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FREE INDEPENDENT TRAVELERS (FITS) TRAVEL PREFERENCES AND BEHAVIOR: A POST-ENDEMIC PERSPECTIVE

NHAJRIL KAMARUDDIN[1], AHMAD FITRI AMIR[2], QURATULAIN SYAHIRAH AWANG ALI[3], MOHD HAFIZ HANAFIAH[2]

[1]*YTL International College of Hotel Management, Selangor, Malaysia*
[2]*Universiti Teknologi MARA, Faculty of Hotel and Tourism Management, Selangor, Malaysia*
[3]*Universiti Sultan Zainal Abidin, Faculty of Applied Social Sciences, Terengganu, Malaysia*

Mailing address: Ahmad Fitri Amir, Faculty of Hotel and Tourism Management, Universiti Teknologi MARA, 42300 Puncak Alam, Selangor, Malaysia, e-mail: fitriamir@uitm.edu.my

Abstract
Introduction. This empirical study investigates the outbound travel preferences, risk perception, and behavior of Free Independent Travelers (FITs), specifically focusing on the post-endemic perspective. ***Material and Methods.*** Data were collected from 345 respondents using a purposive sampling method. The data were analyzed using Partial-least Squares-Structural Equation Modeling (PLS-SEM) through SmartPLS 4.0 software. ***Results.*** Contrary to much existing literature, the study revealed that perceived threat and transmission risks did not negatively impact FITs' travel intentions. Instead, both risk perceptions positively influenced travel attitudes, likely due to post-pandemic factors such as government mitigation measures and high vaccination rates. Additionally, FITs' travel intentions were significantly influenced by their attitudes and perceived behavioral control. ***Conclusions.*** The study contributes to the emerging discourse on post-pandemic travel behaviors by challenging traditional assumptions about the role of risk perception in shaping travel decisions. It shows that perceived risks do not deter FITs' travel intentions post-pandemic. Instead, these risks positively influence travel attitudes, highlighting the role of mitigation measures and vaccination rates, and offering fresh perspectives on travel behavior in a post-endemic world.

Key words: free independent travelers, perceived risk, tourist behavior, theory of planned behavior

Introduction

In recent years, the phenomenon of Free Independent Travelers (FITs) has garnered increasing scholarly attention, reflecting broader shifts within the tourism industry toward personalized and autonomous travel experiences. FITs distinguish themselves by eschewing traditional tour packages and organized itineraries, favoring instead a mode of travel that allows for individualized exploration and personalized experiences [1, 2]. This trend is not merely anecdotal; Leith [3] and Yang [4] report a significant rise in the popularity of FITs, underscoring their preference for customizing travel plans independently.

The FIT segment is experiencing growth globally, driven by factors such as increased access to travel information, technological advancements, and changing consumer preferences. FITs tend to be more budget-conscious compared to other types of tourists. They actively search for cost-effective accommodation, transportation, and dining options, aiming to maximize their travel budget without compromising on quality [1]. This economic value stems from their direct spending on local businesses, supporting small-scale enterprises and contributing to the economic sustainability of tourism destinations.

The unique characteristics of FITs, including their adventurous spirit and desire for autonomy, underscore the need for a comprehensive understanding of how they perceive and respond to travel risks. Hanafiah et al. [5] argue that the implications of perceived risk for FITs may diverge from those for other traveler segments due to their independent nature. Notably, FITs may experience heightened anxiety and concerns related to health risks, safety protocols, and travel restrictions, particularly in the context of the post-endemic phase [6]. Moreover, long-term effects include a shift towards domestic and rural destinations, increased reliance on technology for trip planning, and a preference for flexible, cancelable bookings [7]. This raises critical questions about how these risk perceptions influence their travel intentions and behaviors.

Despite the increasing prominence of FITs in global tourism, there remains a significant gap in the literature concerning how these travelers perceive and respond to risks in the post-endemic phase. The endemic phase refers to a stage where COVID-19 is no longer a major disruptor to travel but remains a persistent concern that travelers must navigate [8]. The endemic phase presents unique challenges and opportunities for tourism destinations, and understanding how FITs navigate these challenges is essential for maintaining competitiveness in the global tourism market [9]. This phase requires a re-evaluation of traditional risk perception frameworks to account for the ongoing, albeit less severe, impact of the virus on travel behavior. On the other hand, existing studies have primarily focused on general tourist populations or other specific traveler segments, often neglecting the unique needs and behaviors of FITs [10, 11]. This oversight is particularly problematic given that FITs, with their preference for autonomy and personalized experiences, may have distinct risk perceptions that influence their travel choices in ways that differ from more conventional tourists.

