

Research Paper

Level of Anxiety and Its Impact on Intentions to out of Home Behaviour During COVID-19

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ABSTRACT

The spread of Covid-19 pandemic came out with mammoth risk and challenges to human life. If the infectious virus is a life threatening risk then the produced circumstance are affecting psychologically. Fear and anxiety are commonly observed psychological disorders around the World during Covid-19 pandemic (Cullen et al., 2020; Lee et al., 2020; Salehi et al., 2020; Gritsenko et al., 2020). Travel intentions are adversely affected during the spread of virus. Anxiety among travellers has emerged a crucial psychological disorder responsible for affecting travel decisions. This study examines the role of anxiety on intentions to travel in the post lockdown. Further, role of social distancing which is considered a crucial measure to avoid the spread of Covid-19 is examined to determine the intentions to go out. A sample of 304 respondents who experienced travel in unlock down phase, are employed. The study resulted mild (22.0%), moderate (35.9) and high (37.2 %) level of anxiety among the people. Social distancing is found the significant predictor to increase intention to go out and decrease anxiety during pandemic. However, the effect of anxiety on intention to go out is insignificant. This study concludes that adoption of social distancing norms make the traveller confident to travel and reduces the level of anxiety.

Keywords: *Anxiety, Covid-19, pandemic, travel behaviour, social distancing*

Outbreak of Covid-19 plays a significant role in altering human behaviour. Apart from the health issues, the spread of deadly (e.g. Imran, Zeshan, & Pervaiz, 2020) is also responsible to lead psychological disorder among people. Anxiety, fear and stress were commonly observed psychological affliction during the Covid-19 pandemic (Kamble, Joshi, Kamble, & Kumari, 2022). In the beginning of Covid-19 spread when there was no effective remedy to prevent its spread, affected Nations mandated the Covid-19 protocol to its citizen. Covid protocol includes physical distancing (social distancing) among people,

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Level of Anxiety and Its Impact on Intentions to out of Home Behaviour During COVID-19

lockdown, travel restrictions and forbidding public gatherings (De Vos, 2020). The spread of virus was rapid and it was causing an acute infectious pneumonia (Bao, et al., 2020). Therefore, to avoid social gatherings educational institutions, parks, theatre, clubs and leisure activities etc. were completely closed.

In the initial phases of lockdown it was welcomed by the people. Also, lockdown and restrictive measures were supported by health and medical bodies. In India, Government imposed the nationwide lockdown in March 2020 which was continued in the affected regions until the announcement of Unlock 1.0 in June 2020. Lockdown and restrictions lead multiple challenges in the life of common people. Except the emergency case travelling in all forms were completely restricted. Public transport was halted for a long period and people were not even allowed to move out form their home. Such horrific situation was never experienced by the current generation in India. These massive changes in routine life due to lockdown and restrictions adversely affected people's behaviour. Even though it gave enough time to spend with family and to get relaxed. Long extended lockdown and restrictions caused multiple health issues and psychological disorder.

Closure of economic activities and shutdown of companies emerged as a havoc on the life of people. Even after getting the aids and support from public and private institutions people were worried about their future. They wanted to come out from the darkest and dangerous phase of their life. Therefore, Government of India decided to lift the lockdown restrictions in the phased manner. It was an essential step to revive the country's economic growth and to give people a chance to return back on their work. But the fear of corona virus and compulsion to follow Covid protocol affected people intention to go out. Also, there were people having no choice to stay at home. Either the nature of work or due to some emergency a large number of Indian populations wanted to come out. Therefore, considering the importance of different activities Government uplift the travel ban from the people engaged in emergency and essential activities including production in manufacturing units, healthcare workers and agriculture labourers. Later, workers and employees engaged in other sectors were permitted to attend their respective offices if it was not in Covid-19 contaminated zone. Gradually India relaxes lockdown restrictions and announced Unlock 1.0 (Ministry of Home Affairs, 2021) in the first week of June.

Even though Government started giving relaxation in restricted measures and allowed re-opening of more and more activities by issuing unlock guidelines, fear of Covid-19 infection remained constant. And the fear was noticed in travel behaviour. People avoided to use public transport and preferred to use personal vehicle. For, long distant destination, hired taxi service was preferred over the use of public transport. Aside from the travel destination, duration or purpose of travel, fear of getting infected by Covid-19 was commonly observed among travellers. Challenges to follow Covid-19 protocol while stepping out make the travel more strenuous and lead anxiety among travellers.

