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Travellers' Risk Perceptions and Intentions to Visit African Destinations amidst COVID-19: The Case of Brands South Africa and Zimbabwe

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Abstract

The global COVID-19 pandemic has seen a rapid decline in arrivals globally, not only due to travel restrictions, but also reduced traveller confidence given their often-tarnished reputations, the pandemic has added a unique challenge to African destinations in their bid to implement tourism recovery strategies. This study examines travellers' risk perceptions and intentions to visit African destinations during the COVID-19 pandemic using South Africa and Zimbabwe as two competing case studies. Following a quantitative research design using an online survey, data was collected from 250 past visitors to the two countries. Firstly, results indicated a willingness to travel to Africa. Exploratory factor analysis and moderated multiple regression was used to test the effect of risk perception on brand image dimensions and revisit intentions for both countries respectively. Findings indicate that even though visitors may hold positive brand perceptions, risk perceptions weakened the relationship between specific dimensions of brand image (affective versus cognitive). However, these effects were not similar for the two countries. The study affirms that risk perceptions are country specific and highlights the importance of effective brand awareness and destination competitiveness to cushion the effects of perceived risk. Results also indicate that an increased frequency of visit increases destination familiarity which can mitigate some of the negative risk perceptions.

Keywords: Affective brand image; cognitive brand image; travel risk perceptions; COVID-19; South Africa; Zimbabwe

Introduction

During 2020, compulsory testing and reduced traveller confidence among other issues curbed international tourist arrivals (UNWTO Barometer, 2020) and the global COVID-19 pandemic saw a decrease of 83% in travel arrivals globally during the first quarter of 2021. The pandemic has negatively impacted the tourism sector severely as travel is now regarded as a high-risk activity (Zheng et al., 2021). According to the World Bank (2022), both South Africa and Zimbabwe have seen a significant drop in the number of tourist arrivals in 2020 (approximately 3 886 600 for SA and 639 000 for Zimbabwe) as compared to recorded figures for the same indicator in 2019 (approximately 1479700 for SA and 2294000 for Zimbabwe). This means that if the tourism sector was to recover, it would be contingent on an array of factors (after Sigala, 2020; UNWTO Barometer, 2022) and restoration of traveller confidence is key (Zhang et al., 2020; Agyeiwaah et al., 2021).

Travellers' perceived risk and fearful reactions to the COVID-19 pandemic have been documented in extant literature (e.g., Elizabeth et al., 2021; Kim et al., 2021; Bae & Chang, 2021) including protective behaviour by travellers (e.g., Miao et al., 2021). In some instances,

there are risk averse travellers who are not deterred by crisis (Hajibaba et al., 2015). Understanding an individual's fears associated with travel during the pandemic will help resuscitate the industry post COVID-19 (Zheng et al., 2021). The onus rests on tourism service providers to curb the risks associated with each stage of travel (Miao et al., 2021). Studies show that different countries are pursuing different measures to attenuate the impact of COVID-19 on perceived risk of travelling to a particular destination (e.g., UNWTO barometer, 2020; Alderman & Ewing, 2020; Kim et al., 2021). Understanding behaviour during a pandemic such as COVID-19 helps destination managers ascertain travellers' perceptions of a destination's brand image (Kim et al., 2021).

In a broader context, consumers' perceived risk is influenced by how much they are aware of a particular brand (Aaker, 1996), and one can expect that travel behaviours are contingent on perceived risk in a specific country given the tourist's familiarity with the brand (Hajibaba et al., 2015; Miao et al., 2021). Past studies have attempted to ascertain the antecedents to pandemic and post-pandemic travel intentions and risk perceptions (Li et al., 2020; Neuburger & Egger, 2021), and fear of travel and anxiety (Bhati et al., 2020; Rastegar et al., 2021; Yang et al., 2021). These studies have however inclined towards risk perceptions of travellers to developed destinations, hence little is known in the African context amid COVID-19.

Africa as a brand has always been associated with poverty, underdevelopment, danger and pestilence among other woes (Avraham & Ketter, 2017; Muhwezi et al., 2016; Osei & Gbadamosi, 2011). Such negative publicity has overshadowed Africa's pride in its prevalent culture, art and poetry among other features (Avraham & Ketter, 2017). While Sub-Saharan Africa's (SSA) tourism destinations are uncompetitive when juxtaposed against the world benchmark (WEF, 2010-2019), regional players such as South Africa and Zimbabwe find themselves in the same quagmire when compared with the regional benchmark (UNWTO Highlights, 2010-2020). An added challenge is the closing down of international borders that has crippled SSA tourism (Makoni & Tichaawa, 2020).

This study addresses this gap by applying risk perception and destination brand image theories. The objective is to examine the relationships between cognitive as well as affective brand images and revisit intentions of past visitors, taking into consideration travel risk perceptions. Destination South Africa and Zimbabwe are used as the case study since they compete for similar markets but are at different levels of economic development – South Africa as upper-middle income versus Zimbabwe as lower-middle income (World Bank, 2020). The GDP of South Africa stood at $62 086 million in 2021, and that of Zimbabwe at $19 273 in 2019 (Country Economy, 2021).

Literature review

Travellers' risk perceptions

Perceived risk is subjective and entails anticipation of a loss (Engel et al., 1986). This influences consumer behaviour in a negative way (Chang & Chen, 2014). The perceived risk theory alludes those perceptions of risk can be reduced if organisations are generous with information about a brand (Aaker, 1991). This theory elucidates why consumers naturally avoid a brand due to negative aspects attached to it (Chang & Chen, 2014) and that a consumer would rather minimise their perceived risk and maximise anticipated utility (Chang & Chen, 2014). Evaluating brand alternatives result in preferences with the least risk (Mitchell, 1992). This study seeks to establish travellers' perceived risks between brands Zimbabwe and South Africa.

Perceived travel risk is defined as "the probability that an action may expose them to danger that can influence travel decisions if the perceived danger is deemed to be beyond an

acceptable level" (Chew & Jahari, 2014: 383–384). COVID-19 has shifted focus towards untact tourism because of its high perceived risk (Bae & Chang, 2021). The disease has brought with it plethora of mental health problems including perceived risk (Han et al., 2020; Losada-Baltar et al., 2021). Demand for tourism is often attenuated by the level of a traveller's perceived risk during a pandemic (Rettie & Daniels 2020; Kim et al., 2021). Governments can therefore participate in curbing travellers' risk perceptions through pro-tourism policies (Foroudi et al., 2021). Travellers are often instinctive as they gallivant for travel related information (Nazir et al., 2021). As a result, they are exposed to both positive and negative media information about a destination (Parrey et al., 2019; Nazir et al., 2021). The latter has a negative impact on traveller risk perceptions (Parrey et al., 2019; Nazir et al., 2021). Instinctively, the quality of information relayed through the media has an influence on satisfaction and intention to visit a destination (Koo et al., 2016; Liberato et al., 2018).

