Research paper

Incidence of Covid-19 in the behaviour of tourists of the Coquimbo region

Incidencia del Covid-19 en el comportamiento del turista de la región de Coquimbo

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ABSTRACT

The objective of this paper was to analyze the incidence of Covid-19 in the behaviour of tourists in the Coquimbo region. The methodology had a quantitative approach, non-experimental design, descriptive type and cross section. The data were collected through a survey applied to 979 participants, whose statistical analysis included the application of the binary logistic regression. The results reveal changes in the tourist's travel behavior manifested in a greater concern for hygiene and safety. Tourists, post Covid-19, show a greater intention to find out about the destination, preference for visiting nearby places and less crowded (with a focus on nature, sun and beach tourism), and less intention to have contact with local residents. The multivariate analysis confirms the inverse and significative relationship between risk perception and the tourist's travel intention. It is concluded that post-Covid-19 tourism establishes a new profile of the tourist, more demanding, who demands strict hygiene and safety standards. Therefore, the challenge for tourism organizations is to work to restore confidence to visitors within the framework of a new travel culture.

Keywords: *Covid-19, Tourism, Tourist behaviour, Journey Plan, Region de Coquimbo (Chile)*

RESUMEN

El trabajo, de enfoque cuantitativo, diseño no experimental, tipo descriptivo y corte transversal, planteó por objetivo analizar la incidencia del Covid-19 en el comportamiento del turista de la región de Coquimbo. Los datos fueron recolectados mediante una encuesta aplicada a 979 personas, cuyo análisis estadístico incluyó la aplicación de la regresión logística binaria. Los resultados revelan cambios en el comportamiento de viaje del turista manifestados en una mayor preocupación por la higiene y la seguridad. Los turistas, post Covid-19, muestran una mayor intención por informarse sobre el destino, la preferencia por visitar lugares más cercanos (con foco en el turismo de naturaleza, sol y playa), el favoritismo por visitar áreas sin mucha afluencia de público y una menor intención de tener contacto con los residentes del lugar. El examen multivariante confirma la relación inversa y significativa entre la percepción de riesgo y la intención de viaje del turista. Se concluye que el turismo post Covid-19 establece un nuevo perfil del turista, más exigente, que demanda estrictas normas de higiene y seguridad. Por lo tanto, el desafío para las organizaciones turísticas consiste en trabajar para regresar la confianza a los visitantes en el marco de una nueva cultura del viaje.

Palabras clave: Covid-19, Turismo, Comportamiento del turista, Planificación de viaje, Región de Coquimbo (Chile).

INTRODUCTION

The sudden and extensive outbreak of the coronavirus (Covid-19) once again demonstrated the fragility and vulnerability of living in a globalized world. The virus that appeared at the end of 2019, in the city of Wuhan of the province of Hubei China, spread rapidly around the world, which led to the World Health Organization (WHO) declaring it a pandemic on 11 March 2020 (Félix & García, 2020). From that moment on, the countries adopted various health self-care strategies, such as the use of masks, hand washing, physical distancing, ventilation of spaces, and even confinement measures such as the establishment of quarantines and the closure of borders.

Chile, in line with the above, adopted the advices recommended by the WHO (Organización Mundial de la Salud, 2020), and the Ministry of Health established the Plan Paso a Paso (Step-by-Step Plan), a strategy that defines the mobility of people in the country, depending on the particular health situation of each area (commune) of the territory (Ministerio de Salud, 2020). These restrictions, as was predictable, seriously affected the tourism sector, and caused a gradual decrease in the flow of tourist arrivals to Chile. For example, Rivas et al. (2021) reported that between the months of July 2017 and July 2020, the arrival of tourists decreased from 500,000 to less than 2,000, that is, a fall of 99.6%.

