



Article The Bridge at the End of the World: Linking Expat's Pandemic Fatigue, Travel FOMO, Destination Crisis Marketing, and Vaxication for "Greatest of All Trips"

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Abstract: The rebirth of global tourism with a massive rebound is anticipated due to an emerging touristic behavior coined as vaxication (i.e., post-vaccination travel). Despite the ongoing fatigue triggered by the COVID-19 pandemic, travelers' fear of missing out (FOMO), and destination crisis marketing (DCM) can further accelerate travelers' momentum towards vaxication. To address this critical knowledge gap in COVID-19 tourism, the present study aimed to examine the effect of pandemic fatigue on vaxication intention for the greatest of all trips (GOAT) under the moderating influence of travel FOMO and destination crisis marketing. Drawing on data of international expatriates in the United Arab Emirates (N = 356) and using covariance-based structural equation modeling with Mplus, the findings provide new evidence supporting a positive impact of international expat's pandemic fatigue on vaxication intention for GOAT. Interestingly, this relationship is significantly reinforced by the international expat's travel FOMO as well as tourism destinations switching gears from 'managing crisis' to 'marketing crisis'. Based on prominent theories (i.e., theory of planned behavior, cognitive load theory, and protection motivation theory) and newly developed scales (i.e., travel FOMO and destination crisis marketing), the study implications are directed towards an outpacing trajectory of global tourism return prompted by pandemic fatigue, travel FOMO, destination crisis marketing, and vaxication intention for the greatest of all trips.

Keywords: pandemic fatigue; travelers' fear of missing out (FOMO); destination crisis marketing; post-COVID-19 tourism; vaxication intention; greatest of all trips (GOAT); international expats; theory of planned behavior; cognitive load theory; protection motivation theory

1. Introduction

The growing travel optimism (e.g., travelers' belief that the worst of the pandemic is behind us) may still be premature, owing to the existent gap between travelers' expectations and the host destinations' restricted realities [1,2]. Reckless crisis marketing by destinations could create an inevitable risk even for the vaccinated travelers (including those who received their third/booster dose), as they might not be fully immune to the latest twist in the COVID-19 outbreaks (e.g., surge of omicron among the fully vaccinated) [3,4]. Despite the uncontrolled and chaotic outbreak of new COVID-19 variants (e.g., delta and omicron), the desire to travel remains significant across the globe [1–3]. The global tourism in the



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Copyright: © 2022 by the authors. Licensee MDPI, Basel, Switzerland. This article is an open access article distributed under the terms and conditions of the Creative Commons Attribution (CC BY) license (https:// creativecommons.org/licenses/by/ 4.0/). midst of the pandemic mirrored a USD 4.5 trillion loss in tourism revenues, including a massive decline of 74 percent in international arrivals, an unconditional halt on mass gatherings (e.g., festivals, music concerts, and sporting events), closure of public facilities (e.g., gyms and museums), and restrained leisure activities (e.g., highly restrictive travel and tourism) [1–4]. The induction of COVID-19 restrictions and forced lockdowns made the situation worse for everyone posing severe threats to psychological and cognitive health [2]. Among various types of psychological distress, pandemic fatigue is one of the alarming consequences triggered by the prolonged COVID-19 pandemic. The constant fear of being infected, the continuous press and public discussions about COVID-19, the uncertain and evolving circumstances, and last but not least, forced lockdowns for an unknown period caused emotional exhaustion and mental fatigue across the globe [3]. The antecedents and outcomes of the COVID-19 pandemic fatigue have been recently explored [4–6]. Travel and tourism (being a constitutive force in everyday life) offer an escape from daily routine to refresh the mental state and uplift the subconscious morale [7]. However, travel closure has left emotionally exhausted and fatigued individuals with no obvious choices to escape the lockdowns and restrictions of the pandemic. As soon as the COVID-19 vaccines became a reality (e.g., the arrival of Pfizer, AstraZeneca, and Moderna vaccines), the idea of relaxing travel restrictions (subject to COVID-19 vaccination) became more viable [8,9], hence signaling a beacon of hope to kickstart global travel.

Fully vaccinated travelers are expected to face lesser barriers (e.g., facilitated and/or smooth entry at host destinations) as compared to unvaccinated (or partially vaccinated) travelers, who are obligated to undergo mandatory quarantines and have a negative PCR COVID-19 test [8–10]. These explicit conditions gave birth to a new phenomenon of "vaxication" ("vaxi-" from "vaccination" and "-cation" from "vacation") [9,10]. Vaxication (referred to as the first vacation after vaccination) also commemorates special offers and incentives from tourism destinations to fully vaccinated travelers [9]. Consequently, individuals experiencing pandemic fatigue are incited to get fully vaccinated to resurrect their long-awaited travel. The emerging vaxication trend in response to the pandemic fatigue indicates a possible connection between the two tenets of tourism under (and after) COVID-19 [3,9]. Travel planners are stimulated to deploy crisis marketing campaigns using vaccine and vacation advertising bundles to encourage immunization among wishful travelers [10,11].

The COVID-19 pandemic has not reached its endgame yet, whereas the global vaxication drive is still on the move. Hence, the influential role (and repercussions) of touristic behaviors toward vaxication requires immediate scholarly attention [9]. Vaxication has emerged as a promising touristic behavior with the ability to resurrect global tourism by ensuring the required healthcare and protective measures (e.g., vaccine passports) to visit a preferred destination [12,13]. However, the concept of vaxication remains largely ignored and under-investigated in the COVID tourism and consumer behavior research [9]. The underlying relationship between pandemic fatigue and vaxication intention could possibly be influenced by multiple cognitive states and real-world iterations as a consequence of the various phases (and conditions) of the COVID-19 pandemic [4]. Relating to the cognitive phenomenon, travelers' fear of missing out (FOMO) is a psychological state of anxiety and over-concern of missing out on the chance of traveling to a favorable destination [14]. FOMO has been explored in different domains of consumer behavior (e.g., educational activities and sporting events) [15–20]; however, the role of travel FOMO within the discrete and complex choices of tourism products and services remains largely unknown. In order to experience vaxication, travelers experiencing FOMO might be more willing to get vaccinated, as they are overly concerned with missing out on a travel opportunity just because of non-vaccination [21].