Brand image

Initiated by Gunn and further developed into distinct factors, affective and cognitive destination brand image theory seeks to identify attractors that make a specific destination unique (Qu et al., 2011). It is a marketing tool which aids travel decision making. According to the brand image theory, a destination's key attractions are what make the brand unique (Echtner & Ritchie, 1993; Stepchenkova & Morrison, 2008; Vinyals-Mirabent, 2019). Cognitive image is emphasised as a dominant measure of destination image (Pike & Ryan, 2004), with some studies suggesting that affect image is reliant on cognition (Baloglu & McCleary, 1999). Destination image is thus, the total perceptions of a product shaped through the processing of information acquired from different sources (Han et al., 2009).

Nonetheless, travel behaviour is influenced by affective influences of a destination (Gartner, 1994; Pike, 2002; Stepchenkova & Morrison, 2008). Furthermore, conative destination image has its fair share of influencing travel behaviour (Gartner, 1994; Pike & Ryan, 2004; White, 2004). It is argued that image comes in the form of cognitive or affective evaluation (Konecnik & Gartner, 2007; Stepchenkova & Morrison, 2008; Tapia et al., 2019) which when combined form an overall image about destination (Tapia et al., 2019). Cognitive evaluations are because of one's beliefs and perceptions of a destination, while affective image is the individual's feelings about a destination (Stepchenkova & Morrison, 2008; Tapia et al., 2019). To encapsulate the variances in destination image, Echtner and Ritchie (1991) conceptualised destination image as attribute-based and holistic, comprising cognitive, affective and overall image.

Destination image is "the sum of beliefs, ideas and impressions that a person has of a destination" (Crompton, 1979: 18). According to Echtner and Ritchie, (1991) destination image consists of either impressions or perceptions of places. However, Echtner and Ritchie (2003: 43) further define destination image as "not only the perceptions of individual destination attributes but also the holistic impression made by the destination". To attract visitors, competitive destinations need to strengthen their tourism brand through destination image (Qu et al., 2011).

Some studies on destination competitiveness tend to focus attention on destination image (Echtner & Ritchie, 1993; Abreu-Novais et al., 2016; Miličević et al., 2017). Angelkova et al. (2012) posit that images perceived about a destination are a starting point of tourism competitiveness, thus an evaluation of a destination's image gives a true perception of destination competitiveness (Andrades-Caldito et al., 2013). Some studies on destination image revealed a noteworthy decline in tourist arrivals in Africa after the Ebola outbreak (Cahyanto et al., 2016) and China post SARS outbreak (Wen et al., 2005). Needless to say, fear among

travellers during the COVID-19 pandemic led to travel being considered high-risk leading to significant reduction in travel demand (Zheng et al., 2021).

Destination image amidst a crisis

In post crisis recovery, brand image can be restored through government policies, effective positive communication, and new tourism products (after Avraham, 2015). Tourists' perceptions of risk and fear of travel has the potential to highly impact one's choice of destination including their travel behaviour (Kozak et al., 2007). These perceptions are usually shaped by negative information shared on social media about the pandemic (Zenker et al., 2021) including any other broadcasting media sharing varied reactions and uncertainties (Zheng et al., 2021).

It is possible that false information and imagery might deter those who are yet to visit a destination (Chew & Jahari, 2014; Zenker et al., 2019). Resultantly, tourists who are not familiar with a destination are more reliant on external than internal sources of information (Kozak et al., 2007). Tourists find it risky to travel in an unfamiliar environment, however, they have a sense of security in a familiar environment (Lepp & Gibson, 2003) and are likely to have positive travel intentions (Chi et al., 2020).

Perceived risk in whatever form has a negative influence on destination image (Rasoolimanesh et al., 2021). The media spectrum plays a fundamental role in influencing travellers' opinions due to the quality of information broadcasted (Zarezadeh et al., 2018; Marine-Roig & Huertas, 2020). However, past experience with a destination influence choice especially where safety is concerned (Chen & Lin, 2012; Karl et al., 2020). This safety concern significantly shapes travellers' destination images (Rasoolimanesh et al., 2021; Casali et al., 2021).

Brands South Africa and Zimbabwe amidst the crisis

South Africa has a relatively robust destination image (Matiza & Slabbert, 2020). At the dawn of 2018, South Africa had more than 10 million visitors (Rogerson & Rogerson, 2018). However, the media has always associated South Africa with stringent visa requirements, (Traveller24, 2015), political instability and xenophobic attacks (Ferreira & Perks 2016) and crime (Cornelissen & Swart, 2006). At the same time, the country has experienced positive, image enhancing developments for example hosting the World Cup (Avraham & Ketter, 2017). Just like the rest of Africa, South Africa has not been spared the effects of the COVID-19 pandemic that presents the country with a crisis that will likely cripple its tourism sector (Rogerson & Rogerson, 2020). Nonetheless, South Africa's nature-based tourism is projected to be the driver of the sector during the COVID-19 pandemic due to its safety and cleanliness features (Wachyuni & Kusumaningrum, 2020; Musavengane et al., 2020). In the same vein, domestic tourism is also projected to be a beam of hope for the sector (Rogerson & Rogerson, 2021). In the meantime, visitors are inclined towards visiting less popular tourism destinations such as Northern Cape which they perceived to have low infection incidents (Bama & Nyikana, 2021).

In 2011 Zimbabwe rebranded its destination to reflect an image with "a world of wonders" appeal (Ndlovu & Heath, 2013) where people and culture were distinguished as the top wonders (Zimbabwe Tourism, 2021). The Victoria Falls remain the major natural wonder and attraction (Zimbabwe Tourism, 2021). Zimbabwe has however experienced its fair share of negative publicity that was mainly propelled by events such as socio-economic constraints, the land reform program, and restraints on press freedom among other political issues (Avraham & Ketter, 2017). Brand Zimbabwe has also suffered negative publicity from its

source markets resulting in the attenuation of tourist arrivals and revenues (Ndlovu & Heath, 2013; Chigora et al., 2021).

