

Sustainable Tourism Development in Times of Pandemic: Correlational Analysis Applied to Residents of a Portuguese Historic Town

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ABSTRACT

This study explores the relationships between different determinants of residents' support for sustainable tourism development (STD) and certain sociodemographic profile variables. A quantitative approach was used, based on a questionnaire applied over the internet to residents of a historic town in the north of Portugal. 250 valid questionnaires were obtained. In data analysis, descriptive statistics and correlational analysis were used. The results show that the levels of perception regarding the concepts under study are relatively low to moderate. There is a greater community attachment than community involvement, a more intense perception of the benefits than the costs of tourism, moderate support for the STD and a low economic dependence on the tourism sector. The results of the comparisons between the concepts under analysis and the sociodemographic profile variables showed the existence of several significant associations.

KEYWORDS

Community Involvement, Community Attachment, Economic Dependence, Tourism Impacts, Sustainable Tourism Development.

ARTICLE HISTORY

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1. Introduction

Some antecedents of supporting sustainable tourism development (STD) are addressed in this study, associated with the role of residents in the tourism planning and development process in the context of historic towns. It is relevant to analyse the perceptions of this stakeholder group regarding community involvement, community attachment, economic dependency, the perceived risk associated with COVID, tourism impacts and STD. Furthermore, this study also explores how sociodemographic factors explain residents' perceptions, especially with regard to their socio-cultural and environmental impacts and their support for tourism.

There are some studies that show that residents' perceptions of tourism impacts and their support for tourism development can be influenced by residents' demographic and socioeconomic characteristics (Mason & Cheyne, 2000; Tosun, 2002; Huh & Vogt, 2008; Long & Kayat, 2012; Stojković, Tepavcevic, Tepavceviclvana, BlesicShow, & Šimon, 2020; Serhane, Foufa, & Neglia, 2021). Understanding how these characteristics influence the determinants of residents' support for STD can help increase the knowledge held about the heterogeneity of local communities and the differences between their perceptions and attitudes towards tourism and, therefore, can contribute to the adoption of measures more adjustable to their specificities, in terms of planning and management of destinations (Long & Kayat, 2012). The provision of answers to these questions represents a very important information base prior to any tourism development project, especially in low-density territories.

From a correlational perspective, we seek to understand the links between some antecedents of (residents') support for STD and certain profile variables, using as a context of analysis the residents of a historical town in northern Portugal. Specifically, this study has two objectives: 1) To know residents' perceptions of the concepts of community involvement, community attachment, economic dependence, perceived risk associated with COVID, perceived benefits and costs, and support for STD, determining their degree/level; and 2) To correlate the concepts under study and analyse the existence of differences in residents' perceptions of these concepts, according to certain sociodemographic variables (gender, age, number of years living in the community, education, employment status, family members involved in the tourism sector, income).

In addition to this introduction, this article is divided into five sections: a brief literature review is carried out, followed by an explanation of the methodology used and then the results obtained are presented and discussed; finally, the conclusions and implications of the study are highlighted.

2. Literature Review

The United Nations World Tourism Organization (UNWTO) defines sustainable tourism as "Tourism that takes full account of its current and future economic, social and environmental impacts, addressing the needs of visitors, the industry, the environment and host communities" (UNEP & UNWTO, 2005, p. 12). Thus, the STD, due to its complexity, requires a transversal treatment with the development of projects and strategies that integrate the economic, social, cultural and environmental components (Kuvan & Akan, 2005; Cárdenas-García, Fernández, & Rivero, 2013). Both stakeholder involvement and strong political leadership are crucial for sustainable tourism development (Henriques, 2003; Ruhanen & Reid, 2014; Ferreira, Alén, & Liberato, 2018). It is a continuous system that implies permanent monitoring, adequate planning to local contexts and a fruitful and constant management of tourism activities.

The sustainable development of tourism activity and its relationship with local communities (and their support and attitudes towards tourism) have assumed increasing importance in the tourism literature. Residents of tourist destinations are the most affected by both policies and various tourism development measures, and this was especially felt during the pandemic caused by COVID-19. Residents' participation and support for such processes can go a long way in ensuring the sustainability of tourism.

In this context, the cooperation and participation of the local community are paramount for the success and sustainability of a tourism development project; thus, analysing residents' perceptions and engaging their support is of indispensable importance for local government, policymakers, and tourism businesses (Dyer, Gursoy, Sharma, & Carter, 2007; Lee, 2013; Styliadis, Biran, Sit, & Szivas, 2014). It is notable that the

participation of residents in destination planning is indispensable for sustainable development to subsist (Dyer, et al., 2007; Chen & Chen, 2010). It is, therefore, essential that the stakeholders of the process - local governments, politicians, heritage managers and companies involved understand the importance of this active involvement of the local population in this process (Gursoy & Rutherford, 2004; Soares, Emmendorfer, & Monteiro, 2013).

In view of the above, the study of the factors that influence the support (of residents) to STD is relevant in order to verify the implications that tourism activity provides to destination regions. The effects of tourism activity are multiple and are one of the most explored themes in the tourism literature (Gursoy & Rutherford, 2004; Nunkoo & Ramkisoon, 2010). In addition to perceived benefits and costs, the present study explores four factors that have also been studied in their association with residents' support for STD: community involvement, community attachment, economic dependence and perceived risk associated with COVID.