Similarly, destination crisis marketing can mobilize travelers towards vaxication intention while they find ways to overcome their pandemic fatigue [4,11]. Destination crisis marketing refers to a set of communications aligned with the travelers' unwavering expectations about destinations (e.g., authenticity, transparency, empathy, humility, creativity, and optimism) during a crisis (e.g., COVID-19 pandemic) [11]. By enduring crisis marketing strategies, tourism destinations can generate high appeal among travelers for their first trip after vaccination [11,22]. Alternatively, ignorance of destination crisis marketing can impose a lack of destination visibility and preparedness for hosting a safe tourism experience [23]. Consequently, travelers in search of vaxication for the greatest of all trips (i.e., first mega trip after vaccination) are inclined to cancel their plans for a destination that seems insensitive and/or irresponsible in dealing with the pandemic crisis. The travel presence and perspectives of international expatriates play an influential role in the development and restoration of global tourism. The international expats' community serves as a critical foundation in reframing destinations as worldwide centers of tourism attractiveness [24,25]. Moreover, expats are regarded as trustworthy information hubs, as they become vital collaborators in destination marketing initiatives across the globe [4,26]. The significance of international expats' is particularly heightened in developing nations, which are frequently exposed to socio-political unrest and violent conflicts [27,28]. Given the growing importance of expats in branding nations as safe, popular, and attractive destinations for tourism [4,26], the present study aimed to unfold the effect of expats' pandemic fatigue on their vaxication intention for the greatest of all trips (GOAT), under the moderating influence of travel FOMO and destination crisis marketing.

2. Theoretical Background and Hypotheses Development

2.1. International Expat's Pandemic Fatigue

To assess the repercussions of the COVID-19 outbreak, a lot of focus has been put into its health and psychological effects on the thinking, decisions, and actions of individuals undergoing the pandemic's adverse experiences [4]. Pandemic fatigue is one of the most notable and persistent impacts of COVID restrictions, regulations, and lockdowns on human psychology. The World Health Organization described it as a set of rational and predictable behaviors of humans in response to long-term, unsettled disasters and crises [4,29]. It is a psychological state of extensively feeling isolated, tense, and demotivated that develops over time as a result of a variety of circumstances, notably drastic changes in personal experiences, surrounding and environment, community interactions, and social systems. Pandemic fatigue has been studied in different contexts and focus groups. MacIntyre et al. [30] studied the induction and intensity of this psychological phenomenon in different age groups. The authors concluded that young individuals are more likely to experience pandemic fatigue due to decreased opportunities for socializing and traveling. Focusing on the expat community, Zaman et al. [4] investigated the effects of pandemic fatigue (PF) in the travel and tourism context, where PF was found to stimulate revenge travel behavior among the expat community. Speaking of expats, their role as a strategic partner and vital stakeholder for tourism marketing has been well recognized, especially due to their deeper and superior knowledge about destinations [4,26].

In contrast to occasional travelers who likely suffer from stereotypes and first-time expressions, expats can be deemed as long-term tourists who have literally built their lives in a foreign land, therefore being immersed in the local culture and traditions. In essence, expats are always reliable sources of information for their fellow homeland citizens as well as for international travelers, especially when destinations go through major crises, such as the COVID-19 global pandemic [4,26]. As previously said, PF affects people's state of mind and psychological wellbeing, leading to behavioral acclimatization in order to adjust to the "new reality". As a result, the pandemic has resulted in long-term changes in consumer purchasing habits, consumer preferences, and business strategies [31]. Consumers have evolved various behaviors to govern their sentiments and well-being caused by apparent uncertainty and protracted lockdowns. For example, most customers are aware of emerging e-commerce platforms, have switched from their once famous supermarkets, and have adopted alternate consumption behaviors and platforms [32,33]. PF has caused economic and social instability in the tourism sector. People perceive travel as an escape from everyday routines and the psychological load of the epidemic during continuous

lockdowns [34]. As a result of the epidemic, many individuals have adjusted their travel plans, flocking to remote and rural regions to avoid the virus and enjoy time in the natural world [35]. With the urge to escape from this captivity, people are inclined to make such bold decisions that were unlikely to be considered in normal conditions. For example, some people may hesitate to take vaccination for COVID-19, but due to its imperative status for traveling, they are likely to pursue it [9]. Pandemic fatigue can be best explained from the lens of cognitive load theory (CLT) by Sweller [36]. The theory provides a fundamental paradigm for comprehending how the outbreak may be affecting people's psychological performance in many ways. The COVID-19 pandemic has also introduced new modes of performing routine tasks, which require additional information and resources, thus adding to the overall stress level. Secondly, the dynamic and uncertain conditions distracting from daily life add to the extraneous cognitive load [34–36].

2.2. Vaxication Intention for "Greatest of All Trips"

The travel trend report recently released by Expedia highlighted a dominant touristic mindset that seeks the "greatest of all trips" (referred to as GOAT) involving unique tourism aspirations, including (1) scrapping the schedule, (2) splurge-cation, (3) immersive discovery, (4) sensation seeking, and (5) unfiltered enjoyment [37]. In addition, a new concept ("vaxication") has also emerged in the midst of the COVID-19 pandemic by blending two desirable practices—vaccination and vacation. Vaxication intention refers to an individual's desire to go on a vacation after being fully vaccinated for COVID-19 [9]. As vaccination is more of a necessity than a choice for vacation travel, the surge in the trend of vaxication is an indicator of a much-needed boost in reviving the travel and tourism industry [4,9].

In the seemingly post-acceleration phase of COVID-19, when the pandemic spread is either in the stationary or decline phase, the lockdowns and regulations are becoming relaxed gradually. Additionally, owing to the advent of multiple immunization options (e.g., types of COVID-19 vaccines), the situation has been eased out to some extent; therefore, everyday life is expected to return to normalcy [4,9]. The general practices of social freedom, tourism, and traveling are also anticipated to rejuvenate as soon as the majority of the global population is immunized against COVID-19. Hence, immunity from COVID-19 is becoming a mandatory status for multiple social activities and, more specifically, tourism activities such as traveling from one country to another, vacation traveling, and even inter-city/state traveling in some countries [9]. In the case of global tourism, although vaccination for COVID-19 has been regulated as a requirement, it is regarded more as a social need than legal binding [10].

Being a newly emerging concept, vaxication has yet to be extensively examined in post-COVID tourism research. Zaman et al. [9] empirically validated that COVID-19 branded destination safety (CBDS) boosts vaxication intention while travel shaming and travel incentives act as significant moderators of the relationship. Theoretically, vaxication intention can be explained by some of the prominent theories related to psychology, human behavior, and healthcare. The theory of planned behaviors [38] provides a justification for the health and well-being concerns of travelers dictating their decision of pre-travel vaccination (vaxication) and choice of safer/COVID-free destination [39]. Similarly, the protection motivation theory [40] also provides theoretical reinforcement to the concept of vaxication. The theory proposes that the two factors, i.e., an apparent threat (i.e., COVID-19 exposure) and a possible enduring measure (i.e., vaccination), are the direct influencers of people's decision-making process when facing protection and safety concerns (i.e., when planning for tours or vacations). Wang et al. [41] also highlighted the healthrelated choices of travelers under the influence of the protection motivation theory. An individual's vaxication drive can be better explained through the theoretical lens of planned behavior [42]. The theory of planned behavior defines human actions as an outcome of the association between one's attitude, perceived control over his/her behavior, and social norms. Therefore, one's vaxication behavior can be justified by his/her positive attitude

toward traveling during the pandemic and the vaccine's perceived benefit in the prevention of the infection. Although the concept of vaxication is still evolving, it shows promise in boosting post-COVID tourism [9].