The existing body of literature often simplifies risk as a singular construct, neglecting the multifaceted factors that contribute to its formation and evolution among independent travelers [12, 13]. This simplification is evident in the limited exploration of how specific dimensions of perceived risk, such as health and safety concerns in the endemic phase, shape the decision-making processes of FITs. Moreover, while risk perception is recognized as a critical factor in tourist decision-making, the dynamic nature of these perceptions, especially in the context of evolving global health situations, remains underexplored [14]. As such, this study seeks to address these gaps by offering a comprehensive examination of the factors influencing risk perceptions among FITs during the post-endemic phase and their subsequent impact on travel intentions.

The primary objective of this study is to examine how perceived risk attributes during the endemic phase influence the travel intentions of FITs. Specifically, the study seeks to (i) identify the key factors that shape risk perceptions among FITs in the endemic phase; (ii) explore the relationship between perceived threat and transmission risks and the travel intentions of FITs. This study's integration of TPB with perceived risk attributes offers a significant theoretical contribution to the field of tourism research. TPB, which includes components such as attitude, subjective norms, perceived behavioral control, and behavioral intention, provides a robust framework for understanding tourist behavior. However, its application to post-endemic risk perceptions, particularly in the context of an endemic phase, remains limited. By applying TPB in this context, this research aims to extend the theory's applicability and offer new insights into the behavioral intentions of FITs.

Literature Review

The Theory of Planned Behavior (TPB) posits that three core factors – attitude towards the behavior, subjective norms, and perceived behavioral control – are instrumental in shaping individuals' behavioral intentions [15]. Within the realm of tourism studies, this model has been extensively utilized to dissect travelers' decision-making processes, offering a robust framework for understanding the cognitive and social dynamics that influence travel behaviors [16, 17]. However, while TPB provides a solid foundation, the integration of perceived risk, particularly in the context of health crises, introduces a critical dimension that necessitates deeper exploration. This review seeks to synthesize the existing literature on TPB and perceived risk, highlighting key themes, contradictions, and gaps, with a specific focus on the evolving preferences and behaviors of Free Independent Travelers (FITs).

The existing literature widely acknowledges the importance of attitude, subjective norms, and perceived behavioral control in shaping tourists' intentions and behaviors. Attitude, defined as an individual's positive or negative evaluation of engaging in a particular behavior, has been shown to be a significant predictor of travel intentions [18]. Subjective norms, which refer to the perceived social pressures to engage or not engage in a behavior, also play a crucial role, particularly in the context of travel where cultural and familial expectations can heavily influence decision-making [19]. Perceived behavioral control, or the belief in one's capability to perform a behavior under various conditions, further complements these factors by accounting for the practicalities and perceived ease or difficulty of engaging in travel [15, 16].

A recurring theme in the literature is the intersection of these TPB components with perceived risk. Perceived risk, a multifaceted psychological construct encompassing uncertainties and potential negative outcomes, is particularly relevant in the context of travel due to the inherent risks associated with unfamiliar environments and situations [20, 21]. The COVID-19 pandemic has brought this construct to the forefront, as health and safety concerns have become paramount in travelers' minds [22, 23]. Studies have shown that perceived risks related to health, safety, and financial uncertainties significantly influence tourists' attitudes, subjective norms, and perceived behavioral control, thereby shaping their travel intentions [24].

Despite the general consensus on the importance of perceived risk in shaping travel behavior, the literature reveals several contradictions and tensions. For instance, while some studies emphasize the negative impact of perceived risk on travel intentions, suggesting that higher levels of perceived threat and transmission risks lead to lower travel intentions [25], others highlight the complexity of this relationship. Bae and Chang [26] argue that perceived risk can also foster positive behavioral intentions, particularly in contexts where "untact" (contactless) tourism is promoted. This contradiction suggests that perceived risk does not uniformly deter travel but may instead redirect travelers towards safer, more controlled forms of tourism.

Furthermore, while TPB provides a comprehensive framework for understanding the cognitive processes underlying travel decisions, its application to post-endemic contexts has been met with mixed results. Some studies successfully apply TPB to explain changes in travel behavior during and after the pandemic [27, 28], while others find that the traditional components of TPB do not fully capture the complexities of pandemic-induced behavioral shifts. For example, the role of subjective norms may diminish in importance when health risks are perceived as high, as individual safety concerns override social pressures [5].

The existing literature on TPB and perceived risk in tourism, while extensive, still harbors several notable gaps. One significant gap is the limited empirical research on the long-term impacts of health crises on travel behavior. While studies have explored the immediate effects of perceived risk, there is a paucity of research on how these perceptions evolve over time and continue to influence travel behavior in the endemic phase [18, 29]. This gap is particularly relevant for understanding the sustained changes in FITs' preferences, such as their increased propensity for domestic and rural travel, as well as their heightened demand for flexibility and safety in travel arrangements [25].

