

Vaccine Tourism and Ethical Behavior of Generation Z in the Covid-19 Pandemic

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Abstract

The preliminary study analyzes the perceptions of tourism management students about vaccine tourism who are unvaccinated, including an ethical perspective. The sample is 46 undergraduate students in a foundation university in Antalya-Turkey and the email interview is used to gather data from respondents due to the Covid-19 pandemic. Findings reveal that although some respondents support vaccine tourism in general except their concerns about the reliability of the vaccine, the vaccination process, and the quality of the vaccine, some respondents have ethical considerations in choosing where to be vaccinated and in which circumstances, they will take place in the vaccination process. The creation of unequal opportunities for the rich and the discrimination among the members of the society is vastly mentioned. The exploratory study enlightens the field of medical tourism in terms of vaccine tourism and ethical consumption of young generations for researchers and practitioners.

1. Introduction

The COVID-19 pandemic is one of the biggest health disasters of the last 90 years (Chakraborty & Maity, 2020). Within the first two years of COVID-19, at least 450 million cases were reported worldwide (ECPC, 2022). The current pandemic influenced the tourism industry and the international movement of travelers (Gupta et al., 2023; Neuburger & Egger, 2021; Chang et al., 2020). The limitations for travel, airport restrictions,

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fight cancellations, cancellation of bookings and organizations, and anxiety of people impacted the industry negatively (Gössling et al., 2020).

Vaccine tourism may solve the obstacle of reaching vaccines (Kucheran, 2021). Some countries offer travel packages for the vaccine to stimulate the economy (Abbas et al., 2023; Kulkova et al., 2023; Gilchrist, 2021; Fotiadis et al., 2021). On the other hand, ethical concerns arise between the communities toward vaccine tourism due to the creation of inequalities between the societies (Espindola & Vaca, 2022; Shankar, 2021). Among the generations of the society, how Generation Z approaches this type of tourism, whether this generation considers vaccine tourism, including an ethical perspective is a question mark. Generation Z, born after 1995 (Zorn, 2017; Turner, 2015), has a rising awareness of health and nature issues (Danciu, 2017). The people of this generation are willing to make a difference in the world (Abdullah et al., 2018), and their society (Shi, 2018) and pay attention to brands caring for the world (Van den Bergh & Pallini, 2018). This perspective affects their buying behavior accordingly (Veiga-Neto et al., 2018). Therefore, it is important to understand what their intentions are toward vaccine tourism including the ethical perspective of their consumerism.

This study makes essential contributions to the concerning field. First, the preliminary study aims to analyze the perceptions of tourism management students of Generation Z about vaccine tourism, who are unvaccinated in the COVID-19 era. Second, the exploratory study includes an ethical consumerist perspective in perceiving this generation's travel behavior toward vaccine tourism.

2. Vaccine tourism and ethical consumerism

Several countries announced plans that offer travelers the vaccine with no requirement to be a citizen. Whether it is to protect their population or revitalize the economy of the destination, vaccine tourism is the travel trend of 2021 (Kucheran, 2021). Some countries offer the Covid-19 vaccine to travelers such as Armenia, Barbados, Cuba, Dubai, Mauritius, the US, Russia, the United Arab Emirates, and India (Kucheran, 2021; Farooqui et al., 2023; Kulkova et al., 2023). The Maldives started the “3V tourism” approach as “*Visit, Vaccinate and Vacation*” (Hardingham, 2021).

Research suggests that the vast majority of people living in developing countries may not access to the vaccines for some time, while people in developed countries may face more complicated situations due to vaccine hesitancy (Su et al., 2021). Cost is a key factor in medical tourism (Dong et

al., 2023; Hopkins et al., 2010), which affects the financial opportunities of people for their vaccine trip if they are willing to travel to tourist destinations. According to Fotiadis et al. (2021), if a vaccine is accessible only in specific locations, vaccine tourism can remain a key candidate for revenue recovery of the tourism industry and the sustainability of tourism.

