



Study on the Influencing Factors of Tourists' Willingness to Revisit the Forest Health and Wellness Tourism

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Abstract. As a derivative of health industry, forest health and wellness tourism has proved its positive effect on nature and human body. However, there are differences between forest health and wellness tourism and traditional tourism. It is not only necessary for tourists to obtain high-quality tourism experience, but also necessary to establish their correct and in-depth understanding of forest health and wellness tourism. Based on the cognition-affection-conation theory, this paper studies the factors that affect tourists' revisiting intention of forest health and wellness base. The results show that: (1) The cognition of forest health elements has a positive effect on destination trust, anticipated joy and revisiting intention; (2) Destination trust and anticipated joy mediate cognition and revisiting intention; (3) In the case of mediation, the direct effect of cognition on revisiting intention will be weakened to be insignificant. This research conclusion will provide some opinions for the daily publicity and popular science education of the forest health case base, so that it can better improve the tourism quality of the forest health case base.

Keywords: Forest health and wellness tourism, Revisiting intention, Structural equation model, data analysis

1 Introduction

In the realistic environment where the sub-health proportion of the world's population remains high, countries have issued policies to protect people's physical and mental health, and the great health industry has also emerged as the times require. Since the introduction of forest health care, especially the implementation of the outline of the "healthy China 2030" plan in 2016, China has been committed to promoting its development. In the opinions on promoting the development of forest health care industry, it is pointed out that it is necessary to improve the public's comprehensive understanding of forest health care through various media and platforms, and enhance the social influence of forest health care. However, as a new form of tourism, forest health and wellness tourism needs some time to be recognized and accepted by the public. Its health-care characteristics make tourists not only need to get viewing experience, but more importantly, form a certain understanding of the functional role of forest health care. Xie Yanjun (2005) proposed that the commonness of tourism experience is that it

is "a multi-functional leisure activity, which contains both entertainment and knowledge seeking components" [1]. When tourists have a basic understanding of forest health care, they will know more about how to use these elements in the forest health care base to relax and repair physically and mentally and achieve the desired effect in the process of tourism.

According to the emotional evaluation theory and the cognition-affection-conation theory, people's cognition of something will affect their behavioral intentions through their feelings about it. For tourists, knowing more about forest health and wellness tourism and its physical and mental benefits is conducive to promoting their willingness to revisit the forest health care base. Lin Bixia (2018) confirmed that the higher the tourists' awareness of forest health, the higher the frequency of participation, but the impact path is not clear yet [2]. Through consulting the literature, it is found that the two variables of anticipated joy and destination trust play an intermediary role between cognition and revisiting intention, so the above two variables are selected as intermediary variables. This research can provide some beneficial help for the development of forest health care, both theoretically and practically, and make it more perfect in propaganda and construction.

2 Journals reviewed

2.1 Theoretical basis

2.1.1 Emotional evaluation theory.

The emotional evaluation theory was put forward by Arnold (1971), which believes that emotion depends on how individuals interpret environmental stimuli [3]. Arnold also built a theoretical model of "action sequence" to explain the relationship between emotion and motivation, reflecting the evaluation of specific environmental stimulus characteristics. This kind of action response is expressed as an action sequence, that is, "Cognition - Evaluation - emotion generation - demand - Thinking - action".

2.1.2 Cognition-affection-conation theory.

The cognition-affection-conation theory consists of cognition, emotion and behavior or behavior intention. Cognition is the belief held by an individual about an object, emotion is the feeling of an individual about an object, and behavior is the action taken by an individual about an object. According to the theory of informed action, cognition affects behavior or behavior intention through emotion.

2.2 Research on forest health and wellness

Forest health and wellness is also called forest recuperation, forest bathing, etc. Originated in Germany, it has developed rapidly in Germany, France, South Korea, Japan, Russia and other countries. Although it has developed rapidly abroad, it was first introduced by Beijing in 2012 in China. Then it gradually developed throughout the country. The main body of research is mainly led by forestry units, mainly scholars with forestry

background, whose research content mainly focuses on forest tourism, industrial development, recuperation factors and development suggestions, as well as tourist behavior.

2.3 Research on cognition

Cognition is a cognitive evaluation based on the belief knowledge held by individuals on objects. Psychology believes that the results of cognition will form a subjective judgment and overall understanding of a thing, and then affect individual emotions, attitudes and behavioral intentions. In the field of marketing and management, many studies have confirmed that customers' cognitive level will affect their purchase intentions or purchase decisions. The higher customers' cognitive level of a product or brand, the easier it is to consume the product or choose the brand ^[4]. At present, most domestic and foreign researches on tourism cognition focus on the relationship between cognition, attitude and behavioral intention. There are a few researches on forest health ^[5-6], but the specific mechanism of the path of cognition emotion intention has not been clarified.