2.3. Travel Fear of Missing Out (FOMO)

Travel FOMO refers to the individual's fear of missing out on travel opportunities and experiences, especially when others (e.g., friends and family) are (or may be suspected of) traveling [14,43,44]. FOMO can be conceptualized by the self-determination theory [45], which explains the three inherent psychological needs of humans: relatedness, autonomy, and competence. Individuals who are less satisfied with their psychological needs have evidenced higher FOMO [14], and according to the theory, if these needs are satisfied, individuals are capable of self-determination and thus have less FOMO. Among several generic psychological impacts of the COVID-19 pandemic, the fear of missing out (FOMO) is one of the most visible and influential psychological phenomena. Although the FOMO concept was originally introduced in a completely different domain [14], it perfectly synchronizes with the COVID-19 (and post-COVID) tourism industry when considering the traveler's fear of missing out on opportunities of socializing, traveling, and adventure [4,14].

FOMO is a feeling of anxiety and apprehension of an individual (e.g., prospective travelers) who experience the fear of missing out on a chance of any event of satisfaction, social interaction, or something that satisfies their personal needs. The FOMO concept has been applied to different contexts in previous studies [14,19,20,43,44]. Initially, Przybylski et al. [14] explained FOMO in a psychological context and developed the construct to measure FOMO. Alt [20] explored FOMO among adolescents and its connection with their learning approach. In another study, Alt et al. [19] explored the FOMO effect on college student's social media engagement [19]. Abel et al. [43] concentrated their research on the relationship between the degree of social media consumption and levels of FOMO. Similarly, this psychological concept has been studied in different contextual settings [15–18]; however, it has not been particularly applied in the travel and tourism context. The present study is the first effort of integrating fear of missing out (FOMO) in the domain of travel and tourism, thus forming a new concept of travel FOMO [43].

2.4. Destination Crisis Marketing

Crisis marketing is a set of marketing strategies to successfully lead a business out of a crisis while securing its strong and long-term future [11]. Integrated into the tourism industry, crisis marketing is the use of marketing strategies by tourism destinations as measures of survival (and subsequent revival) when faced with a crisis [11,46]. The fusion of crisis marketing with destination marketing gives birth to destination crisis marketing—a useful business tool for the revival of tourism and attracting prospective travelers during (and after) a crisis [11]. The concept of crisis marketing in the era of COVID-19 tourism relates to the efforts of travel and hospitality businesses as well as governments to promote their destinations in a way that travelers are fully aware of the pandemic conditions, availability of services, and responsiveness of the host destinations (e.g., authenticity, transparency, empathy, humility, creativity, and optimism) during the crisis [11,47]. For example, if a country plans to re-open tourism for locals as well as global travelers, then the government and tourism planners should devise effective crisis marketing strategies (e.g., digital online campaigns) to promote their destination as safe and responsive during the crisis [11,48]. Although the strategies adopted during crisis marketing mainly depend on the nature of the disaster or crisis, the prime purpose remains the same that is, to ensure the survival of a business during a crisis and revival after it, instead of making massive profits on the cost of people's life and healthcare risk. Several studies have focused on finding the pathways for the revival of global tourism by marketing destinations as safe during the COVID-19 crisis [11,46–48].

Glyptou [46] focused on the restoration and co-creation of destination image in recovery from the COVID-19 crisis. Similarly, Ahmad et al. [47] empirically highlighted the positive effect of destination image and visit intentions of the travelers in the post-pandemic tourism industry. A recent study by Singh et al. [48] emphasized the availability of COVID-related information, staff vaccination details, outdoor spaces show-off, and post-pandemic schedules as a key factor to attract travelers in the recovery phase. In post-COVID-19 tourism, when the indicators of business revival start to shine and the industry begins to bloom once again, different marketing practices can be used to influence the decision-making of travelers while selecting a tourism destination. In another study, Iso-Ahola's theory of motivation was employed in the context of the tourism industry, highlighting a higher level of motivation was desirable for thrilling tourism experiences [49]. Moreover, the authors also argued that recreational events and tourism are driven by personal getaways, individual striving, social retreat, and interpersonal relationships.

2.5. International Expat's Pandemic Fatigue and Vaxication Intention for GOAT

The restrictions and lockdown during COVID-19 posed several adverse impacts on the psychological health of the people. The new routines, economic uncertainty, unsteady pandemic situations, and continuous risk of being exposed to the pandemic caused anxiety and unrestful state of mind in the general masses [4]. Considering the expats' community, the situation becomes worse as it is difficult for even natives to stay at home for an extended period. With the relaxation in lockdowns and travel restrictions, people with traveling interests are more eager to plan vacations and tours to make up for the lost time [4,9]. As studied by Zaman et al. [4], pandemic fatigue has a significant positive effect on revenge travel among the expat community, where revenge travel refers to planning tours and vacations in response to COVID-19 lockdowns to escape from the exhausting routine.

The theory of planned behavior asserts that human behavior is the product of one's perception of the current conditions and one's response to those conditions [50]. The severe conditions caused by the pandemic initially had an adverse psychological impact on global tourism. However, the advent of vaccines has eased travel restrictions, hence contributing to the normalization of the tourism industry along with other aspects of our daily lives [9]. In other words, the vaccines helped in reducing people's health risk perceptions, and subsequently, intentions to make up for the lost time during the pandemic were increased. This phenomenon could also be explained by the protection motivation theory, which posits that human actions and decisions are affected by their perceived threats and coping capabilities against those threats [9,40]. The fact that global vaccination campaigns have reduced the individuals' health risk perceptions while increasing their perceived coping abilities (i.e., behavioral control), many people have started to plan their very next vacations to immerse themselves in new and meaningful experiences. Since vaccination has become a legal requirement and a prerequisite for traveling, people are also left no choice but to get vaccinated in order to travel again to global tourism destinations [9]. Therefore, one can argue that once being suffered from the pandemic, individuals (e.g., expats experiencing the pandemic fatigue more than natives) will practice vaxication (i.e., take vaccination before vacation) to be able to set out on their greatest trip ever [4,9]. Based on these theoretical arguments, the first hypothesis is generated as:

Hypothesis 1 (H1). *International expats' pandemic fatigue has a significant positive effect on the vaxication intention for GOAT.*

2.6. Moderating Influence of Travel FOMO

The psychological concept of FOMO, when applied to the tourism industry, relates to the irrational anxiety of travelers missing opportunities for vacation travel and socializing [4,14,43]. Having already been exhausted from lockdowns and restrictions, people desire to avenge their lost time and engage in tourism activities [4,14,51]. However, international traveling can only occur when the travelers have received the required dosage of vaccines before traveling. In context, the anxiety and fear of missing out on the chance to travel are expected to fuel the individuals' desire to and willingness for vaxication. In a previous study, Bright and Logan [17]

asserted that FOMO has a significant influence on the feeling of deprivation; therefore, this cognitive appeal is expected to influence the decision-making process of travelers regarding vacation planning and destination selection (i.e., moderating the effects of pandemic fatigue on vaxication intentions for GOAT) [4]. In other words, despite experiencing pandemic fatigue, if a traveler does not feel much anxiety about missing out on travel opportunities, then he or she may postpone or even cancel the vacation travel plans, which ultimately avoids vaxication [4,9]. In contrast, if a person feels travel FOMO extensively, he or she may be more urged to practice vaxication, thus, affecting the relationship between expat's pandemic fatigue and vaxication intention for GOAT. This cognitive appeal, therefore, could act as a moderator on the relationship between expat's pandemic fatigue and vaxication intention for GOAT [4,9,14].