Vaccine tourism raises questions about its ethical implications (Dong et al., 2023; Attwell, 2023; Farooqui et al., 2023; Espindola & Vaca, 2022). Eagan (2021) states some experts believe it is worthier to vaccinate as many people as possible, without considering their residency and others say vaccine tourists create unfairness when they employ the services and distribution channels that are assigned to different communities. Dong et al. (2023) and Farooqui et al. (2023) discuss the ethical issues concerning vaccine tourism and the availability/unavailability of vaccines to different regions. Shankar (2021) also highlights ethical questions of vaccine tourism: 1) Going to another destination, getting a vaccine, and returning home is unethical tourism? 2) Do foreigners think they may be taking a vaccine from a person entitled to it under that country's regulations? 3) Can travel to get the vaccine faster let the individual help underprivileged communities? 4) Can encourage vaccine exports instead of vaccine tourism work until each country has the necessary dose? WHO (2021) declares more than 690 million doses are conducted worldwide, but over 85% went to wealthy regions, and low-income regions got less than 0.5%. This situation creates inequality and unfairness among the citizens of the world.

Ethical shoppers are "*concerned with the effects that a buying preference has, on themselves and their immediate environment*" (Harrison et al., 2005, p. 2). Harrison et al. (2005) mention six factors of ethical consumerism: 1) Magnitude of harm inflicted upon people, 2) Social agreement over the activity, 3) The perceived likelihood of the harm, 4) When the harm will happen, 5) Closeness of decision maker to the harm arise, and 6) How the harm spread over a vast number of people. Lovelock and Lovelock (2013, p. 60) emphasize that the vaccine tourists travel to a spot, get the vaccine, and carry medicines that will protect them from local disease while people in need suffer from insufficient medical care. Despite the inequalities and unfairness for reaching vaccines, medical tourists are motivated by several factors such as long waiting times for treatment, and high treatment costs in their country, and insufficient providers (Lovelock & Lovelock, 2013, p. 96). The main medical tourism spots are in lower and middle-income nations with lower exchange rates (Johnston et al., 2010), lower labor costs, inexpensive pharmaceuticals; these factors decrease treatment costs (Hopkins et al., 2010; Lovelock & Lovelock, 2013, p. 98).

3. Methodology

The population of study is 100 registered tourism students to the tourism faculty of a foundation university in Antalya-Turkey. The sample is 46 undergraduate tourism students who are unvaccinated, study in the field of tourism management and are willing to answer the questions. The email interview technique is preferred for data collection due to Covid-19. Considering the probability sampling technique, an email attachment is sent to the students who are registered for the 2020-2021 spring semester classes, explaining the study purpose. The data collection period is between April and mid-June 2021 through Survey Monkey. The data are transferred to MAXQDA qualitative software program 2022 for content analysis.

The questions are pre-examined by three officials from the tourism industry in terms of their content and appropriateness for this study. There are 12 open-ended questions and demographic questions in terms of gender, age, where they live, study field, and whether they are vaccinated. The first six questions deal with vaccine tourism. The second half focuses on ethical consumerism in vaccine tourism. The current studies inspired the researchers and let them draw the study questions. The studies concern the preferences of different vaccines (Kramer et al., 2021), safety measures of vaccines (Su et al., 2021), tourism recovery due to the epidemic (Dong et al., 2023; Fotiadis et al., 2021), factors allowing cheaper treatment costs for medical conditions (Hopkins et al., 2010), destinations where tourists can get the Covid-19 vaccine (Kucheran, 2021), medical tourism destinations with lower exchange rates (Johnston et al., 2010), ethical consumerism and lack of availability of vaccines (Hira & Ferrie, 2006), fair access to vaccines (Lovelock & Lovelock, 2013), and vaccine tourism from the perspective of ethical consumerism (Farooqui et al., 2023; Espindola & Vaca, 2022; Harrison et al., 2005).