2.4 Research on destination trust

Trust is a complex and vague concept, and there are certain differences in different fields. Tourism destination trust refers to the perception that tourists are willing to take corresponding risks while the destination acts according to its own will. Research on trust in the tourism field mainly focuses on online websites, online service trust building and trust mechanism, and focuses on tourism enterprises and tourists. From the perspective of research status, the research on trust in the tourism field is almost conducted for enterprises and individuals. The research on taking the whole tourism destination as the trust object is less, and its specific mechanism is also worth discussing.

2.5 Research on emotion

There are many kinds of emotions, one of which is to divide them into pre decision emotions, accompanying emotions and post decision emotions. In the field of tourism, most of the researches on emotions are incidental emotions, and the researches on pre decision emotions, namely, expected emotions, are relatively few. However, the existing research conclusions are basically consistent, that is, positive emotions will positively affect consumers' purchase decisions, while negative emotions will negatively affect consumers' purchase decisions ^[7].

2.6 Research on revisiting intention

In short, revisit intention is the possibility that tourists will revisit a tourist destination again or more times, which is usually used to predict revisit behavior. The research on tourists' willingness to revisit has been very mature. The research paradigm is relatively unified, mainly based on empirical cases. The research conclusion is also relatively

consistent. If tourists have positive feelings or good experiences on tourism real estate, they will have a strong desire to revisit; If tourists perceive risks or are unhappy, they will inhibit their willingness to revisit.

3 Research design

3.1 Research hypothesis

3.1.1 Cognition of forest health elements and revisiting intention.

Cognition is a kind of cognitive evaluation based on the belief knowledge held by individuals to the object. In the field of marketing and management, many studies have confirmed that tourists' cognitive level will affect their purchase intention. The higher the customers' cognitive level of a brand, the easier it is to choose that brand [8-9]. In forest health tourism, tourists' cognition of health care elements is very important, and tourism destinations can also be regarded as a brand. Therefore, it is speculated that tourists' cognition of elements of tourism destinations will also promote their corresponding willingness to act. Based on this, the following assumptions are put forward:

H1: there is a significant positive correlation between the cognition of forest health elements and revisiting intention.

3.1.2 Cognition of forest health elements and destination trust.

Lewis and Wight (1985) believe that trust is an emotional attitude that is analyzed and recognized in interpersonal communication [10]. In the earliest research on consumer trust, most scholars believe that trust is a cognitive process [11-12]. Guo Xiaoshu (2016) believes that brand cognition is the sufficient condition for the formation of consumer brand trust [13]. Zhou Jingyu (2022) found that cognitive evaluation has a significant positive impact on trust. Based on this, the following assumptions are put forward [14]:

H2: there is a significant positive correlation between the cognition of forest health elements and destination trust.

3.1.3 Cognition of forest health elements and anticipated joy.

The theory of emotional evaluation believes that emotions depend on how individuals interpret environmental stimuli [15]. That is to say, cognition is a prerequisite for emotion generation. For this theory, scholars have carried out studies to verify it. For example, jiseon (2020) believe that if customers can positively view the cognitive characteristics of something, they may show positive expectations [16]. They all belong to the observation indicators within the emotional range. If anticipated joy is included in this study, the same research conclusion should be obtained theoretically. Based on this, the following assumptions are put forward:

H3: there is a significant positive correlation between cognition of forest health elements and anticipated joy.

3.1.4 Destination trust and revisiting intention.

In the field of tourism, most of the research on trust focuses on testing its impact on tourists' behavior intention, and the conclusions are relatively consistent, that is, tourists' trust will promote their tourism behavior or intention ^[17-18]. In the context of forest recreation, tourists' trust in the destination may also affect their revisiting intention. Based on this, the following assumptions are put forward:

H4: there is a significant positive correlation between the destination trust and revisiting intention;

H5: destination trust plays an intermediary role between the cognition of forest health elements and revisiting intention.

3.1.5 Anticipated joy and revisiting intention.

Isen (2001), Lv Lihui (2017) had proved the rationality of the emotion behavior path through empirical research, and proposed that positive emotions can improve individual participation in social activities ^{[15][19]}. For the influence of anticipated emotion, Lu Changbao (2021) has also confirmed through research that it also has a positive impact on behavioral intention ^[20]. Based on this, the following assumptions are put forward:

H6: there is a significant positive correlation between the anticipated joy and revisiting intention;

H7: anticipated joy plays an intermediary role between the cognition of forest health elements and revisiting intention.

3.2 Hypothetical model

According to the above research assumptions, the following hypothetical model diagram is constructed (Fig. 1).