Applying the theoretical lens of stimulus-organism-response (SOR) theory [52], the proposed moderating impact of travel FOMO on the relationship between expat's pandemic fatigue and vaxication intention for GOAT can be substantiated. The SOR theory postulates that a stimulus event causes an emotional reaction, which subsequently induces a behavioral response. Furthermore, recent evidence has demonstrated that consumers' decision-making and purchasing behavior are significantly correlated to the extent of fear and greed emotions as a consequence of COVID-19 [21]. In a similar vein, Yan et al. [53] validated the role of psychological or emotional state in determining the effect of a stimulus on consumer behavior of either selection or rejection. Having discussed the theoretical explanations above, one could possibly argue that pandemic fatigue results in an emotional reaction (i.e., the fear of missing out on traveling opportunities), which will stimulate the behavioral response (i.e., the willingness to get vaccinated before traveling). Therefore, the second hypothesis for the present study is framed as follows.

Hypothesis 2 (H2). *Travel FOMO significantly and positively moderates the effects of international expats' pandemic fatigue on the vaxication intention for GOAT.*

2.7. Moderating Effects of Destination Crisis Marketing

Crisis marketing is a combination of business marketing strategies to ensure brand visibility and responsiveness during any crisis (e.g., COVID-19 pandemic) [11]. Destination crisis marketing in the midst of the COVID-19 pandemic would boost the visibility of vacation and travel locations for those who want to revenge travel [4,9,11]. Marketing destinations as "safe from COVID-19", "re-opened after the pandemic", or "first postlockdown trip" and implementing travel incentives will most likely enhance people's travel intentions and, therefore, willingness to vaxication [4,9]. A positive destination image has been evidenced to have a positive link with a traveler's intention to visit, even in the midst of the COVID-19 pandemic [47]. For instance, if a person plans to refresh his/her mental health by traveling but cannot find a suitable location abroad due to the crisis mismanagement at those destinations, he/she could consider postponing or even canceling her/his travel plan, which eventually diminishes vaxication intention. Likewise, having been deprived of leisure activities (due to the ongoing pandemic), the destination choices during (and after) COVID-19, combined with effective destination crisis marketing strategies, could create greater interest for vaxication [9,11]. The destination marketing efforts during the COVID-19 crisis seem to have a direct influence on the relationship between expats' pandemic fatigue and vaxication intention for GOAT [9,11].

Destination crisis marketing in an influential moderating mechanism can also be theoretically explained by the psychological reactance theory [54], which highlights the consumption behaviors and purchasing patterns in uncertain (e.g., COVID-19) conditions [21]. According to the psychological reactance theory, the consumers will continue their first-choice behaviors if they feel the freedom of decision-making, whereas they will intend to do the opposite if they perceive threats to their freedom of choice [55]. Additionally, for pandemic tourism, an adverse consumption behavior such as "canceling or postponing a travel plan" arises when travelers face hindrance (i.e., poor destination crisis marketing) in

performing their first-choice behavior (selecting a good location/destination for vacation). This phenomenon can also be described by the popular theory of planned behavior [38], which asserts that the extent of people's perceived control will induce positive attitudes and behavior. Therefore, being able to find multiple destinations and feeling free to choose among them (i.e., belief part of the theory), travelers are motivated to choose the finest destination and go for the greatest of all trips (i.e., behavior part of the theory) [9,11,38]. In light of the above arguments, the third hypothesis of the research is framed as follows.

Hypothesis 3 (H3). *Destination crisis marketing significantly and positively moderates the effects of international expats' pandemic fatigue on the vaxication intention for GOAT.*

Based on the theoretical underpinning and scholarly evidence from prior research, the conceptualized model for the present study is graphically presented in Figure 1.



Figure 1. Conceptual model of Expats' Vaxication Intention for GOAT.

3. Materials and Methods

3.1. Sampling and Procedure

The intended research objective of the present study was to investigate the conceptual model of vaxication intention for GOAT and its relationship with international expats' pandemic fatigue, travel fear of missing out (FOMO), and destination crisis marketing. The research population comprised members of the international expat's communities in United Arab Emirates (UAE), which provided the respondent's pool of volunteering participants (N = 450). Pilot testing was conducted with a subset of the initial pool (N = 60) to assess the understandability of the survey and included questions. The final pool of acceptable, adequate, and error-free surveys consisted of 356 responses. Owing to the rigorous COVID-19 regulations, data relevant to the international expats' community was obtained through direct emails, which involved the distribution of online surveys individually. We also included expats' social media groups, which limited face-to-face interactions. The volunteering international expats were searched and approached through different social media platforms (e.g., Facebook, LinkedIn, and WhatsApp, etc.), including NGO's and organizations working for foreigners in UAE, during mid-December 2021 (when the daily reported new cases of COVID-19 were less than 1000). In addition, the foreign embassies and permanent missions, as well as the international business community, were also contacted through emails. These selective strategies of accessing the initial pool of international expats and then selecting the final research sample were a combination of non-probability sampling methods, including purposive sampling and snowball sampling. Non-probability sampling has been extensively employed in earlier studies, and it has proven useful in similar contexts, especially when undertaken during a crisis [4,9]. The informed consent of volunteering expats was taken before the research, and their personal information was kept confidential throughout the research process. Moreover, sample coding was to avoid any chances of partiality in information handling or analysis.

3.2. Measures

The conceptual model of this study included a total of four latent constructs, namely expat's pandemic fatigue (independent variable), vaxication intention for greatest of all trips "GOAT" (dependent variable), travel fear of missing out "FOMO" (moderating variable), and destination crisis marketing (moderating variable), respectively. To measure these latent constructs, two scales were carefully developed (i.e., travel FOMO and DCM), while two scales were selectively adapted (i.e., expat's pandemic fatigue and vaxication intention for GOAT). Importantly, the psychometric scale properties were well established after review and constructive feedback taken from senior academics (n = 5) and tourism industry practitioners (n = 4). The "expat's pandemic fatigue" was measured with the help of a 9-item construct adapted from Zaman et al. [4], which inquired the expats about the level of tiredness and fatigue as a result of COVID-19 restrictions and bans, their constant dread of contagion, and the detrimental psychological impact of COVID-19 media and social conversations. The items were coded as EPF1-EPF9 and were set on a 5-point Likert scale where 1 represented strong disagreement and 5 indicated strong agreement. Similarly, vaxication intention for GOAT was measured using an adapted scale (including 7 items coded as VGOAT1-VGOAT7) from Zaman et al. [4] as well as guidance from prominent literature [9,37,56]. A 10-item construct was developed to measure Travel FOMO [15,16,20]. The items were designed on a 5-point Likert scale and were coded as TFOMO1-TFOMO10. Lastly, the destination crisis marketing construct (including 7-items coded as DCM1-DCM7) was also developed after an extensive literature review and guidance from seminal research on crisis communication, crisis marketing, destination crisis management, and tourism crisis communication, respectively [57–68].

