19 vaccination among Chinese adults because they recognized the robust benefits from COVID-19 vaccination [45]. In a recent study by Hu et al. [46], the authors outlined that the Chinese people have a robust positive attitude towards acceptance of COVID-19 passports due to personal benefits and strong nationalism. The attitudes towards receiving the COVID-19 vaccine for international travel were related to their motivation, desire for travel, and travel vaccination concerns within the context of travel and tourism [47]. Domestic travel was not sufficient enough to substitute the need for international travel, so the attitude regarding COVID-19 vaccination and tourism emerged as the salient factor in relation to the impact of COVID-19 mobility restrictions and vaccinations on people's behavioral intentions to travel [48]. Thus, with the increased availability of COVID-19 vaccines, the travelers' attitude towards COVID-19 vaccination—as a means for international travel—is growing, since their health risk perceptions are decreasing, and their travel anxiety is increasing [24]. Similarly, Gursoy et al. [49] noticed that positive attitudes have a mediating effect on the acceptance of COVID-19 vaccination, as international travelers would travel to a destination and stay at a hotel after the COVID-19 vaccine becomes available to them.

The injunctive social norms are beliefs, thoughts, and perceptions of an individual regarding how he or she should behave, whereas the social norms are a sub-category of the injunctive social norm, which are related to the group's informal statements [50]. People share their opinions and belief as they create their own perceptions, so individuals are more likely to get vaccinated when they know that the vast majority of their social group is vaccinated [51]. Furthermore, Suess et al. argue how the injunctive social norm of travelers affects their willingness to take the COVID-19 vaccine prior to traveling because these travelers are in favor of the COVID-19 vaccination mandates that are imposed by the federal and international authorities for both domestic and international alike [25]. The injunctive social norm has manifested itself within international travelers in the form of perceived health risks and the fear of infection and travel anxiety, so the positive effect of the injunctive social norm on the travelers' COVID-19 vaccination intentions increased over time as the availability of the COVID-19 vaccine increased [24]. During the COVID-19 pandemic's first wave in South Korea, the behavioral intention towards travel was significantly mediated by the beliefs, thoughts, and perceptions on how individuals should behave [52]. Recently,

the CDC [12] has announced that fully vaccinated people can freely resume international travel without self-quarantine once they arrive back in the United States. Furthermore, Radic et al. argue how the international traveler's COVID-19 vaccination acceptance is directly influenced by the travelers' shared beliefs, thoughts, and overall awareness of the COVID-19 pandemic consequences [1]. Hence, the aforementioned justification led to the following hypotheses:

**Hypothesis 3 (H3).** *Attitude towards the behavior has a positive impact on travelers' COVID-19 vaccination intentions.* 

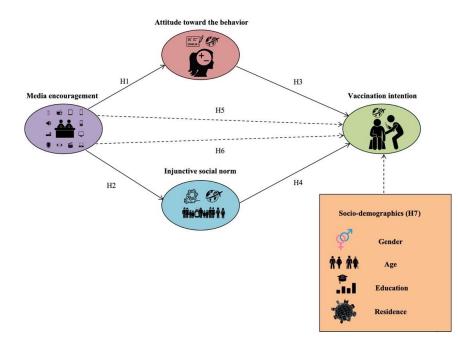
**Hypothesis 4 (H4).** *Injunctive social norm has a positive impact on travelers' COVID-19 vaccination intentions.* 

**Hypothesis 5 (H5).** *Attitude towards the behavior has a mediating effect on the relationship between media encouragement and travelers' COVID-19 vaccination intentions.* 

**Hypothesis 6 (H6).** *Injunctive social norm has a mediating effect on the relationship between media encouragement and travelers' COVID-19 vaccination intentions.* 

The socioeconomic and demographic factors have important influences on consumer behavior. Thus, Gursoy et al. outlined the paramount importance of identifying the sociodemographic groups within international travelers that express a hesitancy towards the COVID-19 vaccination in order for the mass media to develop communication strategies, which could mitigate their vaccine hesitancy [24]. Furthermore, younger travelers are less COVID-19 vaccine-hesitant [24], and African American and Hispanic/Latino travelers show higher COVID-19 vaccine hesitancy [24], whereas male travelers [24,53] and lower education travelers from developed countries are in favor of the COVID-19 vaccination [24,54]. As a result, we postulated the following hypothesis below:

**Hypothesis 7 (H7).** Socio-demographic factors have an influence on travelers' COVID-19 vaccination intentions.



Our conceptual model of research construct relationships is presented in Figure 2.