Research undertaken in various contexts (e.g., Imran, Zeshan, & Pervaiz, 202; Kamble, Joshi, Kamble, & Kumari, 2022) examined the psychological effects of the COVID-19 pandemic. These research' conclusions supported the notion that the conditions brought on by the pandemic are what cause psychiatric disorders in the general population, patients, healthcare workers, children, expectant mothers, and elderly persons (Q. Chen et al., 2020; Yang et al., 2020; Li et al., 2020). There aren't many studies in the literature on teenagers' mental health during the pandemic (Kilincel et al., 2020). The study concludes that anxiety, fear, and worry are only a few of the psychological effects that public health emergencies

Level of Anxiety and Its Impact on Intentions to out of Home Behaviour During COVID-19

can have on college students (Mei et al., 2011). Additionally, a sizable number of studies (Shakibaei 2021; Beck and Hensher, 2020; Elsayeh, 2020; Khaddar and Fatmi, 2021; Abdullah et al., 2020; Parady 2020) assessed travel behavior during the Covid-19 outbreak and concluded that people not only shifted the mode of transport but also consider Covid related factors while choosing the mode of transport. Change in the purpose of travelling (Abdullah et al., 2020), travel frequency, attitude, activities and individual characteristics (Irawan et al., 2021) are the other important aspects of travel behaviour explored in the context of Covid-19 so far.

De Vos (2020) stated that explanation about the effect of covid-19 is limited to literature. However, researcher around the World initiated the studies to examine the effect of Covid-19 on people's life. This study is an effort to uncover the truth about anxiety and people intentions to go out in the post lockdown phase (Unlock) of Covid-19 pandemic. First, level of anxiety and reflection of Covi-19 pandemic is measured by using a GAD-7 scale adapted from the study of Spitzer et al. (2006). Further, study examines the role of Covid-19 protocol especially social distancing in determining travel decision. More specifically it underlined psychological condition and its influence on travel decisions. Later the study suggests alternative and preventive means to overcome the hindrances occurred due to travel via public transport.

The rest of the paper addressed literature review, research methodology, data analysis and results. Research methodology consists development of survey instrument, data collection, and data analysis. Based on analysis results are drawn and presented in the form of discussion, conclusion and managerial implication. At the end of this paper, limitation and future research directions are presented.

LITERATURE REVIEW

In this section, conceptual framework is addressed and hypotheses are developed. Relevant literature on three important concepts i.e. anxiety, social distancing, and travel behaviour are explored and reported. The developed hypothesis are also depicted in Figure 1.

Anxiety during the outbreak of Covid-19 pandemic

Pandemic and anxiety have a well-established link. Past research examined the impact of pandemics like the "Swine Flu" on public fear. According to a study, when the WHO declared the "Swine Flu" to be a pandemic in 2009, there was a significant amount of public fear (Tausczik et al., 2012). Another study conducted in Singapore found that the "Swine Flu" had a negative impact on public anxiety, with many reporting significant levels of fear (Quah and Hin-Peng, 2004). According to a research by Rubin et al. (2009), persons in the UK who read or received the government's swine flu pamphlet reported feeling quite anxious. A study by Bults et al. (2011) found a strong correlation between people's reported severity and anxiety, as well as a relationship between anxiety and perceived relentlessness.

Research verified the cases of anxiety reported worldwide during the Covid-19 epidemic. Research is continuously looking at cases of anxiety related to the Covid-19 outbreak, whether they are in India (Roy et al., 2020), the Philippines (Talidong et al., 2020), Ireland (Hyland et al., 2020), or the United States (Mann et al., 2020). According to Salari's (2020) research, 63,439 studies from the general population were used to sample 17 studies that looked at the prevalence of anxiety. Kilincel et al.'s (2020) study on student anxiety argued that anxiety was exacerbated by home quarantines and school closures during pandemics. In their analysis of the psycho-social consequences of the Covid-19 pandemic on the broader

Level of Anxiety and Its Impact on Intentions to out of Home Behaviour During COVID-19

populace, Solomou and Constantinidou (2020) found protective and risk variables that are associated with changes in mental health status. This scale was used by Cao et al. (2020) to gauge how the Covid-19 pandemic affected college students psychologically. Correlation analysis results from the Cao et al. (2020) study showed that anxiety symptoms were positively correlated with effects on everyday living, the economy, and academic activity delays. People's awareness of coronavirus news has been linked to an increase in the intensity and degree of anxiety symptoms (Moghanibashi-Mansourieh, 2020). The psychological dynamics of students during the COVID-19 lockdown, its effects, and students' coping mechanisms were further investigated by Faize and Husain (2020). This study verified that students' anxiety levels varied. While the majority of students reported having little anxiety, 8.2% reported having significant anxiety. Zheng et al. (2020) also looked into anxiety using the SOR framework to explore the ways that psychological distance and lockdown procedures affected social anxiety in the area affected by the pandemic. They came to the conclusion that psychological distancing played a mediating role in the buffering effect that lockdown measures had on social anxiety in pandemic zones.