The support of residents and their levels of involvement and attachment to the community where they live are critical factors to ensure the success of the sustainable development of a given destination, as several studies have already concluded (Lee, 2013; Rodrigues, Vieira, Marques, & Teixeira, 2014; López, Virto, Manzano, & Miranda, 2018; Rodrigues, Vieira, Fernandes, & Pires, 2020). These studies have shown that residents who are involved and who have feelings of attachment towards their communities tend to have more positive perceptions towards the benefits of tourism and tend to act more actively to protect the sustainable development of destinations. On the other hand, when residents are economically dependent on the tourism sector, they also tend to emphasise the positive impacts over the costs associated with tourism, as well as support tourism development initiatives (Perdue et al., 1990; Ko & Stewart, 2002; García, Vázquez, & Macías, 2015).

Resulting from the pandemic situation caused by COVID-19 and its influence on the tourism industry, the residents' perception of risk during the pandemic has recently been the subject of academic interest (Vinerean, Opreana, Tileagă, & Popsa, 2021; Joo, Xu, Lee, Lee, & Woosnam, 2021), although there are still very few studies that analyse this issue (Vinerean et al., 2021). According to the authors, there is a large research gap on the impact of COVID-19 on the tourism industry overall and, more specifically, on tourists' behaviours and residents' perceptions of this difficult pandemic context.

Results of previous studies have been indicating that the sociodemographic profile (age, gender, education, income, employment status, etc.) of residents may (or may not) significantly influence their perceptions of tourism impacts and their support of tourism development (Long & Kayat, 2011), having presented mixed results in their findings. According to the authors, this inaccuracy can be attributed to the fact that different tourist destinations have different population characteristics and that tourism impacts are formed by community-specific conditions.

3. Methodology

A descriptive-correlational and cross-sectional study was conducted to achieve these objectives. As this is a descriptive research, we chose to use a questionnaire survey applied in an online format. In this study, the population/universe was composed of residents (for at least one year) of a historical town in northern Portugal. Due to cost and time constraints, the sample was based on the non-probability method, being selected by convenience (elements of the population with internet access and available to receive the questionnaire link).

Seven variables were assessed through the questionnaire: community involvement, community attachment, economic dependence, perceived risk associated with the COVID, perceived tourism benefits and costs, and support for STD. To this end, we selected previously used and tested scales, which were assessed using five-point Likert scales, from 1: totally disagree to 5: totally agree.

The concept of community involvement was operationalised based on Lee's scale (2013), with 5 items. Similarly, the concept of community attachment was measured based on the scale developed by Lee (2013), being composed of 11 items. The economic dependence was measured using the scale developed by Ribeiro, Pinto, & Silva (2017), which was composed of 4 items. The scale of perceived risk associated with COVID-19 was measured on a unidimensional scale with 4 items, based on the study of Joo et al.

(2021). The perceived benefits of tourism, with 12 items, and the perceived costs, measured through 8 items, were taken from the Látková & Vogt (2012) scale, based on the work developed by Perdue, Long and Allen (1990); Lankford and Howard (1994). One of the items of the tourism benefits scale was subdivided into two in adaptation to the context under analysis. Finally, support for STD was measured from Lee's (2013) 5-item scale, which was based on the work of Nicholas, Thapa and Ko (2009).

The measurement scales were translated and validated, and a pre-test was performed to check their adaptability to the study population. The questionnaire was applied online through an access link (sent by email and through social networks), and data collection took place between May and August 2021. A total of 250 valid questionnaires were obtained.

The analyses were performed using IBM SPSS (Statistical Package for the Social Sciences), version 26 for Windows. The following statistical tests were used to analyse the significance of the constructs' associations with the respondents' profile variables: Student's t-test (comparison of quantitative variables between two independent groups); ANOVA, followed by the Tukey HSD multiple comparisons tests (comparison of quantitative variables between more than two independent groups), Pearson's Correlation Coefficient (correlation between two quantitative variables), Spearman's Correlation Coefficient (correlation with ordinal variables). A 5% significance level was considered, that is, differences and associations were considered statistically significant when the significance value was less than 0.05 ($p < 0.05$).

4. Results

4.1 Sample Characterisation

The sample is composed by 250 residents in the town of Lamego for at least one year, aged between 18 and 68 years ($A = 38.3$, $SD = 14.9$). On average, they have lived in the municipality of Lamego for 27.7 years ($SD = 18.7$). The majority is female (63.6%) and has Higher Education (62.4%). The majority are employees (47.6%), students (32.0%) and self-employed (14.0%). With regard to the household, it is composed, on average, of 3.2 elements - 24.0% have a family member involved in the tourism sector. Of the 250 respondents, 18 (7.2%) belong to households with net monthly income up to 500 Euros, 65 (26.0%) from 501 to 1000 Euros, 56 (22.4%) from 1001 to 1500 Euros, 58 (23.2%) from 1501 to 2000 Euros and 53 (21.2%) with more than 2000 Euros (Table 1).