Another gap lies in the application of TPB to diverse traveler segments. Much of the existing research focuses on general tourist populations, with limited attention to specific segments like FITs, who may exhibit distinct behavioral patterns due to their preference for autonomy and personalized experiences [5, 30]. The unique characteristics of FITs, including their adventurous spirit and desire for independence, may lead to different risk perceptions and decision-making processes compared to other traveler segments. Therefore, further research is needed to explore how TPB components and perceived risk interact specifically within the FIT segment.

Hypotheses Development

Perceived risk, encompassing the uncertainty and potential negative outcomes linked to a decision, plays a critical role in shaping travelers' behavioral intentions [31]. Within the Theory of Planned Behavior (TPB), which postulates that attitude, subjective norms, and perceived behavioral control determine behavioral intentions [15], perceived risk can influence each

of these determinants. When examining outbound travel intentions, perceived risks related to health, safety, and financial uncertainties can diminish travelers' confidence in their ability to control their travel experiences, thereby negatively impacting their intentions to travel [32]. The heightened awareness of potential health threats can lead travelers to reevaluate their travel plans, often resulting in decreased travel intentions [24]. This is particularly evident during health crises, where the perceived threat of virus transmission significantly reduced global travel activities [23].

Furthermore, transmission risks, closely related to the fear of contracting diseases during travel, can significantly deter individuals from engaging in travel activities [33]. These risks are amplified by media coverage and governmental advisories, which further influence public perception and exacerbate concerns about safety during travel [20, 22]. As a result, travelers, particularly Free Independent Travelers (FITs), are likely to develop a cautious approach towards outbound travel, preferring to minimize exposure to potential transmission risks. This behavioral tendency aligns with TPB, where increased perceived behavioral control (or the lack thereof due to heightened perceived risks) reduces the likelihood of performing the behavior – in this case, traveling. Thus, the hypothesis is proposed:

HIa: The higher the perceived threat risk, the lower the FITs' outbound travel intention.
HIb: The higher the perceived transmission risk, the lower the FITs' outbound travel intention.

The TPB posits that attitudes toward behavior significantly influence behavioral intentions [15]. In the context of travel, perceived risks can shape these attitudes by affecting how travelers evaluate the desirability and safety of traveling. The presence of threat risks, such as health hazards or safety concerns, can lead to a more negative evaluation of travel, thereby diminishing travelers' attitudes towards it [25]. During crises, travelers' attitudes towards international travel became increasingly negative as the perceived risks associated with travel escalated [26]. This negative shift in attitude is critical in understanding the decline in travel activities during such periods, as it reflects the broader psychological impact of perceived risks on travelers' decision-making processes.

Transmission risks, particularly in the context of contagious diseases, further exacerbate negative attitudes towards travel [25]. When travelers perceive a high likelihood of disease transmission, they are more likely to develop aversive attitudes towards travel destinations, particularly those known to be high-risk areas. This attitudinal shift is supported by the TPB, where negative attitudes, formed due to high perceived risks, reduce the intention to engage in the behavior. As travelers internalize the potential dangers of travel, their attitudes towards outbound travel become increasingly negative, reflecting a broader trend towards risk aversion in uncertain environments [27]. Therefore, the hypothesis is proposed:

H2a: The higher the perceived threat risk, the lower the FITs' outbound travel attitude.
H2b: The higher the perceived transmission risk, the lower the FITs' outbound travel attitude.

The TPB framework emphasizes that attitudes, subjective norms, and perceived behavioral control are pivotal in predicting behavioral intentions [15]. Within the travel context, a positive attitude towards travel is crucial for forming strong travel intentions. When travelers hold favorable attitudes towards a destination, influenced by factors such as perceived safety and destination attractiveness, they are more likely to intend to visit [18]. Conversely, negative attitudes formed due to perceived risks can significantly hinder travel intentions. This relationship is particularly evident among FITs, whose travel decisions are more autonomous and thus more susceptible to individual attitudinal influences [29].

Subjective norms, representing the social pressures perceived by an individual to perform or abstain from a behavior, also play a critical role in shaping travel intentions [15]. In a post-endemic world, social norms regarding travel have shifted, with increased emphasis on safety and health precautions. These norms can either encourage or dissuade travel, depending on the prevailing societal attitudes towards risk and travel. For instance, in cultures where travel is still highly valued despite the risks, subjective norms may continue to support outbound travel intentions [28]. Conversely, in contexts where risk aversion is more pronounced, subjective norms may deter individuals from traveling, especially when reinforced by media and government advisories [19].

Perceived behavioral control, reflecting an individual's belief in their ability to perform a behavior despite potential barriers, is a crucial determinant of travel intentions [15]. In the context of post-endemic travel, perceived control over travel risks – such as the ability to avoid crowded places or access healthcare abroad – can significantly influence travel intentions. When FITs believe they can manage the risks associated with travel, their intentions to travel are likely to be stronger. However, if the perceived control is low due to external factors like travel restrictions or health concerns, travel intentions may diminish [18]. Hence, three hypotheses were articulated:

H3a: FITs' travel attitude significantly influences their outbound travel intention.
H3b: FITs' subjective norm significantly influences their outbound travel intention.
H3c: FITs' perceived behavioral control significantly influences their outbound travel intention.