Anxiety during Covid-19 and travel behaviour

To manage Covid-19 crisis, lockdown restrictions along with travel ban were strictly imposed. It restricted public gatherings and helped to prevent the spread of virus. However, lockdown restriction threatened the harmful effect of Covid-19 on social anxiety (Zheng et al., 2020; Luo and Lam, 2020). Lockdown effect on travel behaviour was noticed (Parady, 2020), less involvement in travel activity, including the change in travelling pattern and even selection of transportation mode was affected (Singh et al., 2020; De Vos, 2020). It is noticed that even in unlocking phase people prioritised own vehicle and avoided the use of public transport or shared vehicle (Abdullah et al., 2020; Pawar et al., 2020). De Vos (2020) addressed the change in behaviour and its effect on health and well-being. As far as travel behaviour is concerned purpose of travel, mode of transportation, travelling distance, and frequency of trips are the key changes observed before and during the pandemic (Abdullah et al., 2020).

Beck and Hensher (2020) evaluate the effect of COVID-19 on household travel and activities in Australia. This study, which was carried out at the height of Australia's social distancing policies, revealed that people's travel habits changed as a result of the Covid-19 epidemic. Elsayeh (2020) in the context of Egypt concluded that even though Covid-19 badly affected the travel and tourism activities, its revival will be faster. Respondents in the study (Elsayeh, 2020) showed positive and strong intention to travel travel immediately after Covid-19 pandemic end with new travel preferences. During COVID-19, Khaddar and Fatmi (2021) looked into how travel activity and sociodemographic traits related to daily activity engagement affected travel satisfaction. The study found that travel for routine shopping, leisure activities, and domestic duties positively impacts travel enjoyment while generating separate latent segments. Utilizing walking and bicycling as forms of transportation showed a better likelihood of producing satisfied travellers.

Addressing the psychological effects of COVID-19 on travel behavior, Singh et al. (2020) discovered that a considerable proportion of people switch from shared space modes of transportation to private modes of transportation following the pandemic because they place a higher priority on physical distance, mask use, and other related behaviors. According to this study, over 80% of the participants experienced tension and anxiety, which may have an effect on how they drive.

Level of Anxiety and Its Impact on Intentions to out of Home Behaviour During COVID-19

In terms of the relationship between anxiety and travel behavior, it can be stated that as a traveler's anxiety rises, so does their perception of safety and desire to travel. Previous research has examined travel anxiety as a potential risk factor while making travel-related decisions (Reisinger and Mavondo, 2005). Additionally, according to literature, feelings of concern, anxiety, fear, and nervousness are all considered to be perceived risks (Reisinger and Mavondo, 2005; Rittichainuwat and Chakraborty, 2009). However, there is no hard data about the impact of pandemic lead fear on decision-making when it comes to travel. Nonetheless, research indicates that making decisions about travel is difficult (Quintal et al., 2010). Therefore, following hypothesis is formulated.

H1: The anxiety has negative impact on public intention to go out during covid-19 pandemic outbreak.

Social distancing and travel behaviour

“Social distancing” was the term widely used in the context of Covid-19 pandemic. It is referred to reduce interactions between individuals and to maintain at least a one metre distance while meet physically. Social distancing diminishes the risk of infection while coughing, sneezing and speaking in gatherings (WHO, 2020 and De Vos, 2020). Research claimed that Social distancing measures have important effects on activity participation (De Vos, 2020). It was anticipated that during periods of social alienation, people would travel less and perhaps choose to use private transportation in order to reduce the danger involved with using public transportation (De Vos, 2020). According to Beck and Hensher (2020) and Fenichel (2013), social separation and travel should be prioritized in order to stop the virus. According to research conducted by the University of Southern Denmark in 2020, social distancing has a significantly greater effect on postponing the pandemic peak than it does on controlling the COVID-19 catastrophe. Additionally, this study found that social isolation works better to stop the spread of Covid-19 than travel restrictions. Travel demand was not at pre-Covid levels during the unlocking phase, when individuals began to travel for a variety of reasons, but their continual fear of contracting the disease prevented them from doing so. It was correctly noted by Pawar et al. (2020) that commuters ceased traveling due to travel restrictions and social separation, which dramatically decreased the demand for travel. Travel opportunities were diminished by the abrupt shift in everyday activities, particularly those that took place outside the home. Travel of all kinds has significantly decreased as a result of the Covid-19 pandemic (Beck and Hensher, 2020).