In pursuit of relevance in the tourism sector, Zimbabwe looked east to China in 2013 through an aggressive promotional campaign (Ndlovu & Heath, 2013; Avraham & Ketter, 2017). The COVID-19 pandemic adds brackish to the already ailing brand which is perceived as unsafe and unfriendly by the international market (Chigora et al., 2021). In some instances, the myth prevails that COVID-19 is not an African disease (Murewanhema, 2021), leading to resistance toward or lack in following preventative measures. As such, the increase in infections among African destinations; Zimbabwe and South Africa in particular, exacerbates (Murewanhema, 2021). Despite the negative media coverage (Avraham & Ketter, 2017; Chigora et al., 2021), Zimbabwe is still optimistic as a tourist destination with unique features which include wildlife and nature and exclusive holiday excursion packages (Ndlovu & Heath, 2013).

Methodology

The study employed quantitative methodology and collected data from the population using a structured online questionnaire (cross-sectional). The analyses entailed validation of assumptions through both descriptive and inferential statistics to test the relationships between cognitive and affective brand image, travel risk perceptions and intentions to visit both Zimbabwe and South Africa respectively. Ethical clearance was obtained from the Faculty Ethics Committee (protocol nr EMS174/20) and respondents gave written consent to participate in the anonymous survey.

Sampling and data collection

The study population included leisure tourists above the age of 18 that have been to Zimbabwe and/or South Africa. Convenience sampling in the form of available cases was utilised. Zimbabwe Tourism Authority (ZTA), ZIMPARKS and South African Tourism (SAT) agreed to send the online survey link to previous visitors on their databases. The researcher did not obtain access to the databases to protect the privacy of individuals. Following Malhotra and Dash (2011), an ideal sample size in problem solving research ranges between 200 and 500. The aim was to achieve a large enough sample to undertake the intended inferential data analysis (Leedy & Ormrod, 2015).

Survey instrument

The study used a structured questionnaire hosted on the online platform Qualtrics. Questions included measurements adapted from similar past studies, but also general literature. Refer to Table 1 for an outline of the scale measurement items.

Table 1: Scale measurements

Construct	Questions (codes)	Measurement	Sources
Travel Risk Perceptions (TRP)	TRP1-6	5-point Likert scale (strongly agree / disagree)	Li et al. (2020)
Cognitive Brand Image (CBI)	CB1-11	5-point Likert scale (very poor / excellent)	Adapted from Gretzel et al. (2016)
Behavioural Intentions to visit amid COVID-19 (BIV)	BIV1-4	5-point Likert scale (strongly agree / disagree)	Stylidis et al. (2015)
Affective Brand Image (ABI)	ABI1-8	9-point rating scale (most / least)	Adapted from Gretzel et al. (2016)

Data analysis

Data was analysed using SPSS 26 by way of descriptive and inferential statistics. Exploratory Factor Analysis (EFA) determined dimensionality and validity of the brand image, risk perception and travel intentions scales. Methods applied were Principal Components Analysis extraction and Varimax with Kaiser Normalization rotation (Kline, 2011). Bartlett's test of sphericity (significant at 0.05 or smaller) and the Kaiser-Meyer-Olkin (KMO) measure of sampling adequacy (exceeding 0.6) indicated data suitability (Pallant, 2013).

Factors with Eigenvalues $\geq$ 1 were retained. As a part of the EFA process, construct reliability was also tested using Composite Reliability (CR), with values of CR $\geq$ 0.7 and above being acceptable. Average Variance Explained (AVE) compares the amount of variance captured by a construct to the amount due to measurement error; values above 0.7 are considered excellent, while levels below 0.5 are considered acceptable (Hair et al., 2019). Moreover, factor reliability was also tested using the Cronbach's Alpha with values greater than 0.6 regarded as acceptable (Kline, 2011).

A moderated multiple regression was used to determine whether the relationship between the independent variable (brand image) and dependent variable (future intentions) is influenced by the moderator (risk perception). This technique is the most popular procedure for the identification of moderator effects (Hair et al., 2019).

The Process procedure for SPSS 26 (Hays, 2018) was used to fit the regression model and generate evidence of moderation (interaction effects) as a necessary condition for testing the moderation hypothesis. The moderation hypothesis can only be supported if the interaction coefficient is statistically significant. However, one of the major concerns regarding the analysis of the interactive effects is the presence of multicollinearity, making it difficult to distinguish the direct effects of the independent variable, the moderating variable, and the interactive variable on the dependent variable. To overcome the problem of multicollinearity, all independent variables that constitute the interactive variables were standardised.

Findings

Sample description

A total sample of 250 was achieved of which 124 had visited South Africa and 184 Zimbabwe (58 respondents had visited both countries). Table 2 provides a description of the socio-demographic profile.

Table 2: Description of the sample

Variables	Categories	Value
Average age (years)		41.16
Gender*	Male	63.3
	Female	36.7
Level of education* (n=207)	Primary school	-
	High school	4.8
	Diploma certificate	12.1
	Undergraduate degree	48.8
	Post-graduate degree	34.3
	No schooling	-
Annual household income* (n=202)	Less than 24 999	11.9
	25 000 to 39 999	7.9
	40 000 to 59 999	9.4
	60 000 to 79 999	23.3
	80 000 to 99 999	18.3
	Over 100 000	14.4
	Prefer not to say	14.9

** Values as a %*

Majority of the respondents who participated in the study were males (63.3%) and the average age of the respondents was 41 years. The sample were mostly individuals with a qualification higher education level (48.8%). In terms of annual income, the most significant portion of the respondents acknowledged that they earn an income stream worth between USD 60000 and 80000 (23.3%).

Travel history and travel intentions amidst COVID-19

Respondents were asked a general question relating to the number of times that they had visited destination South Africa and Zimbabwe. Table 3 provides regular travel behaviour and then intentions during the pandemic. The questionnaire asked respondents to indicate their demographic details and international travel behaviour in general, but also to Zimbabwe / South Africa specifically.