Table 1. Sample Characterisation

Variable		N	%
Genre	Female	159	63.6%
	Male	91	36.4%
Age	Min = 18, Max = 68, Mean value= 38.3, Standard deviation = 14.9		
Educational level	Primary education	8	3.2%
	Secondary education	86	34.4%
	Higher education	156	62.4%
Employment situation	Employee	119	47.6%
	Employee - self-employed	35	14.0%
	Domestic worker	6	2.4%
	Student	80	32.0%
	Retired	10	4.0%

Household's net monthly income	Up to 500 euros	18	7.2%
	From 501 to 1000 euros	65	26.0%
	From 1001 to 1500 euros	56	22.4%
	From 1501 to 2000 euros	58	23.2%
	More than 2000 euros	53	21.2%
Has a family member involved in the tourism sector	No	190	76.0%
	Yes	60	24.0%
Number of persons in household	Min = 1, Max = 6, Mean value = 3.2, Standard deviation = 1.0		
Number of years living in the municipality	Min = 1, Max = 68, Mean value = 27.7, Standard deviation = 18.7		

Source: Own Elaboration

4.2 Descriptive analysis: levels of perception of residents about the concepts under analysis

The following table shows the median, mean and standard deviation values, as well as the percentages above the mid-point (percentage of agreement with each statement - % of answers 4 and 5 - partial or total agreement) for the items of the concepts under analysis. The questions included in the questionnaire were presented with the possibility of response on a 5-point Likert scale: 1 = I totally disagree, 2 = I partially disagree, 3 = I neither agree nor disagree, 4 = I partially agree, 5 = I totally agree.

Table 2. Characterisation of the Items of the Scales of the Concepts under Analysis

Items ⁽¹⁾	% agrees ⁽²⁾	Median	Mean Value	SD
Community involvement		3.30	3.26	1.00
CI1. I participate in activities related to sustainable tourism	58.0%	4.00	3.49	1.32
CI2. I support research for sustainable development of this community	73.2%	4.00	4.05	1.20
CI3. I am involved in planning and managing sustainable tourism for this community	23.6%	3.00	2.63	1.32
CI4. I am involved in decision-making for sustainable tourism in this community	20.4%	2.00	2.43	1.33
CI5. I encourage residents of this community to invest in sustainable tourism	61.2%	4.00	3.68	1.30
Community attachment		3.90	3.65	1.02
CC1. The infrastructure and resources provided by this community are the best	37.6%	3.00	2.97	1.04
CC2. I prefer living in this community to other communities	63.2%	4.00	3.72	1.23
CC3. I like living in this community better than in other communities	62.8%	4.00	3.74	1.22
CC4. I can identify the way of life of this community	76.4%	4.00	4.04	0.99
CC5. I feel that this community is part of me	67.2%	4.00	3.87	1.18
CC6. Living in this community says a lot about who I am	57.2%	4.00	3.57	1.32
CC7. Living in this community means a lot to me	67.2%	4.00	3.89	1.17
CC8. I am very connected to this community	66.4%	4.00	3.84	1.26
CC9. I feel a strong sense of belonging to the community	64.0%	4.00	3.73	1.25
CC10. Many of my friends / family members prefer this community to other communities	59.6%	4.00	3.60	1.18
CC11. My friends/relatives would be disappointed if I went to live in another community	44.4%	3.00	3.21	1.33

Economic dependence		2.00	2.36	1.28
ED1. My family's economic future depends on tourism in this town	24.4%	2.00	2.33	1.36
ED2. Tourism in this town helps me to pay my bills	21.6%	2.00	2.22	1.36
ED3. I would benefit economically from more tourism in this town	31.6%	3.00	2.64	1.48
ED4. A part of my family's income is linked to tourism	24.4%	2.00	2.23	1.44
Perceived Risk		3.00	3.02	1.12
PR1. Incoming tourists increase my anxiety/stress related to COVID-19 prevention.	50.4%	4.00	3.12	1.37
PR2. Incoming tourists increase the risk of COVID-19 infection	59.6%	4.00	3.48	1.25
PR3. Incoming tourists increase inconvenience of town center activities	31.6%	3.00	2.82	1.26
PR4. Incoming tourists make me reduce my activity in the town center	30.0%	3.00	2.64	1.37
Perceived benefits		4.39	4.29	0.66
PB1. Improve the local economy	93.2%	5.00	4.56	0.74
PB2. Encourage the creation of more public infrastructure (e.g. roads, public facilities)	90.4%	5.00	4.43	0.83
PB3. Provide incentives for the creation of new green areas	85.6%	4.00	4.27	0.94
PB4. Provide jobs wanted by residents	82.4%	4.00	4.22	0.88
PB5. Encourage the protection and conservation of heritage resources	86.4%	5.00	4.40	0.86
PB6. To promote the restoration of historic buildings	88.8%	5.00	4.39	0.84
PB7. Help preserve cultural identity.	85.2%	5.00	4.38	0.91
PB8. Improve the offer of shopping, restaurants and entertainment areas	88.8%	4.00	4.30	0.86
PB9. Improving the quality of life	78.8%	4.00	4.16	0.96
PB10. Encourage the creation of more public spaces	83.6%	4.00	4.17	0.90
PB11. Increase the number of recreational/leisure activities for residents	80.8%	4.00	4.13	0.93
PB12. Contribute to increase income and quality of life	78.4%	4.00	4.10	1.00
PB13. Improve the physical appearance of the spaces	86.0%	4.00	4.29	0.83
Perceived costs		2.75	2.70	1.02
PC1. Lead to conflict between residents and tourists	30.4%	2.00	2.58	1.34
PC2. Cause a decrease in employment income in the tourism sector	26.0%	2.00	2.45	1.43
PC3. Increase the cost of living	38.4%	3.00	2.92	1.30
PC4. Cause more pollution	39.2%	3.00	2.80	1.40
PC5. Cause overcrowding in the community	27.6%	3.00	2.65	1.23
PC6. Increase property taxes unfairly	30.8%	3.00	2.64	1.38
PC7. Increase traffic problems	45.2%	3.00	3.01	1.44
PC8. Increase crime rates	28.0%	2.00	2.53	1.35
STD support		3.17	3.18	0.93
STDS1. I support the development of community-based sustainable tourism initiatives	76.8%	4.00	4.02	1.18
STDS 2. I participate in sustainable tourism-related plans	31.6%	3.00	2.82	1.27
STDS 3. I participate in cultural exchanges between (local) residents and visitors	26.4%	3.00	2.66	1.29
STDS 4. I cooperate in heritage tourism planning and development initiatives.	27.2%	3.00	2.62	1.30
STDS 5. I participate in promoting heritage education and conservation	33.6%	3.00	3.03	1.04
STDS 6. I comply with heritage protection standards to reduce the negative effects of tourism	70.8%	4.00	3.94	1.16