De Vos (2020) examined the possibility that social separation could affect the choice of travel mode. Additionally, according to Troko et al. (2011), people may choose to avoid public transportation since it may be difficult to prevent interaction with other passengers and because it may serve as a breeding ground for viruses. When discussing how Covid-19 has affected social, recreational, and leisure (SLR) activities According to Shakibaei et al. (2021), there seems to be a significant shift in the patterns of travel and transportation mobility. Research observed the shift in the means of transportation used for travel during the post-lockdown period. As per Bhaduri et al. (2020), travel behavior has been influenced by lockdown measures; yet, individuals have selected a particular mode above others based on certain considerations that exist outside the lockdown time. According to Zafri et al. (2021), more motorbikes were bought during the post-lockdown phase than during the pre-covid era. They also came to the conclusion that during the Covid-19 pandemic, travel intentions were negatively impacted by risk perception of corona virus transmission, which is a significant factor in determining modal choice in the new normal (Peric et al., 2021). It is evident from a study of the literature that social separation affects behavioral intentions.

Level of Anxiety and Its Impact on Intentions to out of Home Behaviour During COVID-19

However, behavioral intentions alter as a result of social distancing depending on how serious and important the issue is. Additionally, different segments adhere to social distance rules differently. Furthermore, there is little indication of perfect adherence to social distance guidelines being followed consistently by the general public (Coroiu et al., 2020). Therefore, it has substantial merit to examine the role of social distancing on people intention to go out during the outbreak of Covid-19. The hypothesis formulated to examine this relationship is stated as H2.

H2: Social distancing has significant impact on public intention to go out during covid-19 pandemic outbreak.

Social distancing and anxiety during covid-19

The relationship between social distancing and anxiety needs more clarity. Studies conducted in reference to Covid-19 do not highlight the role of social distancing in accelerating anxiety. Available literature does not provides concrete evidences about social distancing and its impact on level of anxiety. Literature gives a generalised perspective of Covid-19 measures and its impact on anxiety and in some studies social anxiety is also discussed. Social anxiety which covers a broad aspect of anxiety accelerated by lockdown, social distancing, isolation or quarantine is discussed in some of the studies (Zheng et al., 2020; Khan et al., 2021; Ariapooran et al., 2021; Hawes et al., 2021). Throughout the world during the Covid-19 epidemic, anxiety, fear, wrath, and melancholy are the most prevalent psychological symptoms (Vasconcelos et al., 2020). Research on several subsets suggests that anxiety related to COVID-19 was seen in participants irrespective of their age and gender. According to Hawes et al. (2021), there was a rise in the symptoms of anxiety and depression among adolescents and young adults during the COVID-19 epidemic in the United States. In their study on the psychological well-being of the most exposed populations, including children, college students, and health workers, Saladino et al. (2020) concluded that Covid-19 preventive measures are the cause of post-traumatic stress disorder, anxiety, sadness, and other symptoms of distress. As a crucial countermeasure against COVID-19, quarantine has also been linked to psychological symptoms as melancholy, rage, and anxiety (Vasconcelos et al., 2020). In a comprehensive study about the mental health issues of children and adolescents, Singh et al. (2020) disclose the fear and anxiety caused by the lockdown during the Covid-19 epidemic. According to study Lewis (2020), tension and anxiety levels rise when people are unable to maintain social distance. When attempting to keep social distance, an individual may also encounter a variety of favorable or unfavorable emotional circumstances. The findings of Oral and Gunlu's study from 2021 demonstrated that stress, anxiety, and depression all fully mediate the link between social distancing and resilience. But if people can't keep their social distance, they'll probably feel anxious (Brooks et al., 2020). Therefore, maintaining social distance is crucial for overall wellbeing and mental health. Therefore, hypothesis H3 is developed.

H3: Social distancing has significant effect on anxiety during covid-19 pandemic outbreak.