Furthermore, it should be noted that different authors have analyzed and exposed the impact generated by crises, such as the current pandemic situation, on tourism (Zenker & Kock, 2020), the effects produced on the behavior of tourists (Hajibaba et al. ., 2015; March & Woodside, 2005; Paraskevas et al., 2013; Wen et al., 2005) and the relevance of providing safety to the visitor (Luders, Castillo & Gândara, 2016). In this way, the perceived risk can be understood as an important predictor of the tourist's behavior on their travel decision (Matiza, 2020) so it can modify a tourist's evaluation of a destination and their intention to travel (Carballo et al., 2017). It should be noted that within the field of tourism, the perceived risk is associated with a tourist's perception of uncertainty and the possible adverse results resulting from the consumption of travel and tourism offers (Adam, 2015; Liu et al., 2016). In this context, this research aimed to analyze the incidence of Covid-19 in the behavior of tourists in the Coquimbo region, one of the most important tourist destinations in Chile. The results are expected to provide useful information to support decision-making by companies and gover-

nment authorities, at a time of global health crisis, in which proximity tourism emerges as a viable alternative for the displacement of the travelers. And, in a scenario, where it is urgent to formulate effective strategies for the reactivation of the tourism sector, so heavily affected by the pandemic (Félix & García, 2020; Lucero & Gómez, 2021).

STUDY AREA

The Región de Coquimbo is located in the north of Chile, approximately between 29° 20' and 32° 15' south latitude. It has an area of 40,579.9 square kilometers, equivalent to 5.37% of the national territory. According to the 2017 Census, the population reached 757,586 inhabitants and a density of 46.23 inhabitants per square kilometer. The Region has three provinces and 15 communes, and the regional capital is the city of La Serena (see Table 1).

Table 1: Political-administrative division of the Región de Coquimbo

Province	Capital	Commune
Choapa	Illapel	Canela
		Illapel
		Los Vilos
		Salamanca
Elqui	La Serena	Andacollo
		Coquimbo
		La Higuera
		La Serena
		Paihuano
		Vicuña
Limarí	Ovalle	Combarbalá
		Monte Patria
		Ovalle
		Punitaqui
		Río Hurtado

The Región de Coquimbo has a set of attributes that make it especially suitable for tourist activity and that have positioned it as one of the most important tourist destinations in the country (González & Morales, 2011). In general, the region has different attractions that differentiate it in the national context, exhibiting comparative advantages in the coastal sector as it has an extensive coastline with various beaches suitable for bathing, fishing, resting, and water sports. It also

offers a unique geographic set with its transversal valleys, in which its scenic and cultural attractions and climatic conditions stand out (Subsecretaria de Turismo Chile, 2017).

Some of the featured tourist places and attractions in the Coquimbo region are: Avenida Costanera, Barrio Inglés, Biblioteca Regional Gabriela Mistral, Casa de Gabriela Mistral, Casino de Juegos, Caleta de Hornos, Centro Cultural Islámico Mezquita Mohhamed VI, Cruz del Tercer Milenio, Domo museo de sitio Cultura Las Ánimas, Estadio Bicentenario Francisco Sánchez Rumoroso, Faro de La Serena, Fuerte de Coquimbo, Hacienda el Tangue, Iglesia San Pedro, Iglesia San Francisco, Iglesia Santo Domingo, Isla Damas, Jardín Japonés, Mirador de Los Navegantes, Museo Arqueológico de La Serena, Observatorio astronómico La Silla, Parque Nacional Fray Jorge, Parque Pedro de Valdivia, Reserva Nacional del Pingüino de Humboldt, la Ruta de las Estrellas (observatorios turísticos) y el Valle del Elqui. Also, the region stands out for the beaches of Peñuelas, La Herradura, Totoralillo, Las Tacas, Morrillos, Las Mostazas, Guanaqueros, Playa Blanca and Tongoy (National Tourism Service, 2018). See Figure 1.