⁽¹⁾ Likert scale responses: 1 = Totally disagree, 2 = Partly disagree, 3 = Neither agree nor disagree, 4 = Partially agree, 5 = Totally agree;

⁽²⁾ percentage of response 4 and 5.

Source: Own Elaboration

The Community Involvement scale includes 5 items preceded by the sentence “Keeping in mind the UNESCO definition of sustainable tourism which states that sustainable tourism is “tourism that respects both the local population and travellers, as well as the cultural heritage and the environment”, how strongly do you agree with the following statements” (Table 2). More than half of the respondents stated (partially or totally agreed) that they participate in activities related to sustainable tourism (58.0% agreement, Median = 4.00, Mean value = 3.49, SD = 1.32), support research for sustainable development of this community (73.2% agreement, Median = 4.00, Mean value = 4.05, SD = 1.20) and encourage community residents to invest in sustainable tourism (61.2% agreement, Median = 4.00, Mean value = 3.68, SD = 1.30). Conversely, less than 1 in 4 respondents are involved in planning and managing sustainable tourism in the community (23.6% agreement, Median = 3.00, Mean value = 2.63, SD = 1.32) or in decision-making for sustainable tourism in the community (20.4% agreement, Median = 2.00, Mean value = 2.43, SD = 1.33).

With regard to the Community attachment scale, the answers to the scale questions show a strong connection to the community, with 9 of the 11 items having percentages of agreement higher than 50%, a median equal to 4 and a mean value greater than 3.5. The exceptions were the questions “The infrastructure and resources provided by this community are the best” (37.6% agreement, Median = 3.00, Mean value = 2.97, SD = 1.04) and “My friends/relatives would be disappointed if I went to live in another community” (44.4% agreement, Median = 3.00, Mean value = 3.21, SD = 1.33).

Regarding the Economic Dependence scale, 4 questions were included to assess the “dependence on the tourism industry”. The results show a low dependence on tourism with the percentages of agreement ranging from 21.6% (“Tourism in this town helps me pay my bills”) to 31.6% (“I would benefit economically from more tourism in this town”). Mean and median values close to 2 are also indicators of low dependence on tourism.

Perceived Risk included 4 items to assess the opinion on perceived risks in the face of the pandemic caused by COVID-19. The results show a higher risk perception on the items related to COVID-19 (50.4% agreed that tourist arrival increases anxiety/stress related to preventing COVID-19 and 59.6% that tourist arrival increases the risk of COVID-19 infection) and lower on the other items (31.6% agreed that tourist arrival increases inconvenience of town center activities and 30.0% that tourist arrival leads to reduced town center activity).

The Perceived Benefits scale includes 13 questions to assess the opinion on the economic, socio-cultural and environmental effects that tourism activity could bring to their community (place where they live). The results show a perception of high benefits from tourism activity with all questions having more than 75% agreement, a median equal to or greater than 4 and a mean greater than 4.

In relation to Perceived Costs, in general, there is a low perception of costs of the tourism activity, since all 8 questions on the scale had a percentage of agreement below 50%, with a median less than or equal to 3 and a mean less than 3. The increase in the cost of living (38.4% agreement, Median = 3.00, Mean value = 2.92, SD = 1.30), the increase in pollution (39.2% agreement, Median = 3.00, Mean value = 2.80, SD = 1.40) and the increase in traffic problems (45.2% agreement, Median = 3.00, Mean value = 3.01, SD = 1.44) were the most valued costs - they were the only ones with percentages of agreement close to 40% or higher.

Finally, Support for STD was assessed through the degree of agreement with 6 statements. The majority reported that they support the development of community-based sustainable tourism initiatives (76.8% agreement, Median = 4.00, Mean value = 4.02, SD = 1.18) and comply with heritage protection standards to reduce the negative effects of tourism (70.8% agreement, Median = 4.00, Mean value = 3.94, SD = 1.16). On the contrary, less than 35% participate in plans related to sustainable tourism (31.6% agreement, Median = 3.00, Mean value = 2.82, SD = 1.27), participate in cultural exchanges between (local) residents and visitors (26.4% agreement, Median = 3.00, Mean value = 2.66, SD = 1.29), cooperate in heritage tourism planning and development initiatives (27.2% agreement, Median = 3.00, Mean value = 2.62, SD = 1.30) and participate in promoting heritage education and conservation (33.6% agreement, Median = 3.00, Mean value = 3.03, SD = 1.04).

4.3 Correlations

In this subsection, a correlational analysis is carried out between the concepts under study and some sociodemographic variables of the residents who answered the questionnaire.