The study framework illustrated in Figure 1 is constructed upon the hypothesized propositions and grounded in the TPB.

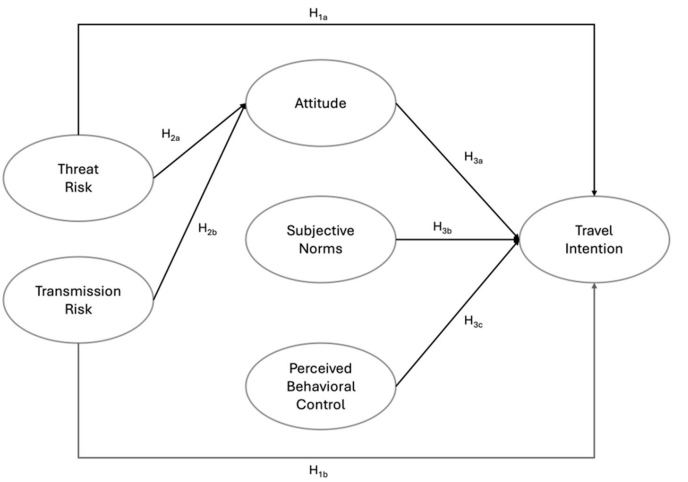

Figure 1. Study framework

Material and Methods

This research adopts a positivist research paradigm to empirically test the proposed study framework using quantitative and cross-sectional methodologies. A purposive sampling approach, specifically a non-probability sampling method, is employed due to the unavailability of complete data on the total population of outbound tourists, which precludes the formation of a comprehensive sampling frame. GPower version 3.1 software is utilized in this study to determine the minimum required sample size, adhering to contemporary standards in minimum sample size calculations. Following the guidelines set forth by Hair Jr et al. [34], the study establishes a minimum sample size of 123 respondents.

The target population involves Free Independent Travelers (FITs), who are popular among tourists from both developed and developing countries [35]. Given the limited empirical research on this population, Malaysian FITs who have intentionally traveled abroad for tourism purposes (leisure, visiting friends and relatives, and others) within the last five years were chosen as the unit of analysis. Both first-time and repeat travelers were included in this study. Respondents who agreed to participate were asked to complete an online survey. Prior to the data collection, the study was approved by the Research Ethics Committee of the Universiti Teknologi MARA, Malaysia (REC/02/2022 (PG/MR/9)).

An online self-administered survey was used as the data collection technique, leveraging the Google Form platform. This method was chosen due to movement control restrictions, providing respondents the freedom and safety to complete the questionnaire [25, 27]. Every question was set as compulsory to prevent respondents from skipping any questions, ensuring no missing data throughout the entries. Screening questions were included to confirm the eligibility of respondents for the survey.

The survey comprised three sections (see Appendix I). Section A depicted the background profiles of respondents [36]. Section B focused on the perceived risk attributes [27, 37] and Section C assessed the outbound travel intention [37, 38]. Questions were designed to be short and simple, with less than sixteen words per question, as recommended by Moser and Kalton [39]. To ensure the validity of the survey items, three experts were consulted [40]. Their input and feedback were recorded, and the survey items were amended in consultation with supervisors. A preliminary small-scale study involving 30 participants was undertaken to evaluate the questionnaire, examine the feasibility of the research design and data collection procedures, and assess the reliability and uni-dimensionality of the constructs using the Cronbach's Alpha reliability test [41]. The Cronbach's Alpha values for all six constructs ranged from 0.700 to 0.950, indicating strong internal consistency.

Data collection spanned five months post-endemic, with the questionnaire shared on online platforms such as "Kaki Travel Malaysia" (80,000 followers) and "Travel Buddies Malaysia" (33,000 followers) targeting Malaysian outbound travelers. Participants were required to give consent before taking part in the survey. Specifically, 345 valid responses were collected. Most were women (n = 186; 53.91%). The majority were from 35 to 54 years old (n = 213; 60.7%). Concerning monthly income, most of them earned between MYR3,001 and MYR6,000 (n = 242; 70.1%). Based on the analysis, 148 (42.9%) of the respondents travelled between four to six days based on their last trip, and 95 (27.5%) travelled between seven to ten days. Notably, 95 (27.5%) of the respondents intended to travel one to three months after outbound travelling is permitted, while 84 (24.3%) intended to travel as soon as four to six months after outbound travelling is permitted.

The data were analyzed using Partial-least Squares-Structural Equation Modeling (PLS-SEM) through SmartPLS 4.0 software, a technique suitable for predicting relationships among complex latent constructs with minimal sample sizes [41]. The PLS-SEM path models were developed in two stages: first, estimating the measurement model, and then conducting structural model analysis to explore relationships and hypothesized paths within the framework [42, 43].