Figure 1. Tourist places of Región de Coquimbo (Chile)

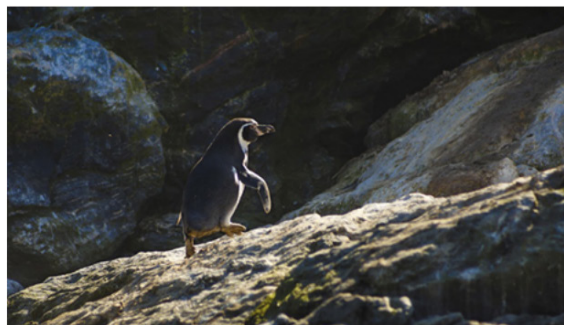Playa de La Serena

Observatorio Cerro Mayu

Iglesia de Nuestra Señora del Rosario de Pisco Elqui

Museo Histórico Gabriel González Videla

Valle del Elqui

Reserva Nacional del Pingüino de Humboldt

Source: Servicio Nacional de Turismo (2018), Subsecretaría de Turismo Chile (2017)

METHODOLOGY

The study had a quantitative approach, non-experimental design, descriptive type and transectional scope. It collected the data through an online survey applied to 979 people over the 18 years old residing in the Coquimbo Region (Chile) between December 15, 2020 and January 10, 2021.

The questionnaire was compound of 42 questions, organized into three sections. The first section was intended to characterize the sample in terms of sex, age, education, occupation, income, and place of residence. The second part grouped questions related the perception of the pandemic (confidence and expectations). And, the third item referred to the fundamental aspects of the study, since it made inquiries related to travel issues, risk perception and tourism safety. The second and third section of questionnaire were based on the works developed by Nazneen et al. (2020) and Dryhurst et al. (2020), respectively.

In particular, in the second section of the questionnaire, the respondent indicated on a scale of 1 to 5 how likely they believed that the question asked would occur in each question asked (5 = extremely likely, 1 = not likely). While, in the third section, the person indicated on a scale from 1 to 5 their degree of agreement with each statement made (5 = totally agree and 1 = totally disagree).

The reliability of the instrument was measured through Cronbach's alpha coefficient, which demonstrated the suitability of the scale used, both globally (alpha = .92) and for each dimension evaluated: perception of the pandemic (alpha = .71) and predictors of tourist travel, risk and safety (alpha = .92).

Data were analyzed using descriptive statistics and hypothesis tests (association tests). In addition, two binary logistic regression models were used, which allowed us to examine, given the pandemic context, the variables with the highest incidence on the tourist's intention to travel and the intention to reduce the duration of travel

and tourism. The explicative variables of the model included characteristics of the tourist profile (sex, place of residence, age, education, work and income), perception regarding Covid-19 (severity of the virus and the probability of contracting coronavirus), opinion on the measures and people and institutions linked to the pandemic (trust in health personnel, satisfaction with government measures, and assessment of self-care actions), and expectations of the country's recovery and travel safety.

Binary logistic regression allows the evaluation of multiple independent variables (metric and non-metric) on a non-metric dichotomous (binary) dependent variable (Hair et al., 2014). The general equation used was the following:

$$P = \frac{1}{1 + e^{-(\beta_0 + \sum_{i=1}^{n} \beta_i x_i)}} \qquad (1)$$

In the equation, the dependent variable (P) represents the probability (intention) to travel in the next twelve months (or the possibility of reducing the duration of travel and tourism), while the explicative variables (Xi) are compound of aspects sociodemographic and by elements of travel, risk and safety of the tourist, which were dichotomized (0 = absence of the variable, and 1 = presence of the variable of interest).

The fit and predictive power of the model were measured using the Hosmeer and Lemeshow test, Nagelkerke's R-square, Cox and Snell's R-square, and McFadden's pseudo R-square. Finally, it should be noted that all the analyzes were obtained through the IBM SPSS Statistics version 24 software for Windows.

RESULTS

Sample Profile

The profile of the study sample is summarized in Table 2.