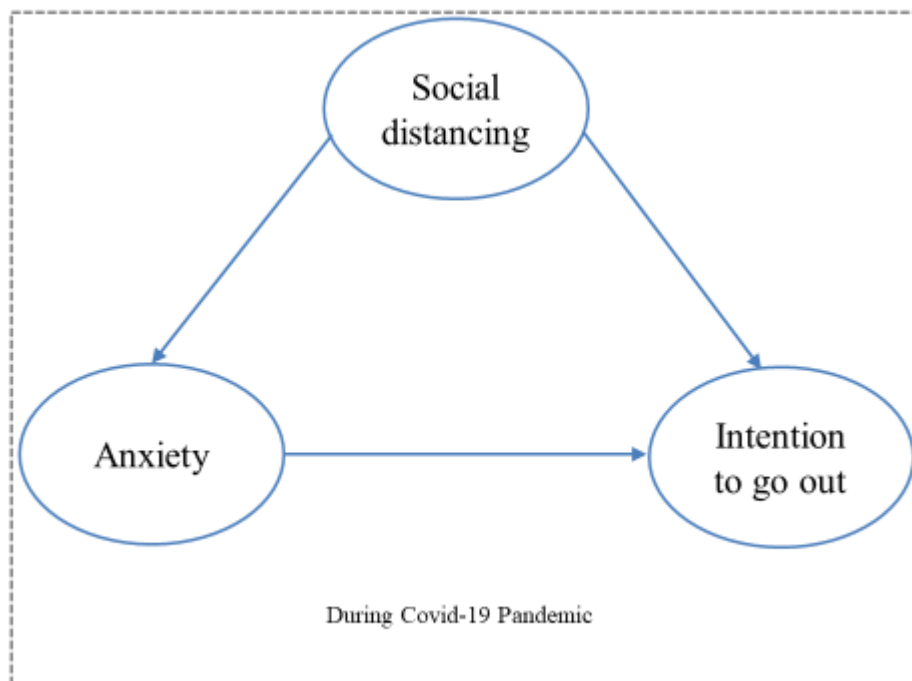


Figure 1: proposed research model

RESEARCH METHODOLOGY

The purpose of this section is to discuss the procedure of sample selection, data collection and statistical tools employed in data analysis. Further, explanation how did the questionnaire develop, is given in the heading “survey instrument”.

Survey and data collection

Initially, to understand factors affecting travel behaviour in post lockdown era, interview of individuals was conducted over the mobile phone. At the beginning of interview, it was ensured that the interviewee is using public or shared transport services to travel in the post lockdown. A structured questionnaire having 10 open ended questions including demographic questions was developed. The interviews helped in exploring travel related issues in post lockdown. The common problems highlighted by the participants were surge increase in fare, avoiding public transport and shared vehicle, anxiety and stress during and after the travel.

Later, a questionnaire in Google form was developed while incorporating the findings from the literature as well as the discussion happened in interviews. Further, primary data were collected by using the questionnaire. The link of Google form was sent to conveniently selected respondents (students from HEI's, employees from public and private sector). The data for the study were collected from November 03 to December 18, 2020.

Survey Instrument

The questionnaire consists two sections. In the first section, demographic details such as age, gender, income and occupation were asked. Second section is drafted to obtain information about anxiety level, social distancing norms, change in travel behaviour due to anxiety and intentions to go out in the Unlocking phase. To test the content validity a pilot survey was conducted among 30 respondents. It helped to simplify the language according to the target respondents. To measure the level of anxiety and reflection of covid pandemic,

Level of Anxiety and Its Impact on Intentions to out of Home Behaviour During COVID-19

a GAD-7 scale was adapted from the study of Spitzer et al. (2006). The screening process for panic disorder and post-traumatic stress disorder has made considerable use of this scale (Kroenke et al., 2007). Excellent internal consistency reliability ($\alpha=0.92$) was found in the original study (Spitzer et al., 2006). Scale reliability was assessed at 0.93 in a follow-up study by Johnson (2020) that examined anxiety symptoms in college students and their connection to unmet social factors. In this study, scale reliability (Cronbach alpha) is .863 (> 0.7) is acceptable as per Nunnally (1978). The items related to social distancing and intention to go out were adapted from the previous studies. The items were further modified in Indian context based on outcome of interview. Using a structured questionnaire not only makes the data analysis easy but also provides reliable and accurate information strengthen the recommendation and findings of the study.

Statistical tool used in data analysis

SPSS 24.0 is used to analyse the data. Frequency and percentage of respondents having different level of anxiety is illustrated in Table 2. The significant level of anxiety among different demographics i.e. gender, age groups, income group, education and area of living is shown in Table 3. Chi-square test is applied to know the significance of four levels of anxiety among demographics. To test the model fit and hypothesised relationship between latent construct, confirmatory factor analysis and structural equation modelling (SEM) using Amos software was used.

RESULTS

Under this section, collected data are analysed and reported. Initially, level of anxiety among the travellers is revealed to align with the objective of the study. Applying Chi-square test, significant differences in level anxiety based on demographics are identified. Also, the effect of anxiety due to Covid-19 and social distancing on intention to go out are measured.

Demographic profile of respondents

The data used for the study consists 50.7 % male and 49.3 % female. Most of the respondents in the data are in the age between 21 years to 35 years which accounts 62.5% of total respondents. Other age group of respondents are up to 20 years (32.6%), 35 years to 50 years (4.3%), 51 years & above (0.7%). Respondents based on family income are categorised in the four income group i.e. 33.2 % respondents are in the family income group of Rs. 100,000 above, followed by 24.3% respondents in family income group of Rs. 75,000 to 100,000, 22.4% respondents in the group of income between Rs. 25,000 to 50,000 and 20.1% respondents in the group having family income up to Rs. 25,000 per month. As far as education is concern, 53.9% respondents are under graduate, 42.4% respondents are post graduate and 3.6% are having doctorate degree. Most of the respondents participated in the study are residing in urban area, only 14.5% marked their residential status as rural area. The demographic characteristics of the respondents are given in Table 1.