Table 3: Visitation history per country

	Categories	**South Africa**	**Zimbabwe**
Average number of times visited		11.97	5.84
Years in which they have visited* (n=197)	<2000	13	24
	2000-2005	13	14
	2006-2010	29	20
	2011-2015	16	40
	2016-current	108	72

** Values as a %*

The trends presented in Table 3, shows the difference in the behaviour of the study sample. Based on the results, people that were part of the Zimbabwe sample had higher frequency of visitation than those in the South African sample and the average visits for the two destination countries were 11.97 times and 5.84 times respectively.

Table 4: Travel patterns and travel during COVID (overall sample)

Category		**%**
Number of people that travel internationally (n=250)		80
Number of overseas trips per year*		3.2 times
Intention to travel during Covid-19 (n=174)	I have already started travelling	9.8
	Yes, soon	33.9
	Yes, in the distant future	31.6
	Not likely	14.4
	Definitely not	6.3
	Other	4.0
Consider Africa a safe leisure travel option in the near future (n=174)	Yes	55.5
	No	20.8
	Not sure	23.7

** Average*

The results presented in Table 4 confers whether they intend to travel internationally during COVID-19 (33.9%) since they consider Africa to be a safe leisure travel option for them (55.5%). While most respondents consider Africa a safe travel option, a handful of the respondents (about 6.3%) concurred that they will definitely not visit South Africa and Zimbabwe during the ongoing COVID-19 pandemic.

Exploratory factor analysis

Risk perceptions scale South Africa and Zimbabwe

Respondents were asked to indicate their level of agreement (1 = strongly disagree; 5 = strongly agree) on a list of items related to risk perceptions. Table 5 provides the EFA results for both

the South Africa and Zimbabwe samples. For the South African sample data, the Kaiser-Meyer-Olkin (0.821) and Bartlett's tests (p=0.000) indicated data suitability for EFA. One factor emerged (Eigenvalues >1), explaining 45.15% of the variance. The Cronbach Alpha (0.84) and CR (0.85) values confirmed factor reliability and the AVE (0.45) indicated discriminant validity. For the Zimbabwe sample data, the Kaiser-Meyer-Olkin (0.876) and Bartlett's tests (p=0.000) also indicated data suitability for EFA. One factor emerged (Eigenvalues >1), explaining 45.55% of the variance. The Cronbach Alpha (0.86) and CR (0.86) values confirmed factor reliability. Thought the AVE values were found to be below 0.5 the very close to 0.5 and seen along with the Cronbach Alpha and CR values the factors were accepted.

In the South African context, three risk perception items scored highest: "I am concerned about the possibility of contracting the virus if I travel to South Africa" (m=3.53), "coming into contact with strangers during the COVID-19 pandemic will frustrate my travel experience" (m=3.47), and "I am most likely to spend too much time observing COVID-19 related protocols and miss out on scheduled leisure activities" (m=3.35). Lowest score was for the cognitive item: "I doubt whether the quality of accommodation facilities in South Africa's tourist attractions is in accordance with the World Health Organisation COVID-19 protocol" (m=2.09).

Table 5: EFA: risk perceptions of South Africa and Zimbabwe

	South Africa*			**Zimbabwe****		
	Mean	Std. Dev	**Factor** ***Risk perceptions SA (RiskSA)***	Mean	Std. Dev	**Factor** ***Risk perceptions Zim (RiskZim)***
I feel that coming into contact with strangers during the COVID-19 pandemic will frustrate my travel experience due to fear of contracting the virus	3.47	1.226	**0.823**	3.40	1.112	**0.667**
Given the challenges brought forth by COVID-19, I am concerned about the possibility of contracting the virus if I travel to South Africa	3.53	1.338	**0.855**	3.34	1.120	**0.776**
I fear losing approval and respect from family and friends if I decide to travel to South Africa during the COVID-19 outbreak	2.51	1.241	**0.501**	2.86	1.277	**0.613**
If I travel to destination South Africa during COVID-19 pandemic, I am most likely to spend too much time observing COVID-19 related protocols and miss out on scheduled leisure activities	3.35	1.275	**0.517**	3.21	1.048	**0.574**
Given the media coverage of destination South Africa, I feel that the destination is a health risk concerning COVID-19	3.28	1.278	**0.737**	3.23	1.111	**0.802**
I feel that destination South Africa's tourist attractions are often crowded and therefore I risk contracting COVID-19 if I travel to the country	3.04	1.195	**0.618**	3.09	1.090	**0.683**
I doubt whether the quality of accommodation facilities in South Africa's tourist attractions is in accordance with the World Health Organisation COVID-19 protocol	2.09	1.040	**0.553**	3.20	1.073	**0.629**
Cronbach Alpha	0.842			0.855		
Composite reliability	0.847			0.857		
Average variance extracted	0.451			0.465		

Extraction Method: Principal Axis Factoring. Rotation Method: Promax with Kaiser Normalization.[a] a. Rotation converged in 3 iterations (SA) and 5 iterations (Zim)
*n=57 **n=165

For Zimbabwe, the study results indicated that two of the three risk perception items which scored highest were similar to those observed in the South African context and were as follows: "coming into contact with strangers during the COVID-19 pandemic will frustrate my travel experience" (m=3.40) and "I am concerned about the possibility of contracting the virus if I

travel to Zimbabwe" (m=3.34). The notion that "Given the media coverage of destination Zimbabwe, I feel that the destination is a health risk concerning COVID-19" (m=3.23) was the third highest scoring risk perception item. Lowest score was for the cognitive item: "I fear losing approval and respect from family and friends if I decide to travel to South Africa during the COVID-19 outbreak" (m=2.86).

Affective image scales for South Africa and Zimbabwe

Respondents were asked to indicate their level of agreement (1 = strongly disagree; 5 = strongly agree) on a list of items related to risk perceptions. Table 6 provides the EFA results for both the South African and Zimbabwean samples. For the South African sample, the Kaiser-Meyer-Olkin (0.87) and Bartlett's tests (p=0.00) indicated data suitability for EFA. One factor emerged, explaining 49.90% of the variance and was labelled as *AffSA*. The Cronbach Alpha value (0.89) and the CR (0.90) confirmed factor reliability. The AVE value (0.50) was also acceptable.

For the Zimbabwean sample scale, the Kaiser-Meyer-Olkin (0.88) and Bartlett's tests (p=0.000) indicated data suitability for EFA. Two factors emerged (Eigenvalues >1) namely *Affective Image Zim 1 (AffZim1)* and *Affective Image Zim 2 (AffZim2)*. For *AffZim1*, the Cronbach Alpha values (0.84) and CR (0.83) confirmed factor reliability while the AVE (0.50) value confirmed validity. For *AffZim2*, the Cronbach Alpha values (0.86) and CR (0.86) also confirmed factor reliability and the AVE (0.60) confirmed validity.