3.3. Data Analysis

For a quantitative investigation of the formulated conceptual model, the covariancebased structural equation modeling (CB-SEM) approach was used [69]. The SEM method and its greatest applications have received a lot of scholarly attention across disciplines (e.g., tourism marketing, technology management, construction management, and project management). However, various studies have recommended the SEM approach depending on the type of variables and gathered data, while emphasizing the benefits of SEM over other techniques (e.g., higher reliability of path coefficients) [70,71]. SEM has been widely employed in cognitive and social studies [4,9], whereas CB-SEM is one of the dominant SEM methods that offers more reliable statistical estimations for model fitness, in contrast to the partial least squares structural equation modeling (PLS-SEM) [9]. Using the Mplus statistical program, the CB-SEM approach was applied to the study data (N = 356). Mplus provides a variety of time-saving, and convenient (user-friendly) statistical simulations for analytical solutions. In a simple layout, the Mplus software provides a number of techniques, simulations, and built-in programs. The use of diagrammatic forms to illustrate analyses and outcomes aids in the better presentation of work [72].

4. Results

4.1. Demographic Outcomes

The demographic classification of the respondent's final pool (N = 356) was carried out before the in-depth analysis of the conceptualized model of the study. Table 1 presents the summary of the demographic profiles of the respondents. It can be observed that the gender split of the sample is almost even with an exact 50% of the respondents belonging to the male gender, 46.3% as female, while 3.7% preferring not to disclose their gender. Further classification indicated that most of the respondents belonged to the age bracket of 31 to 35 years (31.5%), while 25–30 years had a second majority with 26.1% respondents. A total of 105 respondents (29.5%) had an annual income ranging from USD 50,001 to USD 75,000, and 23.9% respondents belonged to USD 25,001 to USD 50,000 group. The majority (i.e., 52.8%) of the respondents had a traveling frequency of one to two times per year, while 26.4% of respondents traveled around three to five times each year (before the COVID-19 pandemic). The research sample is a fine mix of multidimensional demographics; therefore, evenly distributed and impartial data can be expected from this sample. Moreover, the sample also represents the general population demographics of expats in the UAE [73], so the findings of this study can be expected to have a good generalization potential.

Items		Frequency	Percentage
	Male	178	50.0%
Gender	Female	165	46.3%
	Prefer not to say	13	3.7%
	18–24 years	57	16.0%
	25–30 years	93	26.1%
1 00	31–35 years	112	31.5%
Age	36–40 years	59	16.6%
	41–45 years	27	7.6%
	46 years and above	8	2.2%
Annual Income (equivalent in USD)	USD 25,000 or less	59	16.6%
	USD 25,001–USD 50,000	85	23.9%
	USD 50,001–USD 75,000	105	29.5%
	USD 75,001–USD 100,000	65	18.3%
	USD 100,001–USD 150,000	32	8.9%
	USD 150,001 and above	10	2.8%
Frequency of	Once or twice per year	188	52.8%
	Three to five times per year	94	26.4%
vacation travel	Six to eight times a year	59	16.6%
before COVID-19	More than nine times a year	15	4.2%

Table 1. Demographic Profiles of International Expats (N = 356).

4.2. Data Normality

After demographic classification, the initial analysis included tests for data normality and common method bias. The presence of outliers, normality, missing values, and multicollinearity was assessed in the initial part of the analysis. Table 2 provides the outcomes of the data normality test and descriptive statistics. The observed minimum and maximum values for each construct were the extreme points of the Likert scale included in the study, whereas the mean values indicated the average of the response given on the scale of 1 to 5. The standard deviation, kurtosis, and kurtosis of each latent construct of the study were found in-between the acceptable ranges of "-2 and +2", "-3 and +3", and "-1 and +1", respectively. Therefore, these estimations (within their threshold limits) justify the normality of each construct included in the conceptualized model of the study. Thus, the assumption of data normality for structural equation modeling is empirically reinforced [9,72,74].

Table 2. Descriptive Statistics and data normality (N = 356).

Variables —	Ν	Min	Mean	Max	SD	Skewness		Kurtosis	
	Stats	Stats	Stats	Stats	Stats	Stats	Std. Error	Stats	Std. Error
VGOAT	356	1.00	4.0253	5.00	0.61773	-0.690	0.129	1.464	0.258
TFOMO	356	1.00	3.3904	5.00	0.78974	0.648	0.129	0.486	0.258
EPF	356	1.00	3.7360	5.00	0.64118	-0.736	0.129	1.742	0.258
DCM	356	1.00	3.5983	5.00	0.75442	-0.412	0.129	0.288	0.258

Harman's single factor test [75], i.e., a widely employed test for assessing common method bias (CMB), was conducted after ensuring the normal distribution of the study data (N = 356). The extraction method used in this analysis was the principal component analysis (PCF). The PCF evaluation of all the latent constructs revealed that the maximum variance extracted was around 33%, which is well below the upper threshold limit of 50%. The extracted variance lies within the acceptable range; hence, CMB-related issues or

	Initial Eigenvalues		Extraction Sums of Squared Loadings			
Component	Total	% of Variance	Cumulative %	Total	% of Variance	Cumulative %
1	10.817	32.779	32.779	10.817	32.779	32.779
2	5.399	16.359	49.139			
3	3.041	9.217	58.355			
4	2.551	7.729	66.085			
5	0.941	2.852	68.936			
6	0.923	2.796	71.732			
7	0.821	2.489	74.221			
8	0.791	2.398	76.618			
9	0.767	2.323	78.941			
10	0.650	1.969	80.910			
11	0.615	1.864	82.774			
12	0.607	1.839	84.614			
13	0.485	1.471	86.084			
14	0.469	1.420	87.504			
15	0.420	1.272	88.777			
16	0.399	1.209	89.985			
17	0.381	1.154	91.139			
18	0.369	1.119	92.258			
19	0.329	0.998	93.256			
20	0.272	0.826	94.081			
21	0.267	0.809	94.890			
22	0.258	0.782	95.672			
23	0.224	0.680	96.352			
24	0.204	0.619	96.971			
25	0.172	0.521	97.492			
26	0.150	0.456	97.948			
27	0.131	0.396	98.344			
28	0.125	0.380	98.724			
29	0.106	0.322	99.046			
30	0.092	0.279	99.325			
31	0.084	0.255	99.580			
32	0.079	0.240	99.820			
33	0.059	0.180	100.000			

concerns are deemed non-existent in the present study [72]. Table 3 provides the summary

Table 3. Common Method Bias (N = 356).

of Harman's single factor test outcomes.