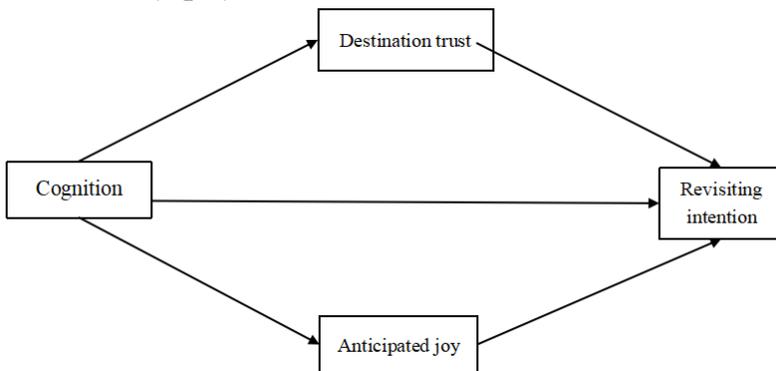


Fig. 1. Hypothetical model (owner-draw)

3.3 Research method

3.3.1 Questionnaire and data.

The forest health elements cognition scale draws on the research of Chen Xiaoqin (2020) [21]; Destination trust draws on the research of Liu Weimei (2018) [22]; Anticipated joy draws on the research of Ji Chunli (2017) [23]; Revisiting intention refers to the research of Yao Yanbo (2013) [24], which has 17 items. In July 2022, questionnaires were collected on Credamo, a professional data collection platform. A total of 430 questionnaires were recovered, of which 399 were effective, with an effective rate of 92.8%. Sample data show that male and female account for about 1:2; The age was mainly 18-39 years old, accounting for 86.5%; The educational background is mainly undergraduate, accounting for 69.4%; The largest proportion of monthly income is 6001-8000 yuan and more than 10000 yuan, accounting for 19.5% respectively; 49.6% of the tourists have visited the forest health care base for 2-3 times.

4 Empirical analysis

4.1 Normality test

Before applying structural equation model, the data shall be tested for normality. In terms of test criteria, when the absolute value of skewness is less than 3 and the absolute value of kurtosis is less than 10, the data can be considered to conform to the assumption of normality.

As shown in Table 1, the absolute values of skewness and kurtosis of forest health awareness, destination trust, expectation of joy and willingness to revisit are all less than 3 and 10 respectively, meeting the above criteria. Therefore, the sample data meets the normality requirements of structural equation model analysis, and is suitable for structural equation model analysis.

Table 1. normality test (owner-draw)

Variable	Skewness	Kurtosis
Cognition of forest health elements	-0.497	0.615
Destination trust	-0.560	-0.228
Anticipated joy	-0.656	0.341
Revisiting intention	-0.786	1.407

4.2 Reliability test

SPSS26.0 was used to analyze the reliability of the scale, Cronbach's α reliability coefficient is shown in Table 2. Cronbach's values of each scale and its dimension scale are all greater than the standard value of 0.6, which indicates that the scale has good reliability.

Table 2. reliability test (owner-draw)

Variable	Mean	Cronbach's α
Cognition of forest health elements	3.88	0.815
Destination trust	4.15	0.738
Anticipated joy	4.30	0.748
Revisiting intention	4.20	0.761

4.3 Correlation analysis

Pearson correlation coefficient was used for correlation analysis. The correlation results between the independent variables and dependent variables involved in this study are as follows: there is a significant positive correlation between the cognition of forest health elements and the willingness to revisit ($r = 0.479$, $P < 0.01$), destination trust ($r = 0.486$, $P < 0.01$), and expected joy ($r = 0.463$, $P < 0.01$); There was a significant positive correlation between destination trust ($r=0.624$, $P<0.01$) and willingness to revisit; There was a significant positive correlation between expected joy ($r = 0.637$, $P < 0.01$) and willingness to revisit.

4.4 Structural equation model analysis

4.4.1 Goodness of fit test.

Amos is used to analyze the goodness of fit of the model. The analysis results are shown in Table 3 and the indexes $C_{min} / DF = 2.855$, $GFI = 0.910$, $IFI = 0.911$, $CFI = 0.910$, $RMSEA = 0.068$ are obtained. The results show that the fitting indexes of the structural equation basically reach the ideal value, and the model fits well.