Respondents perceived destination South Africa to especially (top three) be interesting (m=8.08), entertaining (m=7.70), and pleasant. Overall, the mean scores for Zimbabwe were a bit lower than that of South Africa. Like South Africa, respondents perceived the country to especially (top three) be interesting (m=6.70), followed by authentic (m=6.54) and entertaining (m=6.46).

Table 6: EFA: Affective image of South Africa and Zimbabwe

	South Africa*			**Zimbabwe****			
	Mean	Std. Dev	**Factor**	Mean	Std. Dev	**New Factor 1**	**New Factor 2**
			Affective Image SA (AffSA)			***Affective Image Zim 1 (AffZim1)***	***Affective Image Zim 2 (AffZim2)***
Distressing – Relaxing	7.18	1.599	0.773	6.18	2.001	0.684	
Unpleasant – Pleasant	7.60	1.565	0.821	6.36	2.040		0.675
Boring – Entertaining	7.70	1.533	0.683	6.46	2.048		0.662
Reserved - Innovative	6.61	1.762	0.653	5.75	2.032	0.533	
Undeveloped - Progressive	6.73	1.657	0.674	5.47	2.065	0.874	
Unsafe – Safe	6.06	2.041	0.656	6.00	2.107	0.711	
Uninteresting - Interesting	8.08	1.350	0.743	6.70	1.840		0.972
Artificial - Authentic	7.24	1.865	0.564	6.54	2.002		0.754
Inaccessible - Accessible	7.28	1.692	0.756	6.00	1.902	0.700	
Cronbach Alpha	0.892					0.844	0.862
Composite reliability	0.899					0.831	0.855
Average variance extracted	0.499					0.502	0.602

Extraction Method: Principal Axis Factoring. Rotation Method: Promax with Kaiser Normalization. a. Rotation converged in 5 iterations (SA) and 3 iterations (Zim)
*n=93 **n=142

Cognitive image scales for South Africa and Zimbabwe

Respondents were asked to rate the quality of South Africa's tourism offering, based on a 5-point Likert scale (1 = very poor, 5 = excellent). Table 7 provides the EFA results for both the

South African and Zimbabwean samples. For the South African sample data, The Kaiser-Meyer-Olkin (0.788) and Bartlett's tests (p=0.000) indicated data suitability for EFA. Two factors emerged explaining 40.37% of the variance. In the South African context, the Cronbach Alpha values for *Cognitive Image SA 1 (Cogfin1S)* (0.72) and *Cognitive Image SA 2 (Cogfin2S)* (0.82) as well as CR values for *Cogfin1S* (0.83) and *Cogfin2S* (0.75) confirmed factor reliability. Thought the AVE values were found to be below 0.5, seen along with the Cronbach Alpha and CR values the factors were accepted.

Table 7: EFA: Cognitive image of South Africa and Zimbabwe

	South Africa				**Zimbabwe**			
	Mean	Std. Dev	**Factor 1**	**Factor 2**	Mean	Std. Dev	**Factor 1**	**Factor 2**
			Cognitive Image SA 1 (Cogfin1S)	***Cognitive Image SA 1 (Cogfin1S)***			***Cognitive Image Zim 1 (Cogzim1)***	***Cognitive Image Zim 2 (Cogzim2)***
Scenery and landscape	4.67	0.609		0.785	4.01	0.941	0.756	
Natural attractions (e.g., animals, parks, beaches)	4.62	0.655		0.760	3.89	0.974	0.826	
Climate	4.36	0.563		0.419	3.78	0.929	0.714	
Hospitality of the locals	4.11	0.818		0.514	3.74	1.016	0.553	
Nightlife	3.49	0.861	0.743		3.14	0.908		0.538
Cuisine	4.19	0.762			3.52	0.882		
Shopping facilities	4.17	0.709	0.704		3.20	0.930		0.562
Accommodation facilities	4.28	0.595			3.48	0.843		
Personal safety	3.16	0.960			3.37	0.903		
Available tourist activities	4.29	0.698		0.550	3.65	0.993	0.656	
General infrastructure (e.g. water, electricity, sanitation)	3.84	0.915	0.729		3.12	1.039		0.765
Transportation infrastructure	3.64	1.020	0.660		3.05	0.978		0.670
Man-made attractions (e.g., museums)	3.97	0.750	0.491		3.33	0.940		0.602
Services (e.g., banking, medical) (14)	3.92	0.781	0.652		3.07	0.949		0.483
Cronbach Alpha			0.720	0.816			0.812	0.773
Composite reliability			0.827	0.750			0.831	0.777
Average variance extracted			0.447	0.387			0.500	0.373
Extraction Method: Principal Axis Factoring. Rotation Method: Promax with Kaiser Normalization. a. Rotation converged in 3 iterations (SA) and 3 iterations (Zim) *n=95 **n=149								

For the Zimbabwean sample scale, the Kaiser-Meyer-Olkin (0.832) and Bartlett's tests (p=0.000) indicated data suitability for EFA. The Eigenvalue showed that two factors emerged (Eigenvalues >1) namely, *Cognitive Image Zim 1 (Cogzim1)* and *Cognitive Image Zim 2 (Cogzim2)*, explaining a cumulative 40.52% of the variance. The Cronbach Alpha values for *Cogzim1* (0.81) and *Cogzim2* (0.77) as well as the CR values for *Cogzim1* (0.83) and *Cogzim2*

(0.78) indicated factor reliability. The AVE values for both factors 1 (0.5) and 2 (0.37) also confirmed validity. For both the South African and Zimbabwean cognitive image factors, cuisine, accommodation, and personal safety did not load sufficiently on any of the two factors and these items were excluded from further analysis.