Results

The study utilized the PLS-SEM technique with SmartPLS 4.0 software [42] to analyze the model. Initially, empirical data underwent tests to confirm non-multivariate normality prior to inferential analysis [41], relying on multivariate skewness and kurtosis tests via WebPower software [44]. Statistically, Mardia's multivariate skewness showed a value of 28.47 ($p < 0.001$), while Mardia's multivariate kurtosis was 117.33 ($p < 0.001$). These results indicated non-multivariate normality, justifying the use of the PLS-SEM approach for model testing.

Measurement Model Assessment

The assessment of the measurement model involved examining relationships between latent variable constructs and their corresponding indicators [41]. The study's framework included six reflective constructs. Evaluation of the reflective measurement model followed four metrics: indicator reliability, internal consistency reliability, convergent validity, and discriminant validity [41]. Table 1 presents scores for outer loading, composite reliability (CR), convergent reliability, and Cronbach's Alpha in the reflective measurement model assessment.

All factor loadings were above the acceptable threshold of 0.7, as stated by Hulland [45]. Additionally, the composite reliability ratings for all constructs fell within the range of 0.843 to 0.911, and the Cronbach's alpha values ranged from 0.729 to 0.865. It is noteworthy that both indicators' reliability values exceeded the recommended threshold according to Nunnally and Bernstein [46]. Subsequently, the average variance extracted (AVE) was utilized to assess convergent validity following the approach by Hair et al. [41]. The AVE values ranged from 0.541 to 0.712, indicating no issues with convergent validity.

Addressing the discriminant validity values is the fourth step in measurement model assessment. The Heterotrait-Monotrait (HTMT) ratio was the modern approach employed in this study to manage discriminant validity issues [47]. The HTMT analysis outcomes (Tab. 2) reveal an acceptable discriminant validity fit as all values are less than 0.85 (cut off point) [48]. The absence of collinearity problems among the latent constructs established the model's discriminatory validity [41].

Structural Model Assessment

The subsequent stage of PLS-SEM analysis involves assessing the structural model following the evaluation of the measurement model assessment results [41]. The established criteria for this examination include: i) estimating path coefficients, ii) determining the coefficient of determination (R^2), iii) evaluating effect size (f^2), and iv) assessing prediction relevance (Q^2) [49]. The structural model path analysis is presented in Table 3 and Figure 2.

Cohen (2013) stated that effect sizes of 0.02, 0.15, and 0.35 imply small, medium, and substantial effect sizes. Table 3 presents the study model's effect size (f^2) values. Most of the hy-

Table 1. Reflective measurement model assessment

Construct	Item	Loading	Cronbach Alpha	CR	AVE
Threat Risk Perception	THR01	0.820	0.729	0.847	0.648
	THR02	0.816			
	TRP03	0.779			
Transmission Risk Perception	TRR01	0.737	0.752	0.843	0.574
	TRR02	0.704			
	TRR03	0.760			
Travel Attitude	TA01	0.674	0.788	0.843	0.541
	TA02	0.765			
	TA03	0.755			
	TA04	0.752			
	TA05	0.728			
Perceived Behavioral Control	PBC01	0.850	0.865	0.908	0.712
	PBC02	0.864			
	PBC03	0.832			
	PBC04	0.828			
Subjective Norms	SN01	0.832	0.883	0.911	0.631
	SN02	0.808			
	SN03	0.743			
	SN04	0.774			
	SN05	0.795			
	SN06	0.812			
Travel Intention	TI01	0.772	0.835	0.883	0.603
	TI02	0.791			
	TI03	0.751			
	TI04	0.801			
	TI05	0.765			

Notes: Threat Risk Perception (THR), Transmission Risk Perception (TRR), Travel Attitude (TA), Perceived Behavioral Control (PBC), Subjective Norms (SN), and Post-Endemic Outbound Travel Intention (TI).

Table 2. Result of Heterotrait-Monotrait (HTMT)

	PBC	TI	THR	SN	TA	TRR
PBC						
TI	0.825					
THR	0.883	0.760				
SN	0.886	0.818	0.741			
TA	0.656	0.845	0.647	0.783		
TRR	0.868	0.709	0.758	0.837	0.581	

Notes: Threat Risk Perception (THR), Transmission Risk Perception (TRR), Travel Attitude (TA), Perceived Behavioral Control (PBC), Subjective Norms (SN), and Post-Endemic Outbound Travel Intention (TI).