Figure 2. Proposed model.

### 3. Methods

The data was collected by using the cloud-based software, SurveyMonkey<sup>®</sup> for online surveys in order to understand the travelers' vaccination intentions over two months, which was from December 2020 to January 2021. Thus, a cross-sectional, online, anonymous survey was developed with a comprehensive list of questions (Appendix A) based on certain constructs of the proposed model. The cross-sectional time horizon provides valuable space for research between the probable influence and the reciprocal association between components. A purposive sampling technique was utilized in this study, which allows for interpreting the research question comprehensively [55]. The purposive sampling technique requires a conscious and well-informed approach towards the parameters of the population of interest and the judgmental, selective, and critical choice of a sample based on a social phenomenon that is being researched. In this study, the purposive sampling technique was intentionally chosen based on the addressed research problem. Thus, as authors have engaged in investigating the international travel experience before the COVID-19 pandemic, a purposive sampling technique was appropriate to access a particular subset of people, and in this case, international travelers, as all participants of this survey were selected because they fit a particular profile. The potential participants were invited to the survey. Table 1 shows the list of social media groups where the participants were recruited.

Table 1. List of social media groups.

Social Media Group	Domain
China Travel Group	https://www.facebook.com/groups/164125967451164 (accessed on 6 February 2022
Tourists	https://www.facebook.com/groups/642485595801073 (accessed on 6 February 2022
Tripadvisor Travel Forum	https://www.tripadvisor.com/ForumHome (accessed on 6 February 2022)
Thorn Tree forum	https://www.lonelyplanet.com/thorntree/welcome (accessed on 6 February 2022)
Fodor's Travel Talk Forums	https://www.fodors.com/community/trending.php (accessed on 6 February 2022)
Travel and Tourism	https://www.facebook.com/groups/433024676868583 (accessed on 6 February 2022
Worldwide Travel	https://www.facebook.com/groups/worldwidetravel (accessed on 6 February 2022
Travelers Around The World	https://www.facebook.com/groups/885989791516753 (accessed on 6 February 2022
Travelers point	https://www.travellerspoint.com/forum.cfm (accessed on 6 February 2022)
South Asian Tourism & Travelers Group	https://www.facebook.com/groups/1504362079863590 (accessed on 6 February 2022

Potential participants were introduced to the purpose of the study via a short explanatory section that was incorporated into the survey. Individuals who understood the purpose of the study and agreed to participate in the survey qualified to continue with the screening questions of the questionnaire. Screening questions were used to verify that only those tourists who had traveled internationally before the COVID-19 pandemic participated in the survey. Participants were asked to answer on a nominal scale ("yes" or "no") to the following question: "Have you traveled internationally in the last 24 months?" Social media platforms were chosen based on two criteria: (1) experienced and knowledgeable travelers with shared interests, (2) adequate knowledge of the English language. A total of 1403 surveys were utilized for further statistical analysis after removing the extreme outliers and the incomplete set of surveys.

The scale items were adopted from the validated measurement items in the previous studies, and a Likert scale was used except for the demographic questions. Two items were adopted from the work by Juschten et al., the measuring of media encouragement [56]. Four items were adopted from Han et al. in order to measure attitude toward the behavior, which included *for me, having the COVID-19 vaccine certificate as a precondition for international traveling is bad/good* [5]. Moreso, three items were adopted from Han et al. in order to assess the injunctive social norm, which included *most people who are important to me think I should take the COVID-19 vaccine as a precondition of international traveling* [5]. Lastly, three items were adopted from Radic et al. in order to assess the vaccination intentions, which included *I am willing to take the COVID-19 vaccine as a precondition of international traveling when available* [1].