Revisit intentions of South Africa and Zimbabwe

Respondents were asked to rate the quality of South Africa's tourism offering (1 = strongly disagree; 5 = strongly agree) on a list of items related to risk perceptions. Table 8 provides the EFA results for both the South African and Zimbabwean samples. For the South African sample data, The Kaiser-Meyer-Olkin (0.765) and Bartlett's tests (p=0.000) indicated data suitability for EFA. One factor emerged (Eigenvalues >1), explaining 60.94% of the variance and was labelled *VISA*. The Cronbach Alpha (0.83) and CR (0.86) values confirmed factor reliability and the AVE (0.61) indicated validity. For the Zimbabwean sample scale, the Kaiser-Meyer-Olkin (0.800) and Bartlett's tests (p=0.000) indicated data suitability for EFA. One factor emerged (Eigenvalues >1), explaining 51.47% of the variance and was labelled *VIZIM*. The Cronbach Alpha (0.81) and CR (0.81) values confirmed factor reliability and the AVE (0.51) indicated validity.

Table 8. EFA: Visit intentions of South Africa and Zimbabwe

	South Africa			**Zimbabwe**		
	Mean	Std. Dev	**Factor** ***Visit Intentions SA VISA***	Mean	Std. Dev	**Factor** ***Visit Intentions Zim VIZIM***
I have a strong intention to revisit South Africa on my next trip (1)	4.06	1.099	0.639	3.50	1.173	0.706
I have a strong intention to revisit South Africa in the distant future (2)	4.42	0.723	0.702	3.78	1.056	0.788
I would say positive things about South Africa to other people (3)	4.42	0.693	0.810	3.84	0.987	0.677
I would recommend that someone visits South Africa (4)	4.53	0.697	0.938	3.84	0.967	0.694
Cronbach Alpha	0.827					0.806
Composite reliability	0.859					0.809
Average variance extracted	0.609					0.515
Extraction Method: *Principal Axis Factoring. Rotation Method: Promax with Kaiser Normalization. Rotation converged in 10 iterations (SA) and 7 iterations (Zim)* *n=95 **n=154						

Regression analysis

To test the hypothesis that brand image affects behavioural intentions to visit, and more specifically whether travel risk perceptions moderate the relationship between brand image and behavioural intention to visit, a set of moderated multiple regression analyses were conducted. This section presents the results of those relationships that did show evidence of moderation and included one factor in the case of South Africa and three factors in the case of Zimbabwe. In the case of South Africa, risk perception *(RiskSA)* only moderated the relationship between *Cognitive Image SA 1 (Cogfin1S)* and visit intentions. Referring to Figure 4, *Cogfin1S* was positively related to visit intentions, and *RiskSA* significantly moderated the effect of *Cogfin1S*. The overall model was statistically significant, R^2 =0.353, F (3, 40) =7.276, $p < 0.001$. The standardized slope for the effect of *RiskSA* was significant ($p < 0.001$) when risk was one standard deviation below the mean (β = 1.1247), at the mean (β = 0.468), but not at one standard deviation above the mean (β = -0.397). As the level of *RiskSA* increased, the strength of the

relationship between *Cogfin1S* and intention decreased. In other words, the higher the risk, the less effective cognitive image is to sustain travel intentions to destinations in South Africa.

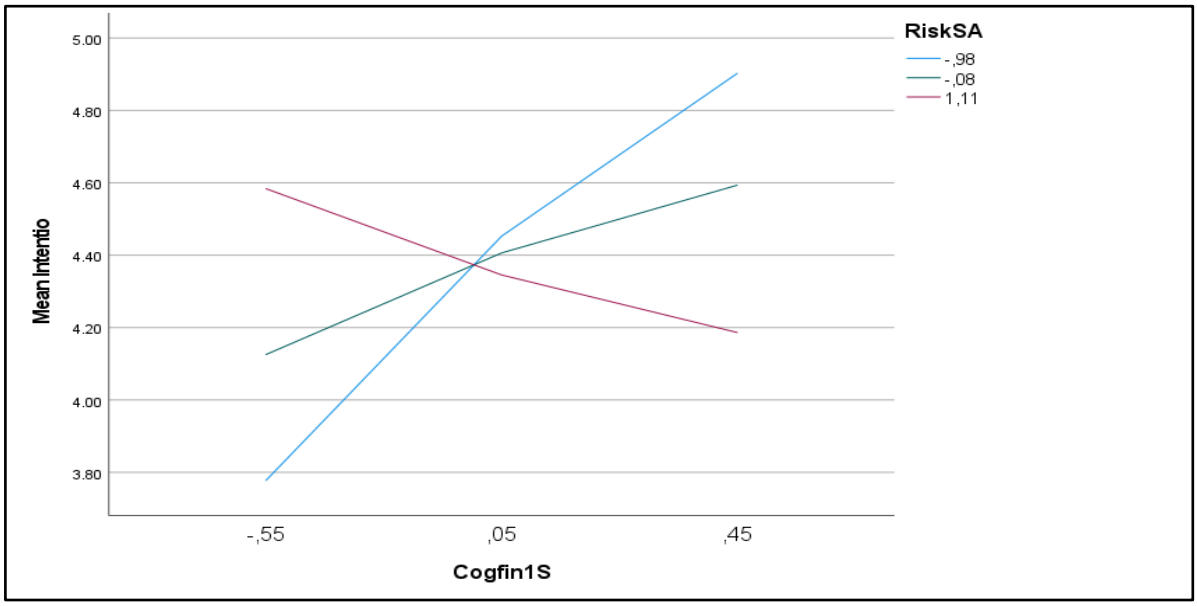

Figure 4: Cognitive brand image and risk perceptions of SA

Referring to Figure 5, *Affective Image Zim 1 (Affzim1)* was positively related to visit intentions, and risk perceptions *(RiskZim)* moderated the relationship between *Affzim1*and visit intentions. The overall model was statistically significant, R^2 =0.3700, F (3, 138) =27.0216, p < 0.001. The standardized slope for the effect of *RiskZim* was significant (p < .001) when risk was one standard deviation below the mean (β = 0.3244), at the mean (β = 0.2525), and at one standard deviation above the mean (β =0.2223). As shown in Figure 2, as the level of perceived risk about Zimbabwe increased, the strength of the relationship between *Affzim1* and visit intentions decreased. In other words, the higher the risk, the less effective this dimension of affective destination image is to sustain travel intentions to destinations in Zimbabwe.