Table 2: Sample profile (n = 979)

Criteria	Segment	Percentage
Sex	Woman	55.5
	Man	44.5
Age	Between 18 and 25 years old	33.8
	Between 26 and 35 years old	24.1
	Between 36 and 45 years old	16.8
	Between 46 and 55 years old	16.5
	Over 55 years old	8.8
Education	Primary	3.5
	High school	39.2
	Undergraduate (Institute)	26.9
	Undergraduate (University)	27.8
	Postgraduate	2.6
Month Income (CLP)	None	20.7
	Less than 300.001	21.3
	Between 300 001 and 700 000	31.4
	Between 700 001 and 1 200 000	17
	Between 1 200 001 and 2 500 000	8
	Over 2 500 000	1.6
Occupation	Housework	7.3
	Retired	2.5
	Does not work or study	0.8
	Businessman/businesswoman	5.3
	Unemployed	5.7
	Public official	8.9
	Dependent worker	30.2
	Independent worker	10.6
	Student	28.7
Residence commune	La Serena	37.5
	Coquimbo	31.3
	Vicuña	8.4
	Ovalle	8.3
	Other	14.5

Table 2 shows that the respondents were, for the most part, women (56%), aged between 18 and 35 years (58%), with an income lower than CLP $ 700,001 (53%), active in employment (55%) , with higher level studies (55%) and residents of the La Serena - Coquimbo conurbation (69%). Perception of the COVID-19

The purpose of the examination of the tourist's perception of the pandemic was to answer three main questions: how likely it is to be affected by the virus (directly or indirectly), trust in relation to different stakeholders and relevant sectors, and their opinion in relation to effectiveness of the measures applied to face the pandemic (personal and external). See Table 3.

The results, summarized in Table 3, reveal that the largest proportion of respondents think that, over the next six months, Covid-19 is likely to affect them (67%) or affect their friends and family (73%), and that the country's situation will worsen with the pandemic (93%). In addition, two out of every three tourists consider that it would be serious or very serious for them to get sick from the coronavirus (66%).

The respondents, as to the trust placed in the authorities and responsible for the control of the pandemic, indicated having a high level of trust with doctors and nurses (71%), and scientists (50%). But they said they have a high degree of distrust with the country's politicians (87%).

Finally, most tourists consider that the self actions they are taking make a difference in controlling the pandemic (54%) and that it is important to do things for the benefit of other people (59%). But, the evaluation of the effectiveness of the government's response to face the pandemic was very low (11%). It should be noted that respondents were also asked whether their income had decreased due to the health crisis, and only one in five indicated that their income was not affected (21%). However, when relating this response to the level of income, it was noted that it is the segment with the lowest income who were most affected (28% indicated that it affected them a lot), while people with average income (CLP 700 000 and CLP 1 200 000) the least affected (12% indicated that it affected them a lot). See Figure 2.

Figure 2. Percentage decrease in income by monthly income level (n = 979)
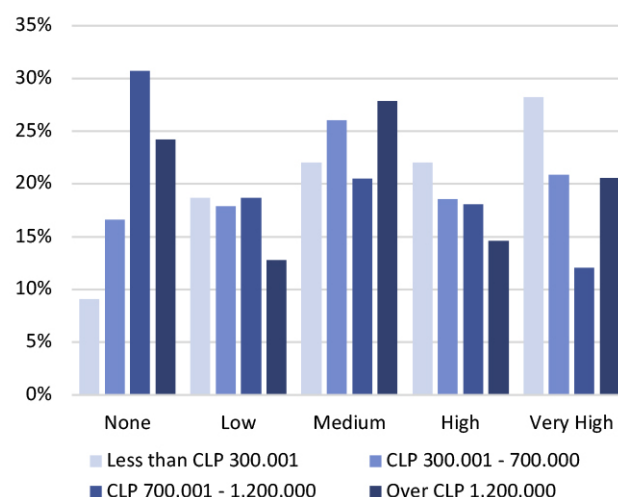
Table 3. Perception of the COVID-19 (n=979)