Note: Extraction Method—Principal Component Analysis.

4.3. Measurement Model

After assessing the data normality, the evaluation further proceeded to exploratory factor analysis (EFA). The EFA was conducted for all variables, and consequently, each item of the included constructs yielded sufficient factor loadings ($\rho > 0.40$). Similarly, in confirmatory factor analysis (CFA) graphically presented as Figure 2, the items of each construct yielded sufficient standardized factor loading ($\lambda > 0.30$, as the cut-off value and/or recommended threshold). The findings from EFA and CFA indicate that the observed data and the theoretical model of the study were a good fit for each other. To assess the internal reliability of the constructs, Cronbach's alpha, average variance extracted (AVE), and composite reliability (CR) values for each latent construct were calculated. The observed AVE, CR, and Cronbach's alpha values, as reported in Table 4, surpassed the cut-off values for each construct, thus confirming the internal/convergent reliability [76]. Table 4 further presents the summary of goodness of fit indices ($\chi 2 = 1008.437$, df = 483, p = 0.01, $\chi^2/df = 2.088$, SRMR = 0.035, RMSEA = 0.055), which assures a very good fit between the study data and measurement model and thus justifies the findings of EFA and CFA. Moreover, the study data were also subjected to multicollinearity and discriminant validity tests. As mentioned in previous studies, the absence of multicollinearity across

constructs is thought to be crucial for SEM outcomes to be accurate [9,74,77]. Therefore, the square root of AVE values was matched with the inter-correlation values between each construct, as shown in Table 5. Greater AVE square root values indicated the presence of adequate discriminant validities (and the absence of multicollinearity issues) in the measurement model [4].



Figure 2. CFA Model of Expats' Vaxication Intention for GOAT.

4.4. Structural Model

In the final step of the analysis, the path coefficients (with t-statistics) were assessed to test the hypothesized relationships, as the data normality, goodness of fit indices, convergent and discriminant validities, and non-existent multicollinearity were well established. The structural model assessment included conventional statistics (beta-coefficients, t-statistics, and *p*-values), as reported in previous studies [4,9,74,77]. The outcomes of t-stats, *p*-values, and path coefficient tests are summarized in Table 6 and graphically presented in Figure 3. The positive values of inter-construct correlations (reported in Table 5) confirm the positive association between expat's pandemic fatigue and vaxication intention for GOAT. Moreover, the positive value of the path coefficient ($\beta = 0.487$) reinforces this evidence. The higher values of t-stats (t = 12.81) and lesser *p*-value (p < 0.01) confirmed the statistically significant and positive influence of expat's pandemic fatigue on vaxication intention for GOAT. Consequently, hypothesis 1 (H1) is accepted. In contrast, hypothesis 2 (H2), which tested the moderating influence of travel FOMO (on the relationship between expat's pandemic fatigue and vaxication intention for GOAT), is also accepted due to the positive and statistically significant interaction ($\beta = 0.383$, t = 9.119, and p < 0.01). Likewise, hypothesis 3 which theorized the moderating influence of destination crisis marketing on the relationship between expat's pandemic fatigue and vaxication intention for GOAT is also accepted on similar grounds ($\beta = 0.560$, t = 16.47, and p < 0.01). In summary, all the three hypotheses offered in the conceptual model are accepted based on empirical evidence. This implies that the pandemic fatigue in expats fosters their intentions to go on vacations (after receiving mandatory vaccination shots), whereas their fear of missing out on travel opportunities and the effective destination crisis marketing campaigns can significantly reinforce their vaxication intention.

Table 4. Measurement Model (N = 356).

Constructs and Items	Label	ρ	λ
Expat's Pandemic Fatigue (EPF) ($CR = 0.899$; $AVE = 0.594$; Cronbach's Alpha = 0.897)			
I worry a lot about my personal and family's safety during this pandemic.	EPF1	0.714	0.727
I have felt sad and depressed as a result of the pandemic.	EPF2	0.802	0.858
I am tired of all the COVID-19 discussions in TV shows, newspapers, and radio	EDE3	0 731	0 727
programs, etc.	EI I'S	0.751	0.727
I am sick of hearing about COVID-19.	EPF4	0.855	0.789
When friends or family members talk about COVID-19, I try to change the subject	FPF5	0 530	0.653
because I do not want to talk about it anymore.		0.000	0.000
I feel strained from following all of the behavioral regulations and recommendations	EPF6	0.741	0.707
around COVID-19.		0	
I am tired of restraining myself from saving those who are most vulnerable to COVID-19.	EPF7	0.695	0.637
I am losing my spirit to fight against COVID-19.	EPF8	0.511	0.476
I have thoughts that this pandemic will never end soon.	EPF9	0.774	0.685
Traveler's Fear of Missing Out (FOMO) ($CR = 0.93/$; $AVE = 0.601$; Cronbach's Alpha = 0.931)		0.00	0.010
I fear others have more rewarding travel experiences than me.	TFOMOI	0.836	0.810
I fear my friends have more rewarding travel experiences than me.	TFOMO 2	0.774	0.733
I get worried when I find out my friends are having fun traveling without me.	TFOMO 3	0.866	0.857
I get anxious when I do not know about my friends' travel plans and/or travel activities.	TFOMO 4	0.636	0.632
It is important that I know where my friends are traveling.	TFOMO 5	0.910	0.924
Sometimes, I wonder if I spend too much time keeping up with my friends' travel plans and/or travel activities.	TFOMO 6	0.661	0.675
It bothers me when I miss an opportunity to travel with friends.	TFOMO 7	0.848	0.865
Whenever I have a good travel experience, it is important for me to share details online (e.g.,			
updating status on social media).	TFOMO 8	0.881	0.869
Whenever I miss out on planned travel, it bothers me.	TFOMO 9	0.609	0.610
Whenever I cannot travel, I continue to keep track of my friends, whether they are traveling or			0 707
staying at home.	TFOMO 10	0.751	0.706
Destination Crisis Marketing (DCM) (<i>CR</i> = 0.926; <i>AVE</i> = 0.644; <i>Cronbach's Alpha</i> = 0.920)			
At times of crisis (e.g., COVID-19 pandemic)			
I prefer to choose a tourism destination that conveys <i>authenticity</i> .	DCM1	0.619	0.760
I prefer to choose a tourism destination that ensures <i>honesty</i> and <i>transparency</i> .	DCM2	0.768	0.844
I prefer to choose a tourism destination that <i>communicates with empathy</i> .	DCM3	0.707	0.838
I prefer to choose a tourism destination that reflects <i>optimism</i> (e.g., staying positive	DCM4	0 702	0.885
and hopeful).	DCIVI4	0.792	0.005
I prefer to choose a tourism destination that offers <i>supportiveness</i> .	DCM5	0.867	0.803
I prefer to choose a tourism destination that displays <i>humility</i> .	DCM6	0.932	0.784
I prefer to choose a tourism destination that displays a spirit of <i>creativity</i> .	DCM7	0.864	0.689
Vaxication Intention for GOAT (<i>CR</i> = 0.932; <i>AVE</i> = 0.665; <i>Cronbach's Alpha</i> = 0.928)			
As I am fully vaccinated for COVID-19, I plan to go on a special trip			
To prioritize my enjoyment and experiences.	VGOAT1	0.778	0.793
To immerse myself in new experiences that are completely different from the past.	VGOAT2	0.653	0.721
To fully embrace the freedom to do whatever I want.	VGOAT3	0.903	0.919
To somewhere new with a flexible schedule.	VGOAT4	0.881	0.823
To treat myself even if it is over my budget.	VGOAT5	0.928	0.941
To seek out excitement with no regrets.	VGOAT6	0.817	0.766
To experience the "greatest of all trips" that I completely deserve.	VGOAT7	0.792	0.717
Measurement model fit statistics:			
a. Absolute fit indices			