# 4. Results

The characteristics of the demographic information from the respondents were analyzed using SPSS 26.0. Among the 1403 respondents, 49.3 percent of the respondents were male, and 50.7 percent were female, which indicates that the survey was properly distributed to each gender. In regards to gender, almost forty percent of the respondents were between 20 and 29 years of age (39.5%) and held bachelor's degrees (40.8%). The respondents' residence was widely spread, which included American, European, Asian, and African continents. Table 2 shows the results of the demographic characteristics.

C	haracteristics	Ν	Percentage (%)	
Carla	Male	691	49.3	
Gender	Female	712	50.7	
	20–29 years old	554	39.5	
	30–40 years old	427	30.4	
Age	41–50 years old	316	22.5	
-	51–60 years old	73	5.2	
	60 years old and more	33	2.4	
	High school (secondary school)	308	22.0	
Education	Associate degree	269	19.2	
	Bachelor's degree	573	40.8	
	Master's and Doctoral degree	253	18.0	
	North America	193	11.6	
	Central/South America	165	11.8	
D · 1	Europe	197	14.0	
Residence	China	217	15.5	
	South Asia	205	14.6	
	South East Asia	233	16.6	
	Africa	210	15.0	
	Australia and New Zealand	13	0.9	
Total		1403	100%	

Table 2. Demographic characteristics.

The reliability and validity were assessed in order to confirm the quality of the data and the consistency with the measurement items under the latent variables. The results of Cronbach's alpha confirmed the reliability of each latent variable, which has internal consistency with the measures that ranged from 0.783 to 0.934. The validity was checked using the Fornell–Larcker criterion, which calculated the value of the average variance extracted (AVE) that allows confirming both the convergent and discriminant validity [57]. The results showed that the AVE values ranged from 0.508 to 0.617, which exceeded the minimum value of 0.50.

In addition, the data is considered to be collected from the proper populations because the results of the Kaiser–Meyer–Olkin (KMO), factor loading, and communality exceeded the minimum cut-off, which indicates the appropriateness of the dataset. Results of correlations also indicate positive and significant relationships between constructs. The results of the reliability and validity are presented in Table 3, and the means, standard deviations, and correlations of the study variables are presented in Table 4.

Factors	Variable	Factor Loading	Communality	Eigen Value	AVE	Cronbach α
Media encouragement	MEN1 MEN2	0.728 0.696	0.835 0.817	30.682	0.508	0.783
Attitude toward the behavior	ATT1 ATT2 ATT3 ATT4	0.785 0.787 0.792 0.779	0.803 0.819 0.866 0.853	23.968	0.617	0.934
Injunctive social norm	ISN1 ISN2 ISN3	0.686 0.755 0.726	0.726 0.744 0.748	11.544	0.523	0.885
Vaccination intention	VIN1 VIN2 VIN3	0.694 0.743 0.732	0.737 0.731 0.766	6.878	0.523	0.885

Table 3. Results of the factor and reliability analyses.

*Note 1.* KMO = 0.939; Bartlett = 15151.049; df = 105; Sig = 0.000. *Note 2.* MEN: media encouragement, ATT: attitude toward the behavior, ISN: injunctive social norm, VIN: vaccination intention, AVE: average variance extracted, KMO: Kaiser–Meyer–Olkin measure of sampling adequacy.

Table 4. Correlations and descriptive statistics.

Constructs	[1]	[2]	[3]	[4]	Mean	SD
[1] MEN	1				3.24	1.105
[2] ATT	0323 ***	1			4.10	1.966
[3] ISN	0.275 ***	0.793 ***	1		3.11	1.115
[4] VIN	0.293 ***	0.803 ***	0.833 ***	1	3.17	1.160

*Note 1.* \*\*\* p < 0.001. *Note 2.* MEN: media encouragement, ATT: attitude toward the behavior, ISN: injunctive social norm, VIN: vaccination intention.