Question	Low	Medium	High
How likely do you think Covid-19 will affect you or affect you again during the next 6 months?	32.8	29.7	37.5
How likely do you think it is that your friends and family will be directly affected by Covid-19 in the next 6 months?	27.0	33.1	39.9
How likely do you think the country's situation will be worsened by Covid-19 in the next 6 months?	6.8	18.7	74.5
How serious would it be for you to get sick with the coronavirus?	15.6	18.7	65.7
How much do you trust the country's politicians?	86.9	8.3	4.8
How much do you trust scientists?	16.3	33.6	50.1
How much do you trust doctors and nurses?	9.6	19.9	70.5
To what extent do you feel that the personal actions you are taking to try to limit the spread of coronavirus make a difference?	17.1	28.6	54.3
How effective do you think the official government response has been in dealing with the pandemic?	60.7	28.1	11.2
To what extent do you think it's important to do things for the benefit of others and society even if they have some costs to you personally?	13.6	27.7	58.7

Note: Low=Not at all likely or Not so likely, Medium=Somewhat likely, High=Very likely or Extremely likely

The bivariate analysis between the perception of the severity of becoming ill with coronavirus and the characteristics of the tourist profile revealed significant associations with sex [$x2$ (4, N = 979) = 18.937, p < .001], age [$x2$ (20, N = 979) = 78.227, p < .001] and occupation [$x2$ (32, N = 979) = 64.026, p < .001]. In particular, those who believe that getting sick from coronavirus is the most serious are women, the oldest age groups, retirees and those who carry out housework or work independently.

A similar response was registered when people were asked about how likely they think they will be affected by Covid-19 during the next six months, since a significant and direct association was found between this question and the age of the respondent [$x2$ (20, N = 979) = 41.258, p = .003] and the income level [$x2$ (20, N = 979) = 32.644, p = .037].

Regarding the level of trust with politicians, a significant association was evidenced with age [$x2$ (20, N = 979) = 35.38, p = .018] and income [$x2$ (20, N = 979) = 37.839 , p = .009]. The findings show that trust is lower among the youngest and those with the lowest income. These results were consistent with the responses obtained to the question, how effective do you think the official government response has been in facing the pandemic? which also showed a relevant and direct association with the respondent's age $x2$ (20, N = 979) = 35.742, p = .016] and income $x2$ (20, N = 979) = 49.984, p <.001].

Furthermore, educational level showed a significant association with trust in health personnel (doctors and nurses) [$x2$ (16, N = 979) = 40.782, p < .001] and scientists [$x2$ (16, N = 979) = 35.148, p = .004]. In addition, regarding this last aspect (trust in scientists), a significant and direct association with visitor income was also revealed. [$x2$ (20, N = 979) = 55.023, p < .001].

Otherwise, regarding the perception of the effectiveness of the personal actions taken to face the pandemic, significant associations with age were identified [$x2$ (20, N = 979) = 42.118, p = .003], the occupation [$x2$ (32, N = 979) = 47.502, p = .038] and the income [$x2$ (20, N = 979) = 41.473, p = .003]. The above indicates that it is the older people, inactive workers (retirees, owners and those who do not work or study) and those who have higher incomes who perceive that their actions make a difference and limit the spread of the coronavirus.

Finally, regardings of expectations about the future of Chile in the face of the pandemic, no significant associations were observed according to the profile of the tourist, which shows a general pessimistic perception (shared vision among participants).

Travel preferences, perception risk and predictors of travel intention

Travel preferences.

Most respondents indicated that before COVID-19 they were scheduled to visit national destinations (77%), and that they do not consider that their plans will be affected by the pandemic (51%). As for the reason for their visit, tourists reported that their next trip will be mainly oriented to enjoy nature tourism (39%), sun and beach (34%), adventure (9%) and cultural (9%). In addition, they indica-

ted that they will travel mostly accompanying of family and friends (85%) and that they plan to spend the same (41%) or less (48%) than before the pandemic.