 $\chi 2 = 1008.437,\, \mathrm{df} = 483,\, p < 0.001,\, \chi 2/\,\mathrm{df} = 2.088,\, \mathrm{SRMR} = 0.035,\, \mathrm{RMSEA} = 0.055$

b. Incremental fit indices

TLI = 0.943, and CFI = 0.948

Notes; ρ = Factor loadings at \geq 0.40 using EFA; λ = Standardized factors loadings using CFA; CR = Composite Reliability; AVE = Average variance extracted.

	TFO	EPF	VGOAT	DCM
TFOMO	0.775			
EPF	0.193	0.703		
VGOAT	0.241	0.538	0.816	
DCM	0.272	0.409	0.507	0.803

Table 5. Multicollinearity and Discriminant Validity (N = 356).

Notes: **Bold** characters represent the square root of AVE scores for each construct. The number below the *diagonals* are the values for measurement adjusted inter-construct correlations.

Hypotheses	Relationships	Path Coefficients	Standard Error (S.E)	t-Stats	<i>p</i> -Values	Outcomes
H1	$EPF \rightarrow VGOAT$	0.487 **	0.038	12.81	< 0.01	Accepted
H2	EPF* TFOMO \rightarrow VGOAT	0.383 **	0.042	9.119	< 0.01	Accepted
H3	$\text{EPF*} \text{ DCM} \rightarrow \text{VGOAT}$	0.560 **	0.034	16.47	< 0.01	Accepted

Table 6. Results of study hypotheses (N = 356).

Notes: ** p < 0.01, EFP = Expats Pandemic Fatigues, TFOMO = Traveler's Fear of Missing Out, DCM = Destination Crisis Marketing, VGOAT = Vaxication Intention for Greatest of All Trips.



Figure 3. Structural Model.

5. Discussion

Reopening global tourism requires bouncing forward by adopting new business models (e.g., regenerative travel) instead of bouncing backward to old patterns of pre-pandemic tourism [4,9,11]. Human behavior, according to the theory of planned behavior [38], is heavily influenced by beliefs. Employing it to the post-pandemic tourism context, the utmost desire of staying safe (yet compensating for the time and traveling opportunities lost during lockdowns and travel bans) drives the traveler's actions and decision-making process. Thus, by getting fully vaccinated against COVID-19, travelers become eligible to travel and then plan for their desired vacation. The present study postulates a novel framework by conceptualizing relationships between expats' pandemic fatigue and vaxication intention for GOAT, as well as the moderating effects of travel FOMO and destination crisis marketing on this relationship. Supported by underpinning theories and empirical evidence on these untested relationships, the present study validated the significant positive influence of expats' pandemic fatigue on vaxication intention for GOAT. Pandemic fatigue has already been discussed in the tourism context in recent studies [4,78]. However, the present study provides empirical evidence in support of pandemic fatigue fostering the urge to travel after relaxation of bans (e.g., revenge travel) and optimism for vacation travel after vaccination (i.e., vaxication). Travelers with revenge travel motives are also inclined to get fully vaccinated in order to become eligible to travel again. Therefore, the current study

is in line with observations of recent studies that highlighted the influence of pandemic fatigue on travel intentions [4]. Chua et al. [78] found that people's intentions to travel in the post-pandemic world are heavily influenced by their degree of feeling safe from COVID-19. Moreover, the healthcare and safety concerns also dictate their travel intentions.

The present study also investigated the moderating influence of travel FOMO on the relationship between expats' pandemic fatigue and vaxication intention for GOAT. The empirical evidence validated that travel FOMO can significantly increase (through its positive moderation) the impact of expats' pandemic fatigue on vaxication intention for GOAT. Surprisingly, FOMO has not been empirically examined in previous research in the travel and tourism industry. Existent literature has linked FOMO with opportunities for recreation, such as using social media [14,16–18], video gaming [79], and sporting activities [80]. Although previous studies have largely ignored the implications of travel FOMO, the FOMO concept has been linked with an individual's recreational drive. Supported by the self-determination theory [45], the present study's finding on travel FOMO reinforces the scholarly knowledge on vaxication intention of travelers troubled with pandemic fatigue. Last but not least, the present study accords that destination crisis marketing has a significant moderating influence on the relationship between expats' pandemic fatigue and vaxication intention for GOAT.

Recent studies in management and marketing research have focused on the identification of new and effective strategies for destination marketing and image creation in the COVID crisis scenario, aimed at prospective growth in post-pandemic tourism [11,46–48,81]. Glyptou [46] emphasized that positive image creation of a destination during times of a prolonged crisis, such as COVID-19, acts as a predictor of tourist intentions for visiting destinations. Ahmad et al. [47] also argued that the destination image has a significant effect on the travel intentions of tourists. Moreover, the physical factors of the destinations were found to be more influential. Similarly, Singh et al. [48] identified marketing methods that can help destinations and tourism businesses to sustain and stand out during a crisis, such as COVID-19. The authors suggested COVID-related marketing attributes for opening destinations after the pandemic, vaccinated staff, open and outdoor spaces, and other information to increase traveler's engagement and confidence that would consequently affect their visit intentions. Hence, these aforementioned studies provide sufficient scholarly evidence in support of the outcomes of the current study.