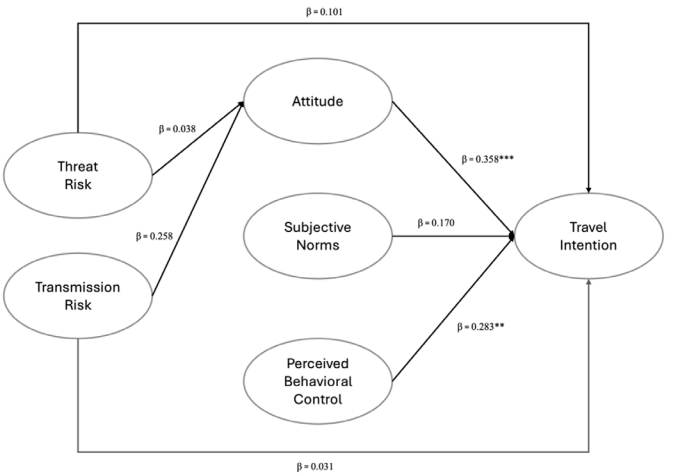

Figure 2. Path analysis results

pothesized relationship reflects small and moderate effect size between the predictor and dependent variable. The coefficient of determination (R^2) assessment indicates that tourist post-endemic perceived risk (threat risk perception and transmission risk perception) could explain 28.9 percent of tourist attitude. In comparison, post-endemic perceived risk, attitude, subjective norms and perceived behavioral control could explain 64.2 percent of variance of outbound travel intention dimension.

The analysis of the first proposed hypothesis (H_{1a}) revealed that threat risk perception did not negatively impact Free Independent Travelers' (FITs) travel intention (β = 0.101, t = 1.780). Similarly, the second hypothesis (H_{1b}) found no significant ad-

Table 3. Path Coefficient (β), T-Value and Significance Level

H	Relationship	β	T Values	P Values	Effect size f^2	Decision
H_{1a} (-ve)	Threat Risk Perception -> Travel Intention	0.101	1.780	0.075	<0.02	Not Supported
H_{1b} (-ve)	Transmission Risk -> Travel Intention	0.031	0.368	0.713	<0.02	Not Supported
H_{2a} (-ve)	Threat Risk -> Travel Attitude	0.348	5.078	0.000	0.116	Not Supported
H_{2b} (-ve)	Transmission Risk -> Travel Attitude	0.258	3.301	0.001	0.064	Not Supported
H_{3a} (+ve)	Travel Attitude -> Outbound Travel Intention	0.358***	4.835	0.000	0.197	**Supported**
H_{3b} (+ve)	Subjective Norms -> Travel Intention	0.170	1.846	0.065	0.023	Not supported
H_{3c} (+ve)	Perceived Behavioral Control -> Travel Intention	0.283**	2.580	0.010	0.063	**Supported**

Notes: *** – p-value < .001; ** – p-value < .05.

verse link between transmission risk and FITs' outbound travel intention (β = 0.031, t = 3.301). Contrary to the study proposition, the results indicated that threat risk perception positively impacted FITs' outbound travel attitude (H_{2a}: β = 0.348***, t = 5.078), leading to the rejection of H_{2a}. Similarly, hypothesis H_{2b} was rejected as transmission risk positively influenced FITs' travel attitudes (β = 0.258***, t = 3.301). Hypothesis H_{3a} assessment revealed a positive correlation between travel attitude and FITs' outbound travel intention (β = 0.358***, t = 4.835). Hypothesis H_{3c} was also supported, as perceived behavioral control significantly influenced FITs' outbound travel intention (β = 0.283***, t = 2.580). However, hypothesis H_{3b}, which proposed that subjective norms positively impact FITs' travel intention, was rejected (β = 0.170, t = 1.846).

Discussion

The study findings provide valuable insights into the evolving dynamics of post-pandemic travel preferences and behaviors among Free Independent Travelers (FITs). The absence of a significant negative relationship between threat risk perception or transmission risk perception and outbound travel intention challenges the prevailing assumptions established by previous research. Notably, studies by Aziz and Long [50], Luo and Lam [51], and Perić et al. [52] assert that elevated risk perceptions, especially during health crises, suppress travel intentions. However, the divergence between these prior findings and the current study results underscores the fluid nature of risk assessment in a post-pandemic landscape. This discrepancy highlights the need for a nuanced understanding of how traveler psychology adapts to global crises over time. Factors such as risk habituation and evolving public health measures could reshape traditional risk-response paradigms, calling for more dynamic theoretical models to capture these shifts.

A plausible explanation for these contrasting findings lies in the broader context of post-pandemic recovery. Enhanced vaccination coverage, strengthened medical infrastructure, and visible government actions – such as mandatory testing, contact tracing, and transparent risk communication – have likely fostered traveler confidence. These structural and procedural advancements not only reduce perceived health risks but also mitigate fear, allowing travelers to focus on their aspirations. The findings align with Zain et al. [30], who emphasize that effective risk mitigation measures lower perceived risks, encouraging individuals to re-engage in pre-pandemic activities. Moreover, pandemic fatigue and the pent-up demand for leisure and exploration may have amplified the desire for travel, compelling individuals to balance risk considerations with the psychological benefits of freedom and fulfillment. This confluence of external reassurances and internal motivations demonstrates the importance of addressing both structural and psychological factors in post-crisis tourism recovery strategies.