The ordinary least square (OLS) multiple regression analysis was used to test the proposed hypotheses in the study. As shown in Table 5, the results indicated that the media encouragement positively affected the travelers' attitude toward the behavior ( $\beta = 0.323$  and p < 0.001), which supports Hypothesis 1. Hypothesis 2 was also supported by the result that the media encouragement has a positive and significant effect on the travelers' injunctive social norm ( $\beta = 0.275$  and p < 0.001). Moreover, the results supported Hypothesis 3 and Hypothesis 4, which were based on the fact that the attitude toward the behavior positively affected the travelers' vaccination intention ( $\beta = 0.803$  and p < 0.001), and the injunctive social norm also positively affected the vaccination intentions' intention ( $\beta = 0.833$  and p < 0.001). Lastly, the regression results proved the mediating effect of both the attitude toward the behavior ( $\beta = 0.038$  and p < 0.05) and the injunctive social norm ( $\beta = 0.069$ , p < 0.001) with the relationship between the media encouragement and vaccination intentions. Therefore, Hypothesis 5 and Hypothesis 6 were fully supported.

Table 5. Results of regression analysis.

		Relationships				Unstandardize	ed Coefficients	Standard Coefficients	<i>t-</i> Value
			-			В	<b>S.</b> E.	β	
H1	MEN	$\rightarrow$	ATT			0.574	0.045	0.323	12.771 ***
H2	MEN	$\rightarrow$	ISN			0.277	0.026	0.275	10.685 ***
H3	ATT	$\rightarrow$	VIN			0.474	0.009	0.803	50.477 ***
H4	ISN	$\rightarrow$	VIN			0.867	0.015	0.833	56.456 ***
H5	MEN	$\rightarrow$	ATT	$\rightarrow$	VIN	0.039	0.018	0.038	2.235 *
H6	MEN	$\rightarrow$	ISN	$\rightarrow$	VIN	0.073	0.016	0.069	4.555 ***

*Note 1.* \* p < 0.05, \*\*\* p < 0.001. *Note 2.* MEN: media encouragement, ATT: attitude toward the behavior, ISN: injunctive social norm, VIN: vaccination intention.

Four demographic factors in this study, which include gender, age, education, and residence, showed a significant effect on the travelers' vaccination intentions, which supports Hypothesis 7. The female respondents responded that they were more willing to get vaccinated for travel than the male respondents ( $\chi^2 = 292.672$  and \*\*\* p < 0.001). In terms of age, the younger age group showed their intention to get vaccinated for travel more than the older age group ( $\chi^2 = 615.325$  and \*\*\* p < 0.001). In addition, the respondents who possess bachelor's degrees showed higher intentions to get vaccinated for travel compared to the respondents who have other educational degrees ( $\chi^2 = 831.040$  and \*\*\* p < 0.001). Lastly, the respondents' residential information indicated a significant effect on the vaccination intentions ( $\chi^2 = 860.015$  and \*\*\* p < 0.001). Table 6 shows the results of the crosstabulation of the demographic factors.

	Vaccination Intention						
_	1	2	3	4	5	Total	
<b>Gender.</b> $\chi^2 = 292.672, ***$	p > 0.001						
Male	. 17	196	193	199	86	691	
Female	146	274	486	338	142	712	
Total	163	470	679	537	128	1403	
<b>Age.</b> $\chi^2 = 615.325$ , *** $p <$	: 0.001						
20–29 years old	134	53	140	166	61	554	
30–40 years old	13	170	202	51	44	427	
41–50 years old	11	29	202	51	23	316	
51–60 years old	2	16	20	23	12	73	
60 years old and more	3	6	15	7	2	33	
Total	136	274	579	298	142	1403	
<b>Education.</b> $\chi^2 = 831.040$ ,	*** <i>p</i> < 0.00	1					
High school diploma	124	25	84	56	19	308	
Associate degree	7	145	43	54	20	269	
Bachelor's degree	20	56	274	154	69	573	
Master's and Doctoral degree	12	48	85	74	34	253	
Total	136	274	486	338	142	1403	
<b>Residence.</b> $\chi^2 = 860.015$ ,	*** p > 0.00	)1					
North America	15	28	67	39	17	163	
Central/South	2	20	70	41	1 -	1.45	
America	2	29	78	41	15	165	
Europe	12	40	90	44	11	197	
China	65	72	63	10	7	217	
South Asia	7	36	68	77	17	205	
South East Asia	62	67	72	11	21	233	
Africa	0	5	43	110	52	210	
Australia and New Zealand	0	0	5	6	2	13	
Total	163	277	486	338	142	1403	

Table 6. The crosstabulation of demographic factors.