- What do you think about being vaccinated at the moment due to Covid-19? (Kramer et al., 2021)
- If you have the opportunity to travel abroad, do you travel to another country where there is a supply of vaccines for foreigners? (Su et al., 2021; ECPC, 2022)
- Is travel a reason for different firms providing a choice for vaccines? Why? (Fotiadis et al., 2021)
- What do you think about the matter of the sufficiency/insufficiency of your financial opportunities for your trip? (Hopkins et al., 2010)

- In terms of protecting society, stimulating tourism, and the economy, how do you evaluate vaccines being part of vaccine tourism? (Kucheran, 2021)
- How do you look at being vaccinated abroad in the future, due to epidemic diseases? (Kucheran, 2021)
- What do you pay attention to while choosing the country for vaccine tourism? (Johnston et al., 2010; Hopkins et al., 2010)
- What can be the positive/negative consequences for you and the society for traveling to a country for vaccine tourism? (Hira & Ferrie, 2006)
- What do you think about the matter of having equal opportunities for every individual for reaching vaccines? (Lovelock & Lovelock, 2013)
- What do you think about the tourists' having the opportunity to be vaccinated in your country? (Lovelock & Lovelock, 2013)
- How does the vaccine policy (reaching the vaccines) of the country for their citizens affect your decision-making process if you are thinking of going there? (Espindola & Vaca, 2022; Harrison et al., 2005)
- If you are vaccinated in another country, what do you think about saying this matter to people around you? (Espindola & Vaca, 2022; Harrison et al., 2005)

4. Results

Table 1 shows the demographic features in terms of their gender, age group, department they are at, residency information, and whether they are vaccinated or unvaccinated in the pandemic.

Table 1: Demographics (n=46)

Gender	Percentage
Female	41.3
Male	56.5
No answer	2.2
Age	100
20-25	100
Department	
Tourism Faculty	100
Residency	
Antalya	84.7
Istanbul	4.3
Ankara	2.1
Izmir	2.1
Pakistan	2.1
Azerbaijan	2.1
No response	2.1
Vaccination process	
Vaccinated	0
Unvaccinated	100

4.1. Responses concerning vaccine tourism

Table 2 presents the different perspectives about vaccine tourism. The vast majority of respondents want to be vaccinated as soon as possible. 58.6% of respondents are willing to travel to another country if they have the opportunity but 30.4% of respondents are unwilling to go abroad. More than half of the respondents believe that travel is a reason for various firms providing a choice for vaccines and trust plays an important role. On the other hand, the majority of respondents do not have sufficient income for this trip. More than 70% of respondents support vaccine tourism and 67% of respondents are positive about being vaccinated abroad in the future, due to epidemic diseases.

Table 2: Comments on vaccine tourism (n=46)

	Frequency	Percentage
1. Thoughts about being vaccinated at the moment due to Covid-19?		
• Positive	35	76
• Not thinking of being vaccinated	7	15.2
• Indecisive	4	8.7
2. If you have the opportunity to travel abroad, do you travel to another country where there is a supply of vaccines for foreigners?		
• Travel	27	58.6
• Do not travel	14	30.4
• Depend on the conditions	3	6.5
• Depend on the type of vaccine	1	2.1
• Indecisive	1	2.1
3. Is travel a reason for different firms providing a choice for vaccines? Why?		
• Yes, it is a reason	29	63
<i>Why? (Out of 29 frequency)</i>		
-Trust	7	24.1
-Every country does not accept some vaccines due to some reasons	3	10.3
-Quality	2	6.8
-If the vaccine is really effective	1	3.4
-I want to go to Germany and the UK because they believe in science	1	3.4
-Some vaccines have allergic reactions	1	3.4
-Success rates are different	1	3.4
-Choose the less risky vaccine	1	3.4
-My trust and view is different for the vaccines that did not get the approval from WHO and the ones that are approved	1	3.4
• No, it is not a reason	16	34.7
• Indecisive	1	2.1
4. Thoughts about the matter of the sufficiency/insufficiency of your financial opportunities for your trip?		
• Do not have sufficient income	33	71.7
• Have sufficient income	9	19.5
• No answer	2	4.34
• I will not be vaccinated	1	2.1
• I will not spare any budget for the vaccine trip	1	2.1

5. In protecting society, stimulating tourism, and the economy, how do you evaluate vaccines being part of vaccine tourism?