Another important dimension to consider is the potential recalibration of risk perception paradigms among travelers. Individuals in post-pandemic contexts may adjust their tolerance for uncertainty, particularly when motivated by strong travel aspirations or social connections. This recalibration signifies a shift in how travelers weigh perceived risks against perceived benefits, reflecting a psychological balancing act. Rather than allowing risk to serve as a deterrent, travelers may now view it as a manageable aspect of their decision-making process, thereby diminishing its negative impact on travel intentions. This evolution in risk assessment may explain why traditional models of risk aversion no longer hold the same predictive power in post-pandemic scenarios, necessitating a re-evaluation of risk-related constructs in tourism research.

The study finding that threat risk perception and transmission risk perception positively influence travel attitudes introduces another critical shift in understanding traveler behavior. Contrary to earlier research [51, 53], which associates heightened risk perception with fear and avoidance, the current findings suggest a transformative role of risk awareness. Rather than provoking anxiety, an elevated awareness of risks may now inspire travelers to adopt proactive behaviors, such as planning safer, more controlled travel experiences. This adaptation highlights the interplay between emotional and cognitive responses to crises, where risk is perceived not as a barrier but as a factor to be managed. This perspective resonates with the concept of adaptive resilience proposed by Hall et al. [8], which posits that individuals embrace calculated risks and navigate uncertainties with enhanced preparedness.

The role of psychological resilience and motivational drivers further underscores the evolving nature of travel attitudes. Travelers increasingly perceive risk as an inherent part of the modern travel landscape and prioritize safety measures without abandoning their aspirations. This mindset shift reflects a broader cultural and psychological adaptation to crises, where individuals internalize resilience as a core strategy for navigating uncertainties. As travel motivations intertwine with adaptive behaviors, the findings offer practical implications for tourism stakeholders. Encouraging travelers to adopt and trust safety measures, while simultaneously addressing their aspirations, could foster a balanced approach to tourism recovery that aligns with changing traveler mindsets.

The study also reaffirms the established link between travel attitude, perceived behavioral control, and travel intention [22, 54]. However, the non-significance of subjective norms in influencing travel intentions reveals an important shift in decision-making dynamics. Traditionally, subjective norms – shaped by peer and societal expectations – played a pivotal role in guiding individual behavior. In the post-pandemic context, however, the diminished influence of these norms suggests a growing individualization of travel decisions. FITs appear to rely more on personal agency and internal assessments of safety and control, rather than conforming to external social pressures. This shift marks a departure from the collective mindset that defined pandemic responses, such as widespread compliance with lockdowns and mask mandates.

The reduced influence of subjective norms aligns with self-determination and autonomy-oriented decision-making theories, which emphasize the primacy of personal motivations in guiding behavior. The pandemic may have further accelerated this trend by limiting social interactions and reducing the visibility of peer travel behaviors. As a result, travelers have become more self-reliant, relying on internalized judgments rather than external influences. This insight has significant implications for tourism marketing and policymaking. Strategies that emphasize personalized messaging and individual empowerment may resonate more effectively with post-pandemic travelers, who prioritize autonomy and self-determination in their travel choices.

Study Implications

This research significantly enhances the current understanding of post-endemic risk perceptions and their effects on travel intentions, particularly regarding FITs in a post-pandemic setting. Our study validates the Theory of Planned Behavior (TPB) model in the context of understanding travel intentions

during health crises, providing valuable contributions to the tourism and behavioral sciences literature. Our findings highlight the diverse roles played by the traditional components of the TPB model – attitude, subjective norms, and perceived behavioral control – in shaping post-endemic travel intentions. The lack of significance in subjective norms challenges prior assumptions, emphasizing the necessity to reassess the influence of social factors on travel decisions post-pandemic. This shift suggests that during unprecedented crises, individuals prioritize personal risk assessment and control over external social pressures. Future research should further explore these dynamics and potentially adjust the TPB model to better capture the complexity of travel behavior in post-endemic contexts.

The study highlights the role of perceived post-endemic risk in shaping travel decisions, extending previous research by demonstrating that individuals who perceive themselves as vulnerable are less likely to travel post-pandemic. This finding underscores the importance of understanding post-endemic risk perceptions and their impact on travel behavior. Researchers are encouraged to investigate additional factors that influence post-endemic risk and integrate these insights into predictive models to enhance their accuracy and applicability. Besides, the finding that post-endemic risk perception does not significantly influence Malaysian FITs' travel intention in the post-pandemic period is particularly enlightening. It suggests that effective crisis management can mitigate perceived post-endemic risks and stabilize travel intentions. This contribution provides a basis for future studies to explore how different dimensions of post-endemic management – such as communication strategies, safety measures, and flexibility in travel policies – can influence travel behaviors in various contexts.