Figure 3. Travel expense decrease percentage (n = 414).
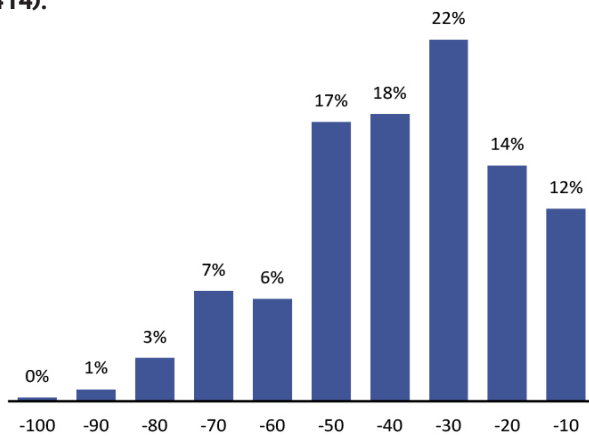
It's interesting to note that, although there is an inverse and significant relationship between the level of estimated spending and the level of decrease in income, this association was very low (r = -. 11 and p <.001). Therefore, it could be expected that the negative impact of the evolution of personal income, as a result of the pandemic, will not have a strong impact on traveler expenses.

Tourist risk perception.

Table 4 shows that due to Covid-19 (66%) there is a high perception of insafety in the traveler and this will lead them to make changes in their travel plans for the next year, such as: minimize travel plans (76 %); avoid traveling to cities with a large influx of people (65%); completely avoid leisure travel (51%); reduce the lenght of travel and tourism (69%); travel only as a family (69%), and following the self-care measures against Covid-19, such as the use of masks and disinfectants (92%).

Table 4. Tourist risk perception (n=979)

No	Affirmation	Low	Medium	High
1	Travelling is unsafe because of Covid-19	16.4	17.9	65.7
2	Covid-19 greatly reduced my travel plans for the next 12 months	12.4	12.1	75.6
3	After Covid-19, I prefer avoid travelling to crowded big cities in the next 12 months	16.9	17.8	65.4
4	After Covid-19, I prefer completely avoid travelling for leisure in the next 12 months	25.1	23.7	51.2
5	After Covid-19, I prefer take masks and sanitizers	4.3	4.2	91.5
6	After Covid-19, I prefer to reduce the length of travel and tourism in the next 12 months	10.0	21.0	68.9
7	Covid-19 reduced possibility of travelling with groups	7.5	13.4	79.2
8	After Covid-19, I only prefer to travel with family	13.5	17.4	69.2
9	After Covid-19, I prefer to stay in high quality hotels	24.5	31.5	44.0
10	After Covid-19, I prefer to eat food in high quality restaurants	24.7	31.4	43.9
11	After Covid-19, my need for hygiene while travelling is changed	6.4	7.2	86.4
12	After Covid-19, I care more about hygiene and safety of the public transportation	5.6	9.5	84.9
13	After Covid-19, I care more about hygiene and safety of the public recreation sites	5.6	8.4	86.0
14	After Covid-19, I care more about hygiene and safety of the hotels	6.4	13.4	80.2
15	For my next trips I will look for more detailed information about the destination	7.9	10.6	81.5
16	In my next trips I will take out travel insurance	31.5	30.9	37.6
17	In my next trips I will visit nearby destinations (within the country)	12.5	22.6	65.0
18	In my next trips I will request advice from travel agencies	41.6	30.0	28.4
19	Due to the pandemic, my concern regarding the security measures of the destination has increased	7.3	11.4	81.3
20	Due to the pandemic, my concern about knowing the diseases at the destination has increased	13.3	18.1	68.6
21	Due to the pandemic, my interest in learning about the health system of the destination has increased	8.8	12.9	78.3
22	Despite the pandemic, I will continue to try the local gastronomy as before	29.2	23.5	47.3
23	Due to the pandemic, I will prefer to eat at well-known food chains	26.9	30.2	42.9
24	I will continue to hire the same types of accommodation that I used before the pandemic	23.3	26.8	49.9
25	Due to the pandemic, I will have less contact with the residents of the place visited	9.8	18.3	71.9
26	Today I intend to travel less than I did before COVID-19	17.0	21.1	61.9

Note: Low=strongly disagree or disagree, Medium=neutral, High=agree or strongly agree

In addition, travelers indicated that hygiene requirements changed (86%), and that today they care more about the hygiene and safety of public transport (85%), public recreation sites (86%) and hotels who visit (80%). Also 44% of tourists indicated that given the pandemic today they prefer to stay in high quality hotels and restaurants.