Table 1: Demographic profile of respondents

		Frequency	Percent
1. (a) Gender	Male	154	50.7
	Female	150	49.3
1. (b) Age	(i) Up to 20	99	32.6
	(ii) 21-35	190	62.5
	(iii) 35-50	13	4.3
	(iv) 51 & above	2	0.7
1. (c) Family income (Monthly in Rs.)	(i) Up to 25000	61	20.1

Level of Anxiety and Its Impact on Intentions to out of Home Behaviour During COVID-19

	Frequency	Percent
	(ii) 25,001-50,000	68 22.4
	(iv) 75,001-1,00,000	74 24.3
	(v) 1,00,000 and above	101 33.2
1. (d) Education	i) Undergraduate	164 53.9
	ii) Post-graduate	129 42.4
	iii) Doctorate	11 3.6

Assessment of levels of anxiety

Like the previous study (Cao et al., 2020; Toussaint et al., 2020), this study also determined four levels of anxiety among people travelled during Covid-19 pandemic for different purposes. In accordance to the literature this study brings out that Covid-19 led circumstances are responsible to accelerate psychological symptoms such as anxiety among people. It further clarifies that level of anxiety varies across different age, gender and socio-economic status of individual. According to the study only 4.9% of people had no symptoms of anxiety, while 95.1% of people reported anxiety at different level; mild (22.0 %), moderate (35.9) and severe anxiety (37.32 %).

Table 2: Distribution of respondents with their anxiety level (n = 304)

Anxiety level	Frequency	Percentage
Normal	15	4.9
Mild	67	22.0
Moderate	109	35.9
Severe	113	37.2

Further, relationship between anxiety level and demographics is examined (see Table 3). No particular demographic variable reported significant difference for the effect of anxiety at $p < 0.05$. It means that people whether male or female belongs to low income group or high income strata, having graduate, post graduate or doctorate level of education, residing in rural or in urban locality, are suffering with anxiety due to covid-19 outbreak.

Table 3: Anxiety level in different demographics

Variable	Anxiety Level				Total	χ^2	Sign.
	Normal	Mild	Moderate	Severe			
(a) Gender:	Male	8	35	50	61	1.609	0.657
	Female	7	32	59	52		
(b) Age:	(i) Up to 20	6	22	38	33	3.908	0.917
	(ii) 21-35	9	40	67	74		
	(iii) 35-50	0	4	4	5		
	(iv) 51 & above	0	1	0	1		
	(v) 51 & above	0	1	0	1		
(c) Family income (Monthly in Rs.):	(i) Up to 25000	2	12	22	25	7.435	0.592
	(ii) 25,001-50,000	4	20	22	22		
	(iv) 75,001-1,00,000	5	17	30	22		
	(v) 1,00,000 and above	4	18	35	44		
	(v) 1,00,000 and above	4	18	35	44		
(d) Education	i) Undergraduate	6	44	52	62	8.329	0.215
	ii) Post-graduate	9	20	53	47		
	iii) Doctorate	0	3	4	4		

Measurement Model

To know whether the construct is appropriate to predict the hypothesis results, confirmatory factor analysis (CFA) is used. Further, CFA is used to test whether the constructs considered in the model are fit to produce correlation, validity and reliability. The correlation between social distancing and anxiety ($r = -0.200$), anxiety and intention to go out ($r = -0.050$), and between social distancing and intention to go out ($r=0.713$) at 0.05 level of significant are depicted in Table 5. The validity and reliability are discussed in next paragraph. Initially, confirmatory factor analysis (CFA) applied for the construct; anxiety, social distancing and intention to go. The results shows the values of model fit indices are $CMIN/df = 1.847$, $p = 0.000$, $df = 72$, $\chi^2 = 132.980$, $GFI = 0.943$, $PMR = 0.062$, $CFI = 0.962$, $IFI = 0.963$, $TLI = 0.952$, $NFI = 0.922$, $RMSEA = 0.053$. As per Byrne (2010), values for overall model fit $CMIN/df < 2$, $GFI, CFI, IFI > 0.9$, $RMSEA < 0.05$ indicates a good fit. Thus, the model fit values are acceptable.

The convergent validity, internal consistency and discriminant validity are required for the data appropriateness (Hair et al., 2010; Fornell and Larcker, 1981). This study, examined the validity and reliability of the measures. It has been found that all constructs under this study fulfil the criteria of composite reliability and Cronbach alpha reliability (equal or greater than 0.7) indicates internal consistency. Thus, internal consistency is achieved (see Table 4).