Community involvement (CI): The results in Table 3 show that the community involvement score increases with increasing age ($R = 0.225$, $p < 0.001$), number of years living in the municipality ($R = 0.210$, $p = 0.001$) and net monthly income ($R = 0.248$, $p < 0.001$). It was also found that the community involvement score is significantly higher for residents with Higher Education (Mean value = 3.39, SD = 1.00) than for those without Higher Education (Mean value = 3.03, SD = 0.95) ($p = 0.006$) and for residents who have family members involved in the tourism sector (Mean value = 3.57, SD = 1.01) compared to those without (Mean value = 3.16, SD = 0.97) ($p = 0.005$). Retirees (Mean value = 3.84, SD = 1.29) and the self-employed (Mean value = 3.78, SD = 1.12) had the highest community involvement scores - significantly higher than householders (Mean value = 2.53, SD = 1.09) ($p < 0.05$). There was no statistically significant association of Community Involvement with gender ($p = 0.263$).

Table 3. Associations with the Community Involvement (CI)

Variable		Mean value (SD)	p
Gender	Female (n = 159)	3.20 (0.95)	0.263 ⁽¹⁾
	Male (n = 91)	3.35 (1.07)	
Age	Pearson Correlation Coefficient	$R = 0.225$	< 0.001 ⁽³⁾
Number of years living in the municipality	Pearson Correlation Coefficient	$R = 0.210$	0.001 ⁽³⁾
Educational level	Primary/Secondary Education (n = 94)	3.03 (0.95)	0.006 ⁽¹⁾
	Higher Education (n = 156)	3.39 (1.00)	
Employment situation	Retired (n = 10)	3.84 (1.29) ^a	< 0.001 ⁽²⁾
	Employed - self-employed (n = 35)	3.78 (1.12) ^a	
	Employed - employee (n = 119)	3.26 (1.01) ^{ab}	
	Student (n = 80)	3.00 (0.73) ^{ab}	
	Domestic servant (n = 6)	2.53 (1.09) ^b	
Has a family member involved in the tourism sector	No (n = 190)	3.16 (0.97)	0.005 ⁽¹⁾
	Yes (n = 60)	3.57 (1.01)	
Household's net monthly income	Spearman Correlation Coefficient	$R = 0.248$	< 0.001 ⁽³⁾

⁽¹⁾ Student's T Test significance value; ⁽²⁾ ANOVA significance value; ⁽³⁾ significance value of the Pearson/Spearman Correlation coefficient.

^{a,b} no significant differences between groups with the same letter: $p > 0.05$ in the Tukey HSD multiple comparisons thesis.

Source: Own Elaboration

Community attachment (CA): Regarding the association of the Community Attachment score with the profile variables (Table 4), a positive correlation was observed with age ($R = 0.460$, $p < 0.001$), the number of years residing in the municipality ($R = 0.434$, $p < 0.001$) and household monthly net income ($R = 0.220$, $p < 0.001$). Community attachment is stronger among men (Mean value = 4.00, SD = 0.97) than women (Mean value = 3.56, SD = 1.01) ($p = 0.001$) and among residents with family members involved in tourism (Mean value = 4.00, SD = 0.85) compared to those without (Mean value = 3.63, SD = 1.05) ($p = 0.015$). The results also show that community attachment is weaker in students (Mean value = 3.04, SD = 0.88) - significantly lower ($p < 0.05$) than that recorded in the self-employed (Mean value = 4.33, SD = 1.00), retired (Mean value = 4.04, SD = 1.23) and employed (Mean value = 3.96, SD = 0.85). There was no statistically significant association between Community Attachment and education ($p = 0.526$).

Table 4. Associations with the Community Attachment (CA)

Variable		Mean value (SD)	p
Gender	Female (n = 159)	3.56 (1.01)	0.001 ⁽¹⁾
	Male (n = 91)	4.00 (0.97)	
Age	Pearson Correlation Coefficient	$R = 0.460$	< 0.001 ⁽³⁾
Number of years living in the municipality	Pearson Correlation Coefficient	$R = 0.434$	< 0.001 ⁽³⁾
Educational level	Primary/Secondary Education (n = 94)	3.67 (1.04)	0.526 ⁽¹⁾
	Higher Education (n = 156)	3.75 (1.00)	
Employment situation	Employed - self-employed (n = 35)	4.33 (1.00) ^a	< 0.001 ⁽²⁾
	Retired (n = 10)	4.04 (1.23) ^a	
	Employee (n = 119)	3.96 (0.85) ^a	
	Domestic servant (n = 6)	3.85 (0.99) ^{ab}	
	Student (n = 80)	3.04 (0.88) ^b	
Has a family member involved in the tourism sector	No (n = 190)	3.63 (1.05)	0.015 ⁽¹⁾
	Yes (n = 60)	4.00 (0.85)	
Household's net monthly income	Spearman Correlation Coefficient	$R = 0.220$	< 0.001 ⁽³⁾

⁽¹⁾ Student's T Test significance value; ⁽²⁾ ANOVA significance value; ⁽³⁾ significance value of the Pearson/Spearman Correlation coefficient.

^{a,b} no significant differences between groups with the same letter: $p > 0.05$ in the Tukey HSD multiple comparisons thesis.