• Positive and logical	33	71.7
• Not logical	7	15.2
• Not ethical	3	6.5
• Discrimination for the sake of rich	2	4.3
• No answer	1	2.1

6. How do you look at being vaccinated abroad in the future, due to epidemic diseases?

• Positive	31	67.3
• Negative	7	15.2
• Indecisive	3	6.5
• Not want to be vaccinated	2	4.3
• Terrifying	1	2.1
• Neutral	1	2.1
• No answer	1	2.1

4.2. Responses concerning ethical consumerism due to vaccine travel

Table 3 emphasizes the key comments of respondents concerning ethical consumerism and vaccine travel. The top five responses concerning the preference of the country for vaccine tourism are; the number of cases, reliability, development of the health industry and investment, the success rate of vaccination, and financial opportunities of the country. Key responses concerning the results of vaccine tourism are; support the economy, increase in the number of vaccinations, increase in medical tourism, vaccine tourism, and probability of being protected as positive outcomes and; unequal opportunities for rich and poor, the spread of virus due to movement if the vaccine is not effective, financial damage if the vaccine is not effective, bringing the virus and mutations back to the home country, as negative outcomes. Half of respondents believe in equal opportunities to reach vaccines but 45% of respondents mention the priorities in the society.

Table 3: Comments concerning ethical consumerism

	Frequency	Percentage
7. Paying attention to what while choosing the country for vaccine tourism (# of concepts= 52)		
• Number of cases	7	13.4
• Reliability	6	11.5
• Development of health industry and investment	5	9.6
• Success rate of vaccination	5	9.6
• Country's financial opportunities	4	7.6
• Whether they vaccinated their citizens and distribute to other countries	2	3.8
• Choose less crowded places	2	3.8
• Death rate	2	3.8
• Type of vaccine	2	3.8
• Do not want to be vaccinated	2	3.8
• Who believe in science, scientific studies	2	3.8
• Look how the vaccination affects their society	2	3.8
• What the government provide, how people struggle with the pandemic	2	3.8
• Having insurance	1	1.9
• Choose European countries, close to my country and values people	1	1.9
• Has human rights, not choosing a country having medicine cartels	1	1.9
• Accommodation, transportation, and vaccination results	1	1.9
• Comments of vaccinated people	1	1.9
• Level of health service and technology	1	1.9
• Attitude towards foreigners	1	1.9
• Being a member of the EU, my prejudice, WHO decision	1	1.9
• No answer	1	1.9
8. Results for you and the society for traveling to a country for vaccine tourism		
Positive results (# of concepts= 33)		
• Support the economy	5	15.1
• Increasing number of vaccinated people	4	12.1
• Increase in medical tourism, vaccine tourism	4	12.1
• Probability of being protected	3	9
• Currency to the destination	2	6
• Ending the virus more quickly	2	6
• The benefit is more personal than societal benefit	2	6
• Actualizing the tourism activity	1	3
• Chance to prefer different types of vaccines	1	3
• Providing privileges for countries who cannot reach the vaccine easily	1	3

• Employment	1	3
• Luxury resort hotels earning money due to vaccine tourism	1	3
• End of quarantine	1	3
• Gaining immunization	1	3
• If I travel, I can attract others	1	3
• Rich people will save themselves	1	3
• At least see another country	1	3
• Reliability for some people	1	3
Negative results (# of concepts= 40)		
• Unequal opportunities for rich and poor	6	15
• Spread of virus due to movement if the vaccine is not effective	5	12.5
• Financial damage if the vaccine is not effective	4	10
• Bring the virus and mutations back to my home country	4	10
• Unfair for people who have financial difficulties	4	10
• Currency spending abroad	3	7.5
• Uncontrollable mobility, risky for society	3	7.5
• Discrimination among people	2	5
• Language barrier	1	2.5
• Protests of the people who are unvaccinated	1	2.5
• People can have the virus in that country	1	2.5
• Feeling of hatred among people	1	2.5
• Inequality between countries	1	2.5
• Come across with another pandemic	1	2.5
• Not good to be dependent on other countries	1	2.5
• Society's decrease in trust in the ministry of health of the home country and forcing the government to change	1	2.5
• Increase in crime due to reachability to the vaccine from various income groups	1	2.5
9. Thinking of having equal opportunities for everyone for reaching vaccines		
• There has to be equal opportunities	23	50
• Every individual is not equal and there are priorities	21	45.6
• No answer	2	4.34

Table 4 reveals the respondent's comments concerning opportunities in vaccination, vaccine policies of countries, their decision-making in going abroad, and mentioning vaccination to people around. For more than half of respondents, if the top priority is citizens who are vaccinated first, there is no problem of the tourists' having the opportunity to be vaccinated in the respondents' home country. The vaccine policy of the country affects

the decision-making of respondents for going there. If the vaccine is not reachable by citizens or they aren't vaccinated, they prefer not to go there. The vast majority of respondents believe that if they are vaccinated abroad, they will share this experience with other people around and not hide it from anyone.