Another important effect that was detected in the behavior of the tourist was a greater concern for seeking more detailed information about the destination (82%), which means a greater concern for knowing the safety measures (81%), the health system (78 %) and local diseases (69%).

Also, due to the pandemic, a lower intention to travel was found in tourists (62%), a greater preference for visiting nearby destinations (65%) and a lower predisposition to have contact with the residents of the place visited (72%). Further, on the issue of the accommodation and food, only half of those respondents indicated that they will continue to use the same types of accommodation that they used before the pandemic (50%), and that, despite the crysis, they will continue to trying the local gastronomy as before (47%). In addition, a significant percentage of tourists indicated a high preference for eating in well-known food chains (43%).

Predictors of travel intention.

Two regression analyzes were applicated in order to identify which variables operate as predictors of the tourist's intention to travel and the intention to reduce the duration of travel and tourism. The summary of the results obtained is illustrated in Table 5.

The findings of the first model executed reveal that the probability of traveling increases when the tourist is male, young (under 36 years old), without higher education and high income. It also contributes to increasing the intention to travel when the person perceives that traveling is safe, when they feel that the personal actions they are taking to try to limit the spread of the coronavirus do not make a difference, and when they consider that there is little probability of getting sick from Covid-19. In particular, the predictor variables with the greatest impact, in decreasing order, are: Perception of security (3.7), educational level (1.7), income (1.7), age (1.5), contribution of self-care (1.5), sex (1.4) and the probability of infection (1.3).

Examining the results of the second regression model reveals that the probability that a tourist does not decide to reduce the duration of travel and tourism would occur when the person is male, with a high income level, when the person perceives that traveling is safety, when you consider that the personal actions you are taking to try to limit the spread of the coronavirus do not make a difference, and when the country's recovery expectations are positive. The contribution of each predictor variable, from highest to lowest, is as follows: perception of travel safety (6.1), contribution of self-care (1.7), age (1.6), expectations of the country (1.5) and income level (1.4).

The contrast of both statistical models allowed the identification of four variables that are important both to explain both the tourist's intention to travel and the preference to maintain or increase the duration of travel and tourism. These factors make it possible to define the profile of said tourist as that of a young person (under 36 years old), with a high monthly income level (greater than CLP 700,000),

Table 5. Binary logistic regression models (n = 979)

Variable	Model 1 (y = travel intention)			Model 2 (y = reduce travel)		
	OR	Sig.	IC (95%)	OR	Sig.	IC (95%)
Sex (man)	1.36	.034*	[1.02, 1.80]			
Age (less than 36 years old)	1.48	.009**	[1.11, 1.99]	1.58	.005**	[1.15, 2.19]
Superior level education (not)	1.68	.001**	[1.25, 2.27]			
Income (> CLP 700.000)	1.66	.004**	[1.18, 2.34]	1.42	.048*	[1.00, 2.02]
Contribution of self-care (low)	1.46	.009**	[1.10, 1.94]	1.72	.001**	[1.26, 2.35]
Traveling safe perception (yes)	3.68	.000***	[2.76, 4.90]	6.05	.000***	[4.45, 8.21]
Probability of getting infected (low)	1.30	.087+	[0.96, 1.74]			
Country expectations (positive)				1.53	.015*	[1.08, 2.15]
Constant	-2.05	.000***		0.10	.000***	
Hosmer and Lemeshow test	χ^2=4.22	Sig.= .837		χ^2=15.25	Sig.= .054	
R2 de Cox y Snell	.133			.188		
R2 Nagelkerke	.181			.264		

OR = Odds ratio; +p < .10; *p < .05; **p < .01; ***p < .001

who considers that traveling is safe and who perceives that the personal actions that are taking to try to limit the spread of the virus are not significant. Otherwise, it could be established that the people who will be most affected by their travel intention and preferences are adults over 35 years of age, with low incomes, who consider that traveling is not safe and who feel that their self-care actions (such as social distancing , use of masks, etc.) are essential to combat the pandemic.