Table 4: Construct reliability

Construct	Construct Loading (Estimates)	Composite reliability	Cronbach reliability
Anxiety		0.864	0.863
Worrying too much about different things going around me.	0.754		
Not being able to stop or control worrying.	0.733		
Becoming easily annoyed or irritable	0.704		
Being so restless that it's hard to sit still	0.690		
Trouble relaxing	0.658		
Feeling afraid as if something awful might happen	0.649		
Feeling nervous, anxious, or on edge about Covid-19 virus.	0.635		
Social distancing		0.877	0.869
I am conscious towards maintaining social distance during travel	0.914		
Maintain the social distance during the travel; I pay my fare/bills through a digital mode.	0.801		
During the travel/going to outside, I don't like to share things with other people.	0.781		
I would like to travel alone.	0.698		
Intention to go out		0.687	0.699
I would like to go outside the home/office for purchasing necessities.	0.862		
I frequently go to outside the home/office.	0.584		
I would like to visit historical/pilgrim places.	0.477		

To test the convergent validity, average variance extracted (AVE) is used. As per Fornell and Larcker (1981), AVE cut-off point should be equal or above than 0.50. In this study, two construct's AVE value is close to 0.50 (see Table 5). Discriminant validity has been

Level of Anxiety and Its Impact on Intentions to out of Home Behaviour During COVID-19

assessed using correlation between the constructs against square roots of AVE. The square roots of AVE are presented along the diagonal in the Table 5. The values are greater the constructs' correlation indicates acceptable discriminant validity (Fornell and Larcker, 1981).

Table 5: Discriminant validity

	AVE	Anxiety	Social distancing	Intention to go out
Anxiety	0.468	0.684		
Social distancing	0.603	-0.200	0.777	
Intention to go out	0.434	-0.050	0.713	0.659

Structural model and hypothesis testing

In given the literature review, three hypotheses are developed. To test the hypotheses, structural equation modelling in AMOS 24.0 is used. From the results, hypothesis H1 to examine the effect of anxiety on intention to go out, represents insignificant effect ($\beta = 0.096$ $p > 0.05$). Another hypothesis H2 developed to examined the effect of social distancing on intention to go out has shown positive significant effect ($\beta = 0.732$, $p < 0.001$). H3 developed to examined the effect of social distancing on anxiety has shown significant negative effect ($\beta = -0.200$, $p < 0.001$). Thus, the hypotheses H2 and H3 are accepted. While hypotheses H1 is rejected (see in Table 6). Further, overall model fit indices for the structural model; CMIN/df = 1.847, $p = 0.000$, df = 72, CMIN = 132.980, GFI = 0.943, PMR = 0.062, CFI = 0.962, IFI = 0.963, TLI = 0.952, NFI = 0.922, RMSEA = 0.053 are within the recommended limits.

Table 6: Results of Hypothesis

	Path analysis	Estimate	P	Result
H1:	ANXT \square INGO	0.096	0.120	Rejected
H2:	SD \square INGO	0.732	***	Accepted
H3:	SD \square ANXT	-0.200	0.003	Accepted

Note: ANXT-anxiety, SD- social distancing, INGO – intention to go out

DISCUSSION

This study reveals initial thoughts on Covid-19 stimulated anxiety and its influence on public intention to go out in the post lockdown phase. It was designed to address the psychological outlook of people towards travelling behaviour. To reach on a conclusion an instrument carrying questions related to anxiety, travel intention and Covid-19 was prepared. Responses are examined and tested by using confirmatory factor analysis. It is evident that even in the post lockdown the hesitation towards travelling by public transport is pertinent. But stepping out from the home became essential to sustain the livelihood and therefore in unlocking people start travelling for various reasons. The outcome of analysis came out with four anxiety level among travellers termed as normal, mild, moderate and severe. Most of the cases in this study are of moderate to severe nature shows the intense psychological effect of Covid-19 pandemic to lead anxiety. Travel behaviour discussed in the study comprised the purpose of travel, mode of transportation used, safety concerns and adoption of Covid-19 protocol during the journey.

The outcome of the study is consistent with previous studies such as Yang et al. (2020) where psychological effect of Covid-19 is addressed and high level of anxiety and fear is observed during the pandemic among the University students. Moghanibashi-Mansourieh (2020) also reported severe anxiety among Iranian women. Some studies also reported

Level of Anxiety and Its Impact on Intentions to out of Home Behaviour During COVID-19

contradictory results for Covid-19 lead anxiety. Cao et al. (2020) found no anxiety amongst students (75%) followed by Wang et al. (2020) reported no anxiety among 93.7% respondents. The contradiction in results may occurred by any reason including sample selection, area, population and number of viruses affected cases etc. India witnessed the severity of corona virus infection. Travel is one of the most affected human activities due to Covid-19 precautionary measures including restrictions and lockdown. Therefore, consistent researches around the World are essential to reach on a conclusion.