Table 4: Vaccination opportunity, decision-making, and sharing the experience

	Frequency	Percentage
10. What do you think about the tourists' having the opportunity to be vaccinated in your country?		
• If the top priority is citizens who are vaccinated first, there is no problem	24	52.1
• Positive	10	21.7
• Income for the country	5	10.8
• If we go abroad for the vaccine, they should be able to come here	2	4.34
• Negative	2	4.34
• No answer	2	4.34
• Shows the trust in our country and the vaccine	1	2.1
11. How does the vaccine policy (reaching vaccines) of the country for their citizens affect your decision-making process if you are thinking of going there?		
• No effect	5	10.8
• No answer	4	8.6
• No comment	1	2.1
• Indecisive	1	2.1
• The vaccine policy affects my decision	35	76
How the vaccine policy affects my decision in detail (# of concepts= 35)		
• If a vaccine is unreachable by citizens or they aren't vaccinated, I won't go	15	42.8
• It definitely affects my decision	6	17.1
• Has to be well-managed, the country should value its people	3	8.5
• Look at whom they prioritize for vaccination	2	5.7
• If the population is low, it will be easy to reach the vaccine	1	2.8
• Look at the statistics and the ratio of protection	1	2.8
• Whether they sell the vaccine	1	2.8
• Price, conditions in that country, and reachability	1	2.8
• Search for what type of advantages vaccination brings abroad	1	2.8
• To know the type of vaccines they offer	1	2.8
• Elderly, youngsters, and children	1	2.8
• Until vaccines are not giving any harm to people	1	2.8
• Whether people are properly vaccinated when the time comes for various ages	1	2.8

12. If you are vaccinated in another country, will you say this matter to people around you?

• I will share and say	36	78.2
• I will not say	7	15.2
• No answer	2	4.34
• Indecisive	1	2.17

5. Discussion

Although the majority of respondents are positive toward being vaccinated at the moment due to COVID-19, seven respondents do not prefer to be vaccinated and four respondents are indecisive, questioning the reliability of the vaccines and the effects of the virus in the long term. Although more than half of respondents tend to travel to another country where there is a supply of vaccines for foreigners, 30% of respondents do not want to travel even if they have the opportunity. On the other hand, tourism destinations such as Dubai, Cuba, the United States, and the Maldives offer vaccine preferences to travelers (Kucheran, 2021; Gilchrist, 2021) and vaccine passports (Shin et al., 2023). The majority of respondents think that various firms providing a selection of vaccines attract them to travel. Trusting in the vaccine, how the process continues, the quality of the vaccine, and the country of the firm is important for the respondents. According to Verger and Dubé (2020), trust in the healthcare system and the experts defining vaccination strategies influences vaccine acceptance.

Besides the international vaccine opportunities, in terms of sufficiency/insufficiency of financial opportunities for the trip, the vast majority of respondents think that they do not have sufficient income for this type of travel. Although 71% of respondents find vaccine tourism logical and positive in preserving society, attracting tourism, and the economy, some respondents find this type of tourism illogical, unethical, and only for the benefit of rich people. However, WHO (2021) emphasizes the vaccine gap between poor and rich countries and proposes the richer countries deliver an excess number of vaccines to poor regions of the world. Gilchrist (2021) mentions that the Maldives offer visitors vaccinations on arrival to stimulate the country's tourism industry. Dong et al. (2023) and Wong (2023) also mention improving the economic resilience of destinations in relation to vaccination. Interestingly, although 67% of respondents are enthusiastic about being vaccinated abroad in the future due to epidemic diseases, 27% are not positive about being vaccinated abroad.