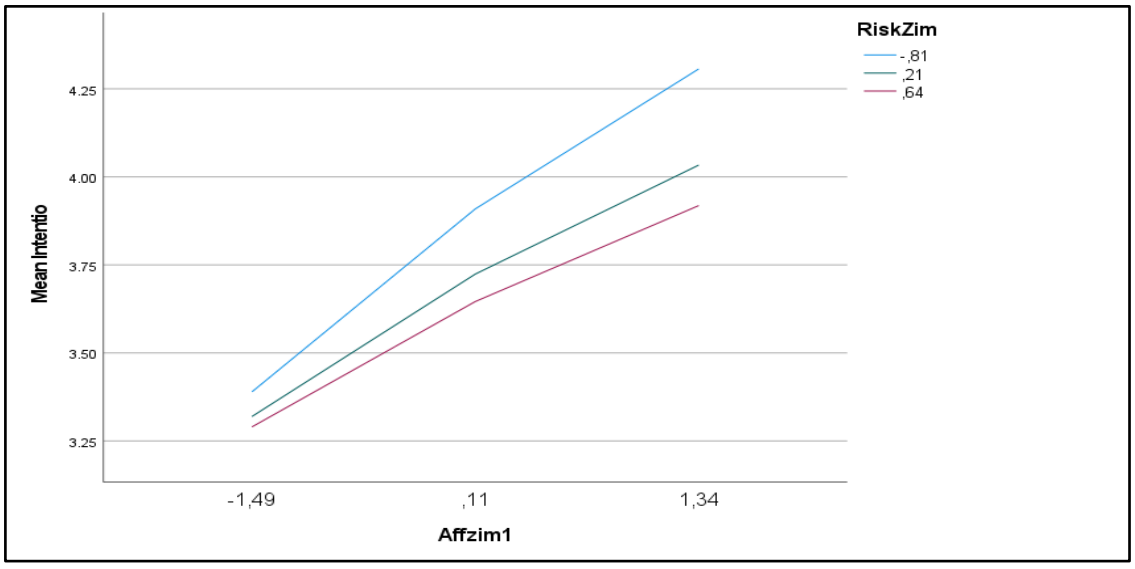

Figure 5: Affective image 1 and risk perceptions of Zimbabwe

Referring to Figure 6, *Affective Image Zim 2 (Affzim2)* was positively related to visit intentions, and risk *(RiskZim)* moderated the relationship between *Affzim2* and visit intentions. The overall model was statistically significant, R^2 =0.4575, $F(3, 140)$ =39.3547, $p < 0.001$. The standardized slope for the effect of *RiskZim* was significant ($p < 0.001$) when risk was one standard deviation below the mean (β =0.4013), at the mean (β = 0.2443), and at one standard deviation above the mean (β =0.1880). As shown in Figure 5, as the level of *RiskZim* increased, the strength of the relationship between *Affzim2* and visit intentions decreased. As was seen in the case of the first affective image factor of Zimbabwe this factor also loses effectiveness to sustain travel intentions to Zimbabwe given risk perceptions.

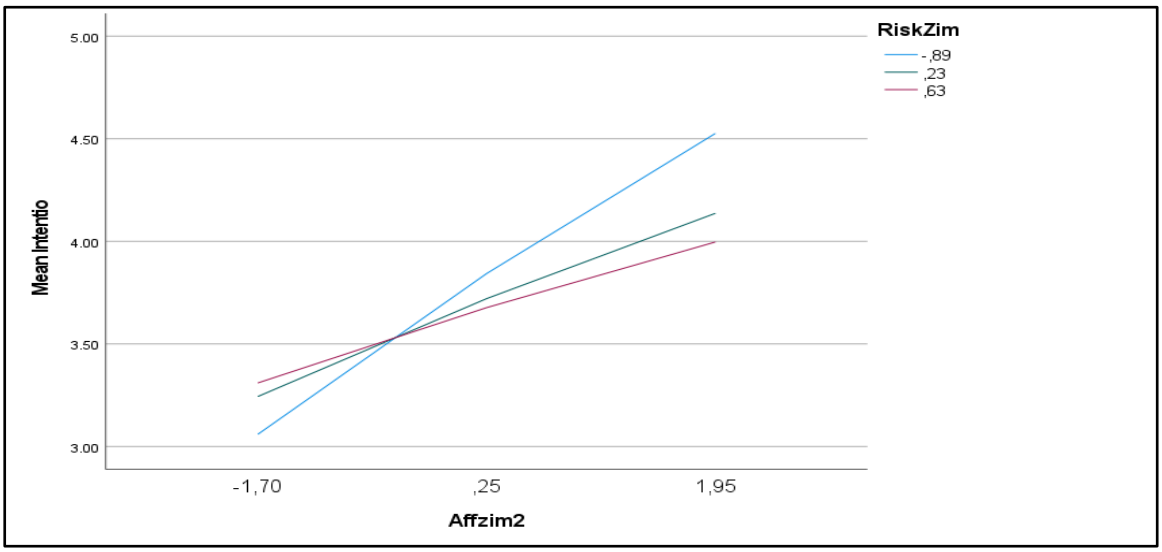

Figure 6: Affective image 2 and risk perceptions of Zimbabwe

Referring to Figure 7, *Cognitive Image Zim 1 (Cogzim1)* was positively related to visit intention, and risk perceptions *(RiskZim)* moderated the relationship between *Cogzim1* and visit intentions.