Source: Own Elaboration

Economic Dependence (ED): Regarding the association of the profile variables with Economic Dependence (Table 5), the results show that the mean Economic Dependence score was significantly higher ($p < 0.001$) in residents who have family members involved in the tourism sector (Mean value = 3.58, SD = 1.19) than in residents who do not (Mean value = 1.97, SD = 1.06). A significant association was also found with work status ($p < 0.001$): the Economic Dependency score was higher in the self-employed (Mean value = 3.32, SD = 1.39) and lower in students (Mean value = 2.10, SD = 1.05) - the differences were significant between these two groups ($p < 0.05$), but not between the other groups. There was no statistically significant association of Economic Dependence with the remaining profile variables ($p > 0.05$).

Table 5. Associations with Economic Dependence (ED)

Variable		Mean value (SD)	p
Gender	Female (n = 159)	2.28 (1.24)	0.239 ⁽¹⁾
	Male (n = 91)	2.48 (1.35)	
Age	Pearson Correlation Coefficient	$R = 0.102$	0.106 ⁽³⁾
Number of years living in the municipality	Pearson Correlation Coefficient	$R = 0.096$	0.132 ⁽³⁾
Educational level	Primary/Secondary Education (n = 94)	2.47 (1.29)	0.278 ⁽¹⁾
	Higher Education (n = 156)	2.29 (1.28)	
Employment situation	Employee - self-employed (n = 35)	3.32 (1.39) ^a	< 0.001 ⁽²⁾
	Domestic servant (n = 6)	2.58 (1.06) ^{ab}	
	Employee (n = 119)	2.25 (1.27) ^{ab}	
	Retired (n = 10)	2.23 (1.55) ^{ab}	
	Student (n = 80)	2.10 (1.05) ^b	

Has a family member involved in the tourism sector	No (n = 190)	1.97 (1.06)	< 0.001 ⁽¹⁾
	Yes (n = 60)	3.58 (1.19)	
Household's net monthly income	Spearman Correlation Coefficient	$R = -0.077$	0.228 ⁽³⁾

⁽¹⁾ Student's T Test significance value; ⁽²⁾ ANOVA significance value; ⁽³⁾ significance value of the Pearson/Spearman Correlation coefficient.

^{a,b} no significant differences between groups with the same letter: $p > 0.05$ in the Tukey HSD multiple comparisons thesis.

Source: Own Elaboration

Perceived Risk (PR): Concerning Perceived Risk (Table 6), a significant association was only found with employment status ($p = 0.012$): the average score of this dimension was higher among the self-employed (Mean value = 3.54, SD = 1.13) and lower among the retired (Mean value = 2.58, SD = 1.50) - the differences were significant between these two groups ($p < 0.05$), but not between the remaining groups.

Table 6. Associations with Perceived Risk (PR)

Variable		Mean value (SD)	p
Gender	Female (n = 159)	3.09 (1.07)	0.194 ⁽¹⁾
	Male (n = 91)	2.90 (1.19)	
Age	Pearson Correlation Coefficient	$R = 0.088$	0.164 ⁽³⁾
Number of years living in the municipality	Pearson Correlation Coefficient	$R = 0.107$	0.092 ⁽³⁾
Educational level	Primary/Secondary Education (n = 94)	3.01 (1.14)	0.968 ⁽¹⁾
	Higher Education (n = 156)	3.02 (1.11)	
Employment situation	Employee - self-employed (n = 35)	3.54 (1.13) ^a	0.012 ⁽²⁾
	Domestic servant (n = 6)	3.42 (1.33) ^{ab}	
	Employee (n = 119)	3.02 (1.13) ^{ab}	
	Student (n = 80)	2.81 (0.94) ^{ab}	
	Retired (n = 10)	2.58 (1.50) ^b	
Has a family member involved in the tourism sector	No (n = 190)	2.96 (1.13)	0.136 ⁽¹⁾
	Yes (n = 60)	3.20 (1.04)	
Household's net monthly income	Spearman Correlation Coefficient	$R = 0.007$	0.909 ⁽³⁾

⁽¹⁾ Student's T Test significance value; ⁽²⁾ ANOVA significance value; ⁽³⁾ significance value of the Pearson/Spearman Correlation coefficient.

Source: Own Elaboration

Perceived Benefits (PB): With regard to Perceived Benefits (Table 7), there was only a significant association with age ($R = 0.198$, $p = 0.002$) and with the number of years living in the municipality ($R = 0.191$, $p = 0.002$): the tendency for perceived benefits to increase with increasing age and the number of years living in the municipality.

Table 7. Associations with Perceived Benefits (PB)

Variable		Mean value (SD)	p
Gender	Female (n = 159)	4.30 (0.63)	0.834 ⁽¹⁾
	Male (n = 91)	4.28 (0.72)	
Age	Pearson Correlation Coefficient	$R = 0.198$	0.002 ⁽³⁾
Number of years living in the municipality	Pearson Correlation Coefficient	$R = 0.191$	0.002 ⁽³⁾
Educational level	Primary/Secondary Education (n = 94)	4.20 (0.69)	0.101 ⁽¹⁾
	Higher Education (n = 156)	4.35 (0.65)	

Employment situation	Employed - self-employed (n = 35)	4.43 (0.54)	0.149 ⁽²⁾
	Employed - employee (n = 119)	4.35 (0.62)	
	Retired (n = 10)	4.34 (1.20)	
	Domestic servant (n = 6)	4.23 (0.53)	
	Student (n = 80)	4.14 (0.69)	
Has a family member involved in the tourism sector	No (n = 190)	4.29 (0.69)	0.905 ⁽¹⁾
	Yes (n = 60)	4.30 (0.58)	
Household's net monthly income	Spearman Correlation Coefficient	$R = 0.072$	0.254 ⁽³⁾

⁽¹⁾ Student's T Test significance value; ⁽²⁾ ANOVA significance value; ⁽³⁾ significance value of the Pearson/Spearman Correlation coefficient.
Source: Own Elaboration

Perceived Costs (PC): With regard to Perceived Costs (Table 8), significant differences were only found with regard to work situation ($p = 0.013$): residents working as "domestics" (Mean value = 3.52, SD = 0.66) were those with the highest average score and retired people (Mean value = 1.94, SD = 1.04) those with the lowest average - with significant differences between them ($p < 0.05$).