5.1. Theoretical Implications

With the arrival of the COVID-19 pandemic, the world has seen the emergence of new concepts and their integration across academic disciplines. Widespread mental distress and anxiety during the pandemic have led to the birth of the pandemic fatigue concept first in psychology [3,4,6,30], which was subsequently adopted by tourism and hospitality management literature [82–86]. The present study developed and validated a comprehensive model that examined the influence of pandemic fatigue on vaxication intention for GOAT for the first time in tourism literature. To do so, new scales were developed and statistically validated to measure expats' pandemic fatigue and vaxication intention for GOAT (i.e., a concept that refers to the first mega-trip after complete vaccination). As the vaxication concept is still in its infancy [9,12,23,87–90], the present study extends scholarly knowledge of vaxication by empirically validating its relationship with expat's pandemic fatigue. This outcome can be interpreted through the theory of planned behavior. As having been psychologically harmed (by curfews and prolonged lockdowns), the fact that restrictions were subsequently relaxed and large-scale vaccination campaigns were implemented. Consequently, the expats display signs of optimism and developed a positive attitude towards traveling [4,9,11]. Additionally, expats could feel more power and behavioral control over their traveling decisions [42]. Based on the protection motivation theory, vaccines could enhance one's perception of self-coping abilities while reducing perceived health threats posed by the pandemic [40].

The novel framework offered in the present study also integrates the fear of missing out (FOMO) concept into tourism. Having developed and validated a novel scale to measure travel FOMO, the present study put forwards empirical evidence for the moderating role of travel FOMO on the relationship between expats' pandemic fatigue and vaxication intention for GOAT. As posited in the self-determination theory, individuals with low selfdetermination are likely to have greater FOMO than those capable of self-determination. Therefore, the present study contributes to the recent and expanding literature on FOMO in relationship with self-determination theory by depicting expats with higher travel FOMO tend to display higher intentions for vaxication for GOAT [45]. Moreover, this study found the moderating effect of destination crisis marketing on the aforementioned relationship between expat's pandemic fatigue and vaxication intentions, which is in line with the recent literature highlighting that COVID-branded destination safety (CBDS) is the predictor of vaxication intention [9]. The present study offers a novel and interdisciplinary conceptual model that unfolds the underlying relationships between these potential constructs (i.e., pandemic fatigue in expats, vaxication intentions for GOAT, travel FOMO, and destination crisis marketing) and paves ways for future investigations to delineate post-pandemic tourism.

5.2. Managerial Implications

The present study has several implications for the decision-making processes of tourism marketers and practitioners. First and foremost, tourism marketers should be aware that expat residents in regions under strict lockdowns and pandemic conditions are likely to experience more severe pandemic fatigue. In particular, as depicted by Zaman et al. [4], expats experiencing intense pandemic fatigue have stronger motivations to engage in revenge travel to avenge their lost time due to the pandemic. Therefore, based on the present study findings, tourism marketers are advised to concentrate on locations that were worse hit by the pandemic to revive tourism demand in the post-pandemic world. Furthermore, complete vaccination has already become mandatory for traveling; therefore, tourism authorities should also work in collaboration with the health care industry to support mass vaccination campaigns to boost future tourism demand. For instance, travel companies and agencies can introduce special offers and discounts for travelers who are getting vaccinated to be eligible to set out on their first trip.

Secondly, the present study empirically illustrated that travel FOMO strengthens the impact of expat's pandemic fatigue on vaxication intention. In this regard, tourism marketers are advised to tap into the emotions of prospective visitors by illustrating that safe and joyful traveling is possible during the pandemic. Destinations can utilize celebrity endorsements and seek cooperation with social media influencers to ensure that traveling is not dangerous anymore, thus provoking fear of missing out to draw tourism demand. Finally, the present study also found that destination crisis marketing reinforces the impact of expat's pandemic fatigue on vaxication intention. In this respect, tourism marketers are advised to focus on offsetting the damage of the COVID-19 pandemic on tourism (by engaging fully vaccinated travelers) with effective destination crisis marketing communications (e.g., ensuring authenticity, transparency, empathy, humility, creativity, and optimism), instead of just competing for tourists and tourist dollars. To do so, tourism marketers should give priority to promoting destinations as safe and COVID-free in their marketing campaigns [46–48]. Moreover, transformative ways of destination crisis marketing, with coordinated and timely response to online user-generated content (e.g., avoid alienating prospective travelers by not being insensitive to the crisis), are deemed useful to rebuild destination trust (with good rapport) and increase individuals' vaxication intention [9,11,91].

5.3. Limitations and Future Work

This survey-based research gathered information from international expatriates residing in the United Arab Emirates. In contrast to local residents, the expatriates are more prone to travel often, at minimum for individual purposes, to meet their family, friends, and acquaintances in their home country [92]. As a result, travel bans and pandemic-induced restrictions may relatively exert a greater influence on expats' mental health. Expatriates may also have challenges adjusting to the indigenous lifestyle, such as communication and language issues [93], which might increase the pandemic's negative impact. As a consequence, expatriates may be more stressed to exhibit pandemic fatigue at a larger scale than the locals. The present study's initial limitation is the choice of expatriates to examine the research hypotheses. To circumvent this constraint, future studies should include local residents and communities to examine any underlying differences in post-pandemic touristic behavior between expatriates (including their different nationalities) and native individuals. Future studies must also look at additional elements that might change the relationship between pandemic fatigue and vaxication intention for GOAT. For example, expats' nationalities, lockdown severity and duration, as well as COVID-19 diagnosis in close family, friends, and relatives. In addition, future studies can also examine traveling and vaxication behavior in correlation with soothing techniques, personal-safety motives, and risk-taking attitudes across traveler's age groups [94,95].

6. Conclusions

The revival of pre-pandemic tourism seems to be psychologically clouded, owing to the planned choices of travelers based on health and safety concerns [96]. Hence, tourism businesses and destinations are inclined to attract travelers who are fully vaccinated [97] to serve as an icebreaker for post-COVID tourism [4]. The present study proposed and validated a conceptual model for post-COVID tourism based on relevant underpinning theories (e.g., theory of planned behavior, self-determination theory and protection motivation theory). Using data of international expats in the UAE, the present study highlighted that expats' pandemic fatigue has a significant positive effect on vaxication intention for GOAT. Hence, individuals in locations experiencing more rigid restrictions (i.e., prolonged curfews and lockdowns) could jumpstart tourism demand based on rising vaccination rates and subsequent vaxication demand. Another interesting finding in the present study highlighted that travel FOMO significantly moderates the relationship between expats' pandemic fatigue and vaxication intention for GOAT. Thus, tourism marketers can better benefit from celebrity endorsements and social media influencers to promote destinations as safe and reliable, which will eventually incite people's fear of missing out on travel opportunities during (and after) the pandemic. Importantly, destinations that leverage crisis marketing strategies can minimize their loss (and damage) during and after the COVID-19 pandemic. Hence, destinations should equally emphasize all forms of crisis marketing channels and communications to overcome the adversities of the pandemic. For instance, better coordination of destination-owned media, as well as timely responses to online user-generated content, could contribute to rebuilding destination trust and mobilizing individuals' vaxication intention for the greatest of all trips [9,11,91].

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