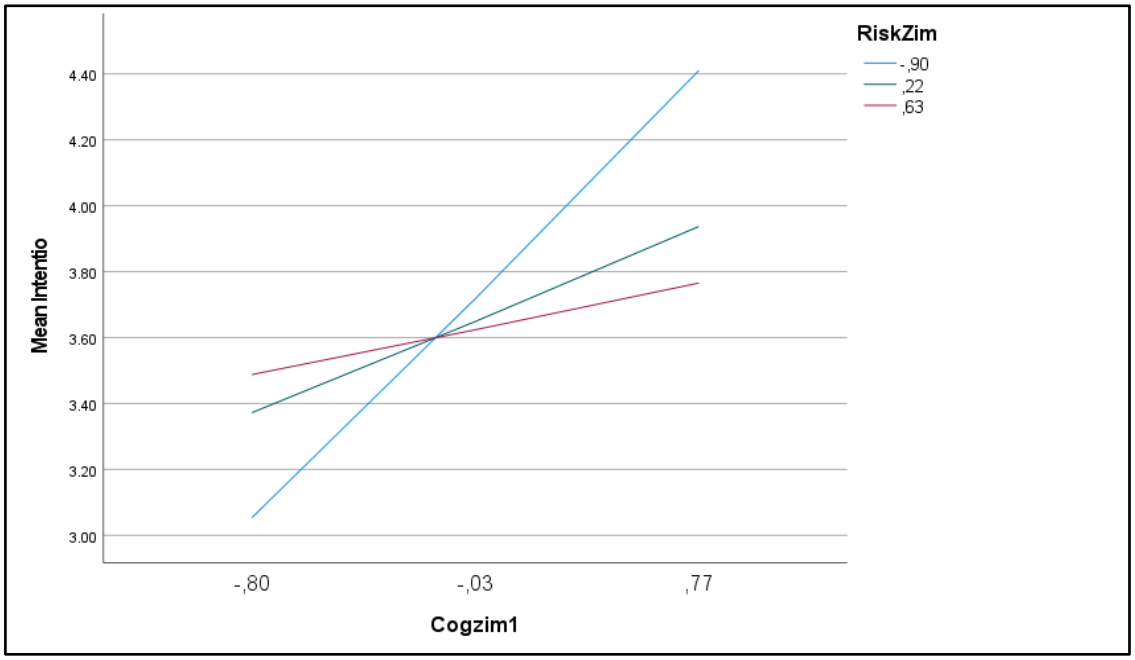

Figure 7: Cognitive image 1 and risk perceptions of Zimbabwe

The overall model was statistically significant, R^2 =.0877, $F(1, 146)$ =19.4097, $p < 0.001$. The standardized slope for the effect of *RiskZim* was significant ($p < 0.001$) when risk was one standard deviation below the mean (β =0.8638), at the mean (β = 0.3595), and at one standard deviation above the mean (β =0.1768). As shown in Figure 4, as the level of risk perceptions increased, the strength of the relationship between *Cogzim1* and visit intention decreased. Like the case of the two affective image factors, this cognitive image factor loses effectiveness to sustain travel intentions to Zimbabwe given risk perceptions.

Discussion

This study firstly described the travel intentions and COVID-related perceptions of international travellers to Zimbabwe and South Africa given that the demand for tourism is expected to be attenuated by the level of a traveller's perceived risk during a pandemic (Kim et al., 2021). Travellers are more hesitant to travel during the COVID 19 pandemic due to fear of encountering strangers as well as the possibility of contracting the virus. Results of this study firstly indicated that, before the inclusion of risk, all the brand image factors had significant positive influences on tourists' behavioural intentions to visit both South Africa and Zimbabwe. These results corroborate previous studies that cognitive evaluations because of one's beliefs (e.g., Tapia et al., 2019) and affective evaluations based on feelings (e.g., Zenker et al., 2021 & Tapia et al., 2019) positively influence travellers' intentions to visit a travel destination. Moderated multiple regression models then tested whether the relationships between brand image factors and travel intentions remained positive given level of travel risk perceptions. Results indicated that some of the image factors that emerged from the EFAs were affected (moderated) by risk negatively (weakened the relationship). The results connote that the existing brand perceptions (even though they may be positive) of cognitive attributes such as quality of local infrastructure and personal safety, were not strong enough to keep the intentions positive given the extent of risk perceptions. Neuburger (2021) and Musavengane et al. (2020) similarly established that cognitive image loses power to encourage intentions if risk is involved.

In the case of SA, an increase in risk perceptions countered the existing positive relationship between cognitive image (as measured by *Cogfin1S*) and visit intentions. However, the other one cognitive as well as one affective dimension were seemingly 'strong enough' to withstand the effect when risk perceptions are added. As seen from the descriptive statistics, the sample profile included people that have predominantly visited these countries on repeat occasions. This would imply that they already have a history and experience which could impact positively on brand image (Yang et al., 2021). Experience, tourists' knowledge, and information can potentially lead to greater certainty and hence, positively affect destination image even during a crisis (Chi et al., 2020).

In the Zimbabwean context, the moderating effect of travel risk perception was more profound for instance, as the level of perceived risk increased, the strength of the relationship between both Affective Image factors decreased. Furthermore, as the perceived risk increased, the strength of the relationship between one cognitive image factor (as measured by *Cogzim1)* and visit intention also decreased. Given that the respondents who participated during the study have on average visited destination Zimbabwe (5.84 times) fewer times than they have visited destination South Africa (11.97 times), results confirm that misleading information and imagery can particularly influence those who have not visited a destination before and relying more on external information sources (Zenker et al., 2019). Findings also corroborate that of Ndlovu and Heath (2013) and Chigora et al. (2021) who established that Zimbabwe as a brand has suffered negative publicity from its source markets and that the COVID-19 pandemic has

further weakened the already ailing brand which is perceived as unsafe and unfriendly by the international market (Chigora et al., 2021).

Overall, the results of this study indicate that COVID-19 related travel risk perceptions have the potential to negatively affect existing positive relationships between a country's cognitive as well as affective brand image dimensions and behavioural intentions. Perceived risk is subjective and entails anticipation of a loss; influencing consumer behavioural intentions to visit a travel destination at a given point in time (Chang & Chen, 2014). Tourists' risk perceptions of a destination increasingly affect travel intentions at uncertain times such as the COVID-19 pandemic (Hassan & Soliman, 2021) who established that perceived risk in whatever form has an influence on destination image and the underlying intention to visit that destination.

Conclusion

This study sought to investigate the relationships between brand image, travellers' risk perceptions and behavioural intentions to visit African destinations amidst Covid-19 using cases of South Africa and Zimbabwe as travel destination. The results of the study attest to previous literature that travel risk perceptions are country specific. Even if countries come from the same region, the regional brand may not strengthen the case for individual destinations within the region. For instance, South Africa's image components as a travel destination were found to be stronger than Zimbabwe in the face of the pandemic. This resilience may be due to positive word of mouth and information posted on social media platforms which most of the potential travellers. Findings suggested that this may also relate to frequency of visit, which increases destination familiarity, and this can in turn mitigate some of the negative risk perceptions. Even though both cognitive and affective brand images have their fair share of influencing travel behaviour, their ultimate impact on behavioural intentions to visit a destination is moderated by travellers' perceptions about the possible risks associated with visiting the destination.

The current study has its fair share of limitations. First and foremost, the non-probability sampling used in the study means that the findings cannot be generalised to a broader population, and this opens avenues for future research where a sample can be drawn from a more diverse set of case study countries. The study was also limited in the context of time, financial constraints, and ongoing COVID-19 pandemic, leading to a small sample size. For future research an international sample could be drawn to compare findings and the applicability of the cognitive and affective brand image scales in developing versus developed countries.

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