There are several factors for the respondents while choosing the country for vaccine tourism. More than half of the respondents consider the number of cases, reliability issue, development of the health industry and the level of investment, and the success rate of vaccination while choosing the country for vaccine tourism. Surprisingly, only four respondents mention the financial opportunities of the country but they do not express how much the vaccine travel will cost them.

According to the responses, negative results outweigh the positive ones for vaccine travel. Although vaccine tourism supports the economy, increases the number of vaccinated people, flows the currency to the destination, and has the possibility to end the virus more quickly, there are unequal opportunities for rich and poor. However, Stankevic (2021) mentions the rise of vaccine tourism, whereby rich individuals travel around the world collecting vaccines. If the virus is not effective, the virus can spread fast due to the movement and mutations that can arise in the home country.

Concerning having equal opportunities for every individual for reaching vaccines, only half of respondents believe that there have to be equal opportunities for reaching vaccines. According to the other half, each person in the society is not equal and due to different priorities and attributes of individuals within the society, some citizens are up in the vaccination line. Su et al. (2021) mention that 90% of people surviving in lower-income nations may not reach vaccines until 2023 or later. Shankar (2021) states that traveling for a COVID-19 vaccine poses ethical challenges in terms of driving to another country, getting a vaccine, and returning home. It is arguable in the sense of unethical tourism. Several questions arise:

- Do people put themselves and others at risk as vaccine tourists?
- How do authorities solve the problem of creating unequal opportunities and unfair situations in vaccine tourism?
- How do organizations reach out to poor countries and let them have the vaccine?
- What do governments do in providing vaccines to citizens/travelers considering ethics and as Prideaux (2021) mentions how governments base policies on science and flexibility through their leadership?
- Can the military do something about distributing the vaccines in future major pandemics as Marzen (2021) proposes?

The majority of respondents are positive about the tourists having the chance to be vaccinated in the respondent's home country. However, 52%

of this majority believe that the citizens have to be vaccinated first no matter what. If they are not prioritized over the travelers, the respondent's opinion is negative. In the respondent's perspective, the patriotic feelings of being a citizen are high and human rights are essential.

The vaccine policy affects the decision-making of the majority of respondents in several ways if they are willing to go to that destination. If the vaccine is unreachable by citizens or they aren't vaccinated, the respondents prefer not to go there. According to the responses, the country should value its people, be careful about whom they prioritize for vaccination. Whether they sell the vaccine or not, affordability, stability in that country, and reachability are other key factors affecting the respondent's decision-making process. Moreover, 78% are comfortable enough to share their experience of being vaccinated in another country with other people but 15% prefer not to say due to ethical reasons and the creation of unethical opportunities.

6. Conclusion

This preliminary study aimed to analyze the perceptions of tourism management students of Generation Z about vaccine tourism who are unvaccinated, including an ethical consumerist perspective for understanding their consumption behavior toward vaccine tourism in the COVID-19 pandemic.

The key results reveal that the respondents are in favor of vaccine tourism in general except for their concerns about the reliability of the vaccine, the vaccination process, and the quality of the vaccine. Some respondents have ethical challenges in choosing where to be vaccinated and in which circumstances, they will be vaccinated, and also look for equality/fairness in the society throughout the vaccination process. The presentation of unequal opportunities for the rich and the discrimination among the other members of the society is vastly stated. Conversely, the vast majority of respondents are willing to share their experience of vaccine travel if they have the chance to go abroad. In this sense, their ethical considerations are superficial. Only one-seventh of respondents are unwilling to share their vaccine experience due to the vaccine gap and unfairness/inequality among the members of the society. The study enlightens the field of medical tourism in terms of vaccine tourism and ethical consumption of young generations for researchers and practitioners.

The exploratory study has a few limitations. The main focus was on vaccine tourism and the ethical consumerism of Generation Z in the pandemic. The sample is only from a foundation university with tourism

management students who are unvaccinated. The collection of data from the respondents was a hassle due to the pandemic. Future studies may focus on what Generation Z looks for in a pandemic outbreak, possibly forming measurement criteria in terms of understanding their consumer behavior towards health and vaccine tourism. Another study to explore is that how this generation's ethical consumerist behavior influences their decision-making process toward pandemic eras.

Acknowledgments

The authors thank the respondents of Generation Z for their contribution to this study.

No conflict of interest was reported.

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