*Note* **1**. \*\*\* p < 0.001. *Note* **2**. 1 = "Strongly disagree", 2 = "Disagree", 3 = "Neither agree nor disagree", 4 = "Agree", 5 = "Strongly Agree".

# 5. Discussion

This research is one of the initial studies that investigate the COVID-19 passport acceptance from the travel and tourism aspect. In particular, this study has contributed to the scope of theoretical perspectives by conceptually integrating multiple theories to a theoretical framework and empirically testing the mechanisms that explain the coronavirus vaccination decision.

Scholars have long been discussing the significance of the mass media with people's behavior, which is also in line with the multi-step flow theory. The studies have recently begun to examine the effect of the mass media in order to build the travelers' behavioral intentions towards the COVID-19 vaccinations [1,16], which is rare. The current research provides empirical evidence about the essential role of media encouragement in order to promote the COVID-19 vaccination as a prerequisite for international traveling. The results specifically indicated that mass media encouragement affects the attitude and injunctive social norm towards the COVID-19 passports. This finding supports the earlier studies [23], which suggest the critical role of mass media in order to induce the people's attitude, and studies [24], which indicate the positive influence of the media encouragement on the injunctive social norms. Our study findings offer important theoretical implications that extend current knowledge on tourism and hospitality. More precisely, this study demonstrated that the attitude and injunctive social norm towards COVID-19 passports are essential predictors of an individual's intention. Thus, these novel findings shed a new and different perspective from the previous work by Radic et al. [1] where the authors found that personal norm is a key predictor towards pro-mandatory vaccination-friendly behavior. In this respect, our study contributes to providing evidence to support the significant influence of attitude and injunctive social norm on the behavioral intention towards COVID-19 passports and international travel. Therefore, the policymakers and tourism authorities, such as destination marketing organizations and tourism bureaus, should collaborate with the mass media in order to encourage the general public to improve the vaccination rates and increase the chances of international traveling. The clear message of a coordinated campaign by these two authorities would be helpful in order to form a more favorable attitude and social influence for high vaccination rates in order to support the COVID-19 passports. Public health organizations and opinion leaders should spread positive influence that is supported by scientific facts to ensure the conveyance of accurate and truthful information. As mass media carries a substantial number of false claims related to COVID-19, world organizations and government officials are recommended to monitor the countless types of media and track down the sources of fake news that mislead the public. Another option is, that the goal to achieve a certain vaccination rate level needs to be set, and the mass media could be used to report daily, the gap to focus on and work toward achieving these goals.

The analysis results confirmed that attitude towards the behavior and injunctive social norm exert positive influences on the travelers' COVID-19 vaccination intentions. This outcome is consistent with findings from the recent studies conducted by Wang et al. [45], Gursoy et al. [24], and Radic et al. [1], which denoted that attitude and social norm are the main triggers of the travelers' vaccination intentions. In this regard, our findings support Ajzen and Fishbein's theory of reasoned action [43], as well as Ajzen's theory of planned behavior [44], in order to explain people's behavior. Thus, when people have volitional control over the behavior of interest (COVID-19 vaccination for international travel), individuals' attitudes towards the behavior and their injunctive social norm will influence their ability to perform a certain behavior. Moreover, this study observed the mediating effect of both the attitude and injunctive social norm in the link between media encouragement and vaccination intentions. This study then suggests that industry professionals offer rewards to people who are vaccinated in order to enhance these important mediators. For instance, people who are vaccinated could be rewarded with being free from restrictions, such as self-isolation, in and out, from country to country. This type of benefit potentially generates the perception that COVID-19 passports are an incentive program instead of being an enforced policy as a prerequisite of international traveling. Thus, these efforts would help to increase people with a more favorable attitude and stronger injunctive social norm towards COVID-19 vaccination. With a favorable attitude towards the behavior and injunctive social norm, societies would achieve a social climate where COVID-19 vaccination is a norm that is a requisite for overseas travel.