Table 3. Structural equation model fitting index (owner-draw)

	X2	df	X2/df	GFI	IFI	CFI	RMR	RMSEA
Standard value			1-3	> 0.9	> 0.9	> 0.9	<0.05	< 0.08
structural equation	325.437	114	2.855	0.910	0.911	0.910	0.034	0.068

4.4.2 Path analysis.

It can be seen from table 4 that, except for the path of cognition to revisiting intention, all other paths in the model are significant at the level of 0.05, which indicates that all the assumptions except hypothesis 1 are true. The results show that: Cognition ($\beta = 0.70$, $P < 0.001$) had a significant positive effect on destination trust; Cognition ($\beta = 0.66$, $P < 0.001$) had a significant positive effect on anticipated joy; Destination trust ($\beta = 0.450$, $P < 0.001$) had a significant positive effect on the revisiting intention; An-

anticipated joy ($\beta = 0.56$, $P < 0.001$) had a significant positive effect on the revisiting intention, which verified the hypothesis H2, H3, H4 and H6. And cognition ($\beta = 0.00$, $P = 0.966$) had no significant effect on the willingness to revisit, so hypothesis H1 was rejected.

Table 4. Structural equation model path test results (owner-draw)

			Estimate	S.E.	C.R.	path analysis	P	hypothesis
F4	<---	F1	0.003	0.082	0.043	0.00	0.966	reject
F2	<---	F1	0.627	0.070	8.939	0.70	***	support
F3	<---	F1	0.436	0.056	7.832	0.66	***	support
F4	<---	F2	0.415	0.082	5.090	0.45	***	support
F4	<---	F3	0.686	0.111	6.157	0.56	***	support

Note: * $p < 0.05$, ** $p < 0.01$, *** $p < 0.001$

4.5 Intermediary effect test

SPSS plug-in process was used to test the mediating effect of destination trust and anticipated joy on cognition and revisiting intention. The results show that (Table 4) the upper and lower bounds of the bootstrap 95% confidence intervals of the direct effect of cognition on the intention to revisit and the intermediary effect of destination trust and anticipated joy do not contain 0, indicating that cognition can not only directly predict the revisiting intention, but also predict the intention to revisit through part of the intermediary effect of destination trust and anticipated joy. The direct effect (0.214) and the intermediary effect (0.231) accounted for 51.91% and 48.09% of the total effect (0.445), respectively, which verified hypothesis H5; Similarly, anticipatory gratification has a partial mediating effect between cognition and willingness to revisit. The direct effect (0.218) and mediating effect (0.227) account for 51.01% and 48.99% of the total effect (0.445), respectively, which verifies hypothesis H7.

Table 5. Breakdown of indirect effect, direct effect and total effect (owner-draw)

Variables	Effect	BootSE	BootLLCI	BootULCI	Proportion of effects	
F1→F2→F4	IE	0.231	0.035	0.167	0.305	51.91%
	DE	0.214	0.038	0.139	0.287	48.09%
	TE	0.455	0.040	0.368	0.524	
F1→F3→F4	IE	0.227	0.038	0.156	0.306	51.01%
	DE	0.218	0.039	0.141	0.295	48.99%
	TE	0.445	0.040	0.368	0.524	

5 Conclusion and discussion

5.1 Research conclusion

(1) The research conclusion is basically consistent with the content of the cognition-affect-conation theory, that is, there is a mutual relationship among cognition, emotion and willingness to act. This shows that the application of this theory in the context of forest health tourism is reasonable, and widens the application range of this theory.

(2) From the results of path analysis and hypothesis testing, it can be seen that the impact of cognition on the revisiting intention is weakened or even eliminated by the two mediators of destination trust and anticipated joy, which indicates that tourists' cognition of destination can not only directly affect the willingness to revisit, but also has no significant impact when the two mediators of destination trust and anticipated joy exist. This means that the influence of cognition on the revisiting intention is more mainly through converting the cognitive content into the evaluation and emotion of the destination to indirectly affect the intention to revisit, and this intermediary effect is more significant..

(3) The results show that cognition has a positive effect on destination trust, anticipated joy and willingness to revisit, and destination trust and anticipated joy also have a positive effect on revisiting intention. This conclusion has certain practical significance, which can guide tourism managers to carry out some activities while improving the public's awareness of forest health, standardize the behavior of service personnel, and fulfill their commitments, so as to enhance the trust of tourists and arouse their positive emotions, so as to attract tourists to travel again and bring better economic development to the tourist destination.

5.2 Research prospects and deficiencies

There are still some deficiencies in the article, which need further in-depth discussion in the follow-up. First, due to the online collection of questionnaires and the different standards of the construction of forest health care bases in various regions, this research result may only be aimed at the forest health care bases in the general sense, and may not be representative of some bases that have done better. Second, this study only discusses the impact of various variables on the willingness to revisit, and indicators such as the willingness to recommend by word of mouth and tourist satisfaction are also very important, but they are not included in the study this time. Based on the above limitations, it is necessary to divide regions or improve the cognitive scale in the future, further broaden the research perspective, and continue to pay attention to the development of forest health and wellness tourism.

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