DISCUSSION AND CONCLUSION

Firstly, regarding the tourist's perception of the pandemic, it is revealed that there is pessimism regarding the overcoming of the health crisis and the lower probability of contagion of COVID-19. In this area, those who believe that getting sick from coronavirus is the most serious are women, the oldest age groups, retirees and those who do housework or work independently. These findings assume that people who work as salaried employees (public and private sector) or who are students perceive a lower risk of becoming seriously ill given the security protocols present in their organizations.

On the other hand, there is a positive assessment of the work carried out by health personnel and scientists to face the crisis, but not by politicians and the effectiveness of their measures. Also, most tourists value the personal effort they are making to control the pandemic and consider it important to do things for the benefit of others (prosociality).

Second, the results confirm that the pandemic negatively affected people's income, with the lowest-income segment being the most affected. This evidences the need to establish and promote social aid programs that allow the most vulnerable sectors to enjoy tourism.

Thirdly, in terms of travel preferences, proximity tourism stands out with a focus on nature, sun and beach tourism. Which makes sense, when understanding the situation of confinement to which the population has been exposed. For the rest, tourists indicated that they will travel mostly accompanied by family and friends, that they plan to spend the same or less than they did before the pandemic (between 20 and 50% less), and that they will continue to respect self-care measures (such as the use of masks and disinfectants).

From the analysis of the determinant factors in travel planning, the study highlighted the intention of the tourist to learn more about the destination and to visit nearby destinations (within the country). However, the acquisition and advice of services in travel agencies does not arouse the same interest in this post-pandemic scenario, nor does the contracting of travel insurance.

Fourth, there is a high perception of insafety of travel due to Covid-19. This is manifested in the reduction of the duration of the trips, the favoritism for visiting places without much influx of tourists and a lesser intention to have contact with the residents of the place visited.

Along the same lines, new concerns are evident, with emphasis on the destination's safey measures, concern about knowing the endemic diseases of the place increases and interest in learning about the destination's health system increases. This is also expressed in a greater concern for the hygiene and safety of tourist services, such as accommodation, gastronomy, recreation sites and public transport. Indeed, a large part of tourists indicated that given the pandemic today they prefer to stay in high-quality or recognized hotels and restaurants.

Fifthly, even when four determining variables were identified in the tourist's intention to travel and their preference to maintain or increase the duration of visits and tourism, the perception of risk is the predictor with the highest incidence. Thus, to the extent that people perceive that the risk of traveling is low, the intention to travel will increase (inverse relationship).

Regarding the other significant variables (age, income and perception of the contribution of self-care measures), it is revealed that there is a greater probability and intention to travel in young people, with higher income and who do not consider that their self-care actions (such as confinement, social distancing, use of masks, etc.) are essential to combat the pandemic.

This situation denotes that to the extent that people perceive that the risk of traveling is low, the intention to travel will increase (Hajibaba et al., 2015). Therefore, even when there are incident sociodemographic variables, the role of perceived risk is the determining variable for the traveler, as has recently been exposed by other authors (Karl & Schmude, 2017; Kim et al., 2021).

In this way, it is concluded that the new post-Covid-19 tourism establishes a new profile of the tourist, more demanding, which will demand strict hygiene and sanitation standards of spaces. Therefore, the challenge for tourism organizations is to adopt these recommendations and work together in order to restore confidence to visitors within the framework of a new travel culture.

Finally, for future studies it is suggested to replicate the research in order to corroborate the findings obtained and measure its evolution over time (longitudinal study). It would also be relevant to examine the incidence of other independent variables on the intention to travel, especially of psychographic factors. It is also recommended to analyze the tourist's perception of risk, a determining variable of the study, from a multidimensional perspective, using multivariate techniques (such as the structural equation model). Moreover, it would be interesting to develop this study in other tourist regions of Chile, to evaluate similarities and differences, both in the tourist profile and in the variables determining their behavior and intention to travel.

ACKNOWLEDGEMENTS

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