Lastly, the findings indicated that gender, age, education, and residence significantly affect the travelers' vaccination intentions, which is coherent with the prior studies [24,53,54]. Hence, service providers in the tourism context should involve these socio-demographic determinants in order to increase more pro-vaccine individuals, which in turn maximize the chances of international traveling. Our findings demonstrated precisely that females, younger age groups, and people who possess bachelor's degrees have stronger intentions to get vaccinated for international traveling. Accordingly, tourism marketers and authorities may then consider grouping ambassadors from the female, younger, and university graduate travelers in order to promote COVID-19 vaccinations. In particular, the younger age groups are generally more tech-savvy than older people, and they can grow up to be influencers through various social networks, which can reach a broader audience. The attempt to investigate the differences informing vaccination intentions depending on sociodemographic factors and the associated implications based on empirical evidence, advances our knowledge, which is also distinguished from earlier work by Radic et al. [1].

### 6. Conclusions

This study attempted to discover the role of media encouragement in order to increase the willingness to take the COVID-19 vaccination as the instrument for the normalization of international travel. Moreso, this research evaluated the influence of the socio-demographic determinants on COVID-19 vaccination intentions. The analyses, through assessing the seven hypotheses, successfully answered the proposed research question, which extends current knowledge that is related to the acceptance of COVID-19 vaccination as a precondition to international traveling, and the findings could guide tourism industry professionals in order to ascertain the likely path of the demand recovery.

Nonetheless, this research entailed a few limitations, which could be considered in future studies. Since the COVID-19 outbreak, the world has constantly been discovering new facts, which include the rise of the omicron variant cases. In addition, the differences with the vaccine effectiveness toward the COVID-19 omicron variant are discussed [58]. As such, the people's perception toward COVID-19 vaccination prior to traveling may have changed from the time our survey was conducted. Therefore, future studies may consider taking a longitudinal study in order to evaluate the travelers' changing intentions towards COVID-19 vaccinations. Secondly, this study failed to consider the different situations across the nations in order to examine the vaccination intentions. The opinions of the people could vary in a very significant way, depending on the level of restrictions against traveling, on which studies are suggested in order to explore this possibility.

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**Institutional Review Board Statement:** Because of the observational nature of the study, and in the absence of any involvement of therapeutic medication, no formal approval of the Institutional Review Board of the local Ethics Committee was required. Nonetheless, all subjects were informed about the study and participation was fully on a voluntary basis. Participants were ensured of confidentiality and anonymity of the information associated with the surveys. The study was conducted according to the guidelines of the Declaration of Helsinki.

**Informed Consent Statement:** The present research objectives were communicated to all the selected individuals, who were then requested to take part in the study by completing the survey. Participants were ensured of confidentiality and anonymity of the information linked with the surveys.

**Data Availability Statement:** The dataset used in this research are available upon request from the corresponding author. The data are not publicly available due to restrictions i.e., privacy or ethics.

Conflicts of Interest: The authors declare no conflict of interest.

# Appendix A

 Table A1. Constructs and measurement items.

### **Constructs and Items**

### Media encouragement

Media coverage (TV, newspapers, online) convey a positive image of COVID-19 vaccination.
 Media coverage makes me want to take COVID-19 vaccine.

### Attitude toward the behavior

For me, having COVID-19 vaccine certificate as precondition of international traveling is

- 1. Bad (1)–Good (7)
- 2. Foolish (1)–Wise (7)
- 3. Unpleasant (1)–Pleasant (7)
- 4. Unfavorable (1)–Favorable (7)

### Injunctive social norm

- 1. Most people who are important to me think I should take COVID-19 vaccine as precondition of international traveling.
- Most people who are important to me want to take COVID-19 vaccine as precondition of international traveling.
- 3. People whose opinions I value prefer that I take COVID-19 vaccine as precondition of international traveling.

### Vaccination intention

- 1. I am willing to take COVID-19 vaccine as precondition of international traveling when available.
- 2. I plan to take COVID-19 vaccine as precondition of international traveling when available.
- 3. I will spend my effort on taking COVID-19 vaccine as precondition of international traveling when available.

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