Hypothesis H1 formulated to measure the effect of anxiety due to covid-19 pandemic on intention to go out is rejected. It reveals that in the unlock phases; people are stepping out even though they are experiencing anxiety. Also, majority of the respondents in the study belonged to urban areas where proximity to obtain essential items is high as compare to rural areas. Cities are expanded in large areas than the village; to get amenities and to earn livelihood people travel more frequently. This data defies that of a prior study (Luo and Lam, 2020), which found that travel intention is negatively impacted by risk attitude, travel anxiety, and fear of COVID-19. The rationale behind the contradiction is lies in India's diverse demographics and their socio-economic status. Due to lack of stable employment, large numbers of people are employed as daily wages workers. Lockdown and restrictions endangered the employment opportunities throughout India. Therefore, in unlocking phases people stepped out even though they experienced anxiety and fear. It was essential to travel in search of employment and to attend the jobs. Staying at home was safe but it doesn't solve the problem of common people which resulted the impact of anxiety on intention to go out insignificant.

Results drawn from hypothesis H2 indicate that social distancing has significant effect on intention to go out. It further strengthened the opinion that people who strictly follow social distancing norms are comfortable to go out or to travel. Social distancing was extensively promoted and considered an important tool to counter Covid-19. Therefore, even in unlock phase Government mandate social distancing while travelling or moving out. Previous studies reported that travel restrictions and social distancing norms significantly reduced the travel demand (such as Pawar et al., 2020). But it should also be noted that in the early stage of Covid-19 the fear was paramount. There was no vaccine or medication available. The only way to safeguard was isolation or quarantine. That's why a substantial decrease, during the spread of Covid-19 was observed in all kinds of travel (Beck and Hensher, 2020).

World health organization and other medical bodies issued the health advisory to maintain social distance while going in public gathering or travelling to avoid the spread of corona virus. Therefore, hypotheses H2 validates the fact that people are adopting the precautionary measures of social distancing while going out. Those who are in acute need of regular travelling preferring to own a vehicle rather than using public transport or shared vehicle.

Hypothesis H3 postulates inverse significant relationship between social distancing and anxiety. It states that adoption of social distancing measure reduces anxiety among travellers in post lockdown phase. In the unlocking phase when travel restrictions were uplifted and public transport were allowed, social distancing norms remained constant to avoid the spread of virus. Therefore, those who follow these norms feel a bit relaxed during travel. However, previous studies conducted during the evolution of Covid-19 presents a contradict outcome. Biaden et al. (2021) finds that caregivers who strictly adhered social distancing are more likely to report feeling worried/anxious. And Esteves et al. (2021) claimed that social distancing can impact mental health and triggered symptoms such as anxiety, stress and

depression. While comparing the findings of previous studies with this study it can be concluded that in early stage of Covid-19 social distancing emerged as a burden and leads psychological symptoms. But in later stage when these norms became the part of usual life people adopt social distancing to safeguard them. Also, while travelling it was mandated to adopt social distancing measures in the country like India. Therefore, it reduces perceived risk of getting infected and reduces anxiety too.

CONCLUSION AND IMPLICATIONS

This study presents deeper insights about Covid-19 led psychological symptom “anxiety” and examine the role of “social distancing” measure while travelling or stepping out in the Unlock phase. The study concludes that even though people experience low to high level of anxiety, its effect on their intention to travel or moving out is insignificant in the post lockdown phase. Also, the study highlighted the role of social distancing norms which remained constant in unlock phase and conclude that it has significant importance in reducing anxiety while travelling and positively affect intentions to go out. While examining the role of social distancing this study contradicts with the previous studies conducted in different context and early stage of Covid-19 pandemic. However, the finding of this study supports the previous studies which claimed anxiety due to Covid-19 is a common psychological symptom across population despite of the demographic characteristics.

Results of the study are useful for policy makers, managers and researchers. It offers the useful insights about social distancing which came out as an effective measure to counter Covid-19. The study validates that people who believe and follow social distancing are ready to travel. Therefore, travel agencies, hotel and other accommodation partners must highlight the adoption of Covid-19 measures in its operations. Government should also strengthen its campaign to fight against Covid-19 and ensure active participation of common people. The more people come to know about the measures related to Covid-19, the more they will adopt it. This may relieve their stress and anxiety while moving out or during the travel.

Social distancing measures are uniformly adopted across the World and proved a viable remedy against Covid-19. Alteration in design and layout to make social distancing norms easier to follow is as important as the change in behaviour. Therefore, flexible seating arrangement in railways and buses, smart queue management system at public places and stoppages are the need of hours. At last, it can be concluded that people are eager to come out of this darkest phase of their life. They have compromised with new normal where social distancing is must.

Limitations and future research

To generalise the findings, sample size is limited. Also, respondents participated in this study are of young age. Further studies may be conducted taking sample from other geographical area or on other set of respondents. The level of anxiety based on frequency of travelling and travel destination may also be examined. Another limitation can be seen as a selection of only one psychological variable i.e. anxiety. Other psychological variable (e.g. fear, stress) may be employed to measure the intention to go out or to examine the travel behaviour.

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Conflict of Interest

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