Table 8. Associations with Perceived Costs (PC)

Variable		Mean value (SD)	p
Gender	Female (n = 159)	2.65 (1.03)	0.361 ⁽¹⁾
	Male (n = 91)	2.77 (0.98)	
Age	Pearson Correlation Coefficient	$R = -0.040$	0.526 ⁽³⁾
Number of years living in the municipality	Pearson Correlation Coefficient	$R = -0.037$	0.558 ⁽³⁾
Educational level	Primary/Secondary Education (n = 94)	2.75 (1.02)	0.512 ⁽¹⁾
	Higher Education (n = 156)	2.66 (1.01)	
Employment situation	Domestic Worker (n = 6)	3.52 (0.66) ^a	0.013 ⁽²⁾
	Employee - self-employed (n = 35)	2.90 (0.98) ^{ab}	
	Employee (n = 119)	2.74 (1.02) ^{ab}	
	Student (n = 80)	2.57 (0.98) ^{ab}	
	Retired (n = 10)	1.94 (1.04) ^b	
Has a family member involved in the tourism sector	No (n = 190)	2.63 (1.01)	0.085 ⁽¹⁾
	Yes (n = 60)	2.89 (1.02)	
Household's net monthly income	Spearman Correlation Coefficient	$R = 0.028$	0.654 ⁽³⁾

⁽¹⁾ Student's T Test significance value; ⁽²⁾ ANOVA significance value; ⁽³⁾ significance value of the Pearson/Spearman Correlation coefficient.
^{a,b} no significant differences between groups with the same letter: $p > 0.05$ in the Tukey HSD multiple comparisons thesis.
Source: Own Elaboration

STD support (STDS): The results in Table 9 show that support for STD is stronger in residents who have family members involved in the tourism sector (Mean value = 3.59, SD = 0.92) than in residents who do not (Mean value = 3.05, SD = 0.90) ($p < 0.001$). Significant differences were also found with respect to work status ($p = 0.023$): the DTS Support score was highest in the self-employed (Mean value = 3.60, SD = 1.06) and lowest in the 'domestic' residents (Mean value = 2.53, SD = 0.99) - the differences were significant between these two groups ($p < 0.05$), but not between the other groups. There was no statistically significant association of DTS Support with the remaining profile variables ($p > 0.05$).

Table 9. Associations with STD Support

Variable		Mean value (SD)	<i>p</i>
Gender	Female (n = 159)	3.13 (0.91)	0.263 ⁽¹⁾
	Male (n = 91)	3.27 (0.97)	
Age	Pearson Correlation Coefficient	<i>R</i> = 0.095	0.135 ⁽³⁾
Number of years living in the municipality	Pearson Correlation Coefficient	<i>R</i> = 0.095	0.136 ⁽³⁾
Educational level	Primary/Secondary Education (n = 94)	3.11 (0.88)	0.331 ⁽¹⁾
	Higher Education (n = 156)	3.23 (0.96)	
Employment situation	Employed - self-employed (n = 35)	3.60 (1.06) ^a	0.023 ⁽²⁾
	Retired (n = 10)	3.30 (1.05) ^{ab}	
	Employee (n = 119)	3.15 (0.92) ^{ab}	
	Student (n = 80)	3.08 (0.82) ^{ab}	
	Domestic servant (n = 6)	2.53 (0.99) ^b	
Has a family member involved in the tourism sector	No (n = 190)	3.05 (0.90)	< 0.001 ⁽¹⁾
	Yes (n = 60)	3.59 (0.92)	
Household's net monthly income	Spearman Correlation Coefficient	<i>R</i> = 0.103	0.105 ⁽³⁾

⁽¹⁾ Student's T Test significance value; ⁽²⁾ ANOVA significance value; ⁽³⁾ significance value of the Pearson/Spearman Correlation coefficient.

^{a,b} no significant differences between groups with the same letter: *p* > 0.05 in the Tukey HSD multiple comparisons thesis.

Source: Own Elaboration

5. Discussion

In this study, there is a significant association between gender and community attachment, i.e. male residents showed a stronger attachment to the community where they live. Serhane et al. (2021) conclude that gender is a significant variable in explaining differences in support for tourism development and perception of tourism impacts, with males demonstrating higher perceptions than females. These results are in agreement with other studies available in the literature (Sheldon & Var, 1984; Mason & Cheyne, 2000; Tosun, 2002; Huh & Vogt, 2008). In addition, this result may have to do with the fact that we are dealing with a very traditional community with cultural rituals typical of this type of communities, where the experience of the public space is still very much linked to the male gender. Regarding age, the results show that the older the residents are, the more involved they seem to be in their community and the more attached they are with the community where they live. This result contradicts that obtained in the study by Serhane et al. (2021), in which it was concluded that residents between the ages of 19 and 30 tend to be more likely to participate in the development of tourist activities.