In light of the findings, several actionable strategies are recommended to adapt to the evolving travel landscape and effectively manage traveler perceptions and post-endemic risk behavior. DMOs and travel businesses must act swiftly to regain travelers' trust by transparently communicating new travel requirements, regulatory policies, and safe practices. Providing relevant information about safety protocols, hygiene standards, and health measures will help potential travelers feel more secure about their post-endemic vacation plans. Efforts to improve and visibly demonstrate security, hygiene, and cleanliness should be actively communicated to minimize the perception of destinations as risky.

As travelers become more selective and adhere to new normal protocols, it is essential for tourism businesses to adapt their offerings accordingly. Destination managers should ensure local tourism businesses are prepared to cater to these new preferences, incorporating practices such as social distancing, enhanced sanitation, and flexible booking policies. This preparation will not only enhance the visitor experience but also foster a sense of safety and confidence among travelers. Besides, the pandemic has highlighted the need for flexibility and preparedness in the tourism industry. Stakeholders should develop dynamic and adaptive strategies that can respond to fluctuating health crises. For instance, during severe outbreaks, stricter health and safety protocols and flexible cancellation policies can attract cautious travelers. Conversely, when the situation improves, promoting attractions and cultural experiences can rejuvenate interest in travel.

Collaborative efforts are essential in redesigning tourism strategies, involving key stakeholders like hoteliers, tour operators, food and beverage outlets, and the media. This collaboration is vital for ensuring sustainable tourism operations and a unified approach to crisis management. However, it's important to note that a uniform approach may not be effective; instead, destination management organizations (DMOs) should develop customized strategic plans that align with their unique destination attributes, taking into account long-term Sustainable Development Goals (SDGs). Additionally, tourism stakeholders must stay vigilant about evolving health crises and adjust their strategies accordingly. Understanding the dynamics of perceived risk and its impact on travel intentions can help build trust, bolster brand reputation, and expedite tourism recovery. This proactive strategy empowers stakeholders to implement timely measures and maintain resilience against future challenges.

Conclusions

The study contributes to the emerging discourse on post-pandemic travel behaviors by challenging traditional assumptions about the role of risk perception in shaping travel decisions. It expands the theoretical understanding of how adaptive resilience and individual agency influence travel attitudes and intentions in recovery contexts. The study results necessitate a reassessment of established concepts regarding the influence of post-endemic risk perception on travel behavior. This highlights the importance of a deeper comprehension of individual motivations and contextual factors concerning perceived post-endemic travel risks. It advocates for the expansion of traditional travel behavior models to encompass a broader spectrum of psychological and situational variables influencing travel choices amid uncertainty. Contrary to conventional belief that risk aversion universally discourages travel, the findings reveal diverse behavioral patterns among FITs based on individual risk thresholds and specific travel circumstances.

For industry practitioners, these insights are crucial in devising targeted strategies aligned with the changing dynamics of post-endemic travel intention. Consequently, innovative post-endemic tourism marketing strategies are urgently needed to boost destinations' competitiveness upon the reopening of the travel market. Destination Management Organizations (DMOs) must revitalize their travel and tourism sectors by adapting and enhancing their domestic marketing strategies, product positioning, and communication approaches. Furthermore, local tourism service providers should prioritize offering authentic, secure, and accessible experiences that meet the demands of post-pandemic travelers. A comprehensive and collaborative approach to domestic tourism planning is vital for ensuring the industry's resilience.

Limitations and Future Research

Acknowledging the challenges and limitations encountered during this research is important. A key limitation lies in the study's geographic scope, as it focuses exclusively on Malaysian FITs. This restricts the generalizability of findings to other cultural or regional contexts where travel behaviors and risk perceptions may differ. Expanding future research to include participants from diverse cultural and geographic backgrounds would offer a more comprehensive perspective on global travel behaviors.

Another limitation stems from the cross-sectional nature of the study, which captures data at a single point in time. This design does not account for temporal shifts in risk perceptions and travel intentions as pandemic circumstances evolve. Employing longitudinal studies would allow researchers to track these changes over time, providing insights into how travelers

adapt to different pandemic stages. Moreover, this study narrowly focused on threat and transmission risks, neglecting other critical dimensions such as financial, psychological, and destination-specific risks. Future research could explore these broader risk factors to gain a more holistic understanding of decision-making processes.

Additionally, the unexpected insignificance of subjective norms in this study suggests a need for further exploration into the interplay between individual agency and social influences in travel decisions. Researchers should also investigate how marketing and communication strategies, such as emphasizing safety and flexibility, shape perceptions and behaviors. By addressing these limitations and pursuing diverse research avenues, future studies can better support the development of resilient and adaptive tourism strategies for an endemic world.

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