Several studies make reference to the relevant role that education plays in the perception of tourism impacts (McCool & Martin, 1994; Teye, Sönmez, & Sirakaya, 2002). In the case of the study conducted by Serhane et al. (2021) the same revealed that people with higher education tend to be less enthusiastic about the negative impacts of tourism on the environment than those with lower levels of education. The study by Long and Kayat (2011) on the other hand evidences that residents with higher education tend to appreciate the positive impacts of tourism and disapprove of its negative impacts. In the case of the present study the educational level variable only showed a statistically significant association with community involvement, i.e. such involvement tends to be stronger in respondents who hold higher education.

The results suggest that respondents who have lived longer in the town tend to be more involved, more attached and perceive the benefits of tourism more intensely. These results are in line with other studies (McCool & Martin, 1994; Nunkoo & Gursoy, 2012).

In this study, the two profile variables which obtained more significant associations with the concepts under analysis were the "employment situation" and the "existence of family members involved in the tourism sector". With regard to employment status, several positive and significant associations were found with:

- 1) Support for STD (stronger in the self-employed);
- 2) Perceived costs (domestic respondents tend to perceive costs more than retirees who tend not to value costs);
- 3) The perceived risk associated with COVID-19 (higher among the self-employed and lower among the retired). To our knowledge, this is the first study to address this concept in terms of its association with sociodemographic characteristics. Although there are no studies confirming this result, it nevertheless seems to make sense since the self-employed are the ones who most depend on this sector directly or indirectly. And, as is common knowledge, they were the first to feel the effects of the measures that were taken during the various phases of the pandemic;
- 4) Economic dependence (higher score for self-employed and lower score for students);
- 5) Community attachment [weaker in students, which may be related to residence time, since residence time is significantly lower in this category and, as observed in other studies (Lankford & Howard, 1994; McCool & Martin, 1994; Sheldon & Var, 1984), residence time is one of the factors that increases community attachment]; and
- 6) Community involvement (retired and self-employed people tend to be more involved in the community).

Regarding the existence of family members involved in the tourism sector, there is a positive and significant association with: 1) support for STD, i.e. residents who have family members involved in the tourism sector naturally tend to support its development more expressively than the other residents; 2) economic dependence; 3) community attachment; and 4) community involvement. Several studies corroborate this result (Perdue et al., 1990; Ko & Stewart, 2002; McDowall & Choi, 2010; Long & Kayat, 2011).

Finally, with regard to income, there was only a statistically significant relationship with community attachment, i.e. residents with higher monthly household incomes tended to be more attached to their community. The results of Long and Kayat's (2011) study suggest that residents with middle/higher incomes tended to favour tourism and support tourism development, while residents earning lower incomes were less supportive of tourism development.

6. Conclusion

One of the objectives of this study is related to the analysis of the perceptions of the residents of a historical town about the concepts of community involvement, community attachment, economic dependence, impacts of tourism, perception of risk associated to COVID and support for STD. The aim was to understand the perceptions of the residents of this historic town, located in a low-density territory, about these concepts and their specific evaluation of their support for STD. In summary, the results of this study suggest that the residents who responded to the questionnaire demonstrated a strong attachment to the community, and that they perceive, more intensely, the benefits than the costs associated with tourism. Moderate scores were found regarding support for STD, community involvement and perceived risk associated with COVID-19. Respondents showed low economic dependence on the tourism sector.

As for the second objective, which aimed at correlating the concepts under analysis and analysing the existence of differences in the residents' perceptions of these concepts according to certain sociodemographic variables, we tried to understand whether residents with different characteristics have different perceptions of certain antecedents of STD support. It was found that several sociodemographic characteristics of respondents significantly influence residents' perceptions of the concepts under study; however, there are differences in perceptions according to certain profile variables, as discussed in the previous section. In the context of this objective it was also possible to understand which profile variables contribute most to explain residents' support for the STD, specifically, employment status and the existence of family members involved in the tourism sector.

It is believed that this study contributes to the development of research in the field of STD, and, therefore inclusive in its application to historic cities in low-density territories. Research on the role of residents in STD is still relatively scarce, especially in cities where the tourism sector has not yet caused very significant negative impacts.

It is considered that the results of this study provide an additional contribution to local authorities, policymakers and managers of public and private companies, among other stakeholders, linked to this sector of activity. The results seem to suggest that the vast majority of respondent residents are not involved in the planning and management of their territory and are only moderately supportive of STD. This fact, in itself, represents a huge weakness since as is well known, participatory approaches through the “shared vision” are the only way for there to be STD.

This study has some limitations that may be addressed in future research. All variables under analysis were measured from the perceptions of the same key informant, so there are risks associated with the variance of the common method. Similarly, obtaining the perceptions of other stakeholders can be pointed out as a suggestion for future research. In this study, the results point to several significant associations between factors contributing to support for STD and certain variables of residents' sociodemographic profile, which should be taken into account in STD initiatives. In addition to being able to apply this study to other stakeholder groups, it is also suggested in future research that these relationships be explored using more complex statistical methods. A further limitation stems from the use of a convenience sample, which implies that the results are not generalisable to other towns and regions. On the other hand, the application of the questionnaire via the internet may have restricted the sample and may not be sufficiently adequate to cover higher age groups and those with lower qualifications.

In future studies, other profile variables could have been proposed, and their correlation with the concepts under analysis tested. Furthermore, in order to collect more insightful and complete information on residents' perceptions and attitudes and behaviours, considering their profile characteristics, it would be important that qualitative and extended in time studies be developed.

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