

Proceedings of the 4th International Conference on Economics and Social Sciences (2021), ISSN 2704-6524, pp. 128-138

The 4th International Conference on Economics and Social Sciences **Resilience and economic intelligence through digitalization** and big data analytics June 10-11, 2021 Bucharest University of Economic Studies, Romania

Conceiving Resilient Solutions for Tourism during the COVID-19 Pandemic

Iuliana POP^{1*}, Delia POPESCU²

DOI: 10.2478/9788366675704-014

Abstract

Until 2019, tourism was one of the most dynamic economic activities in the world, holding the third place in the world for exports, after fuels and chemicals. In 2019, tourism registered a number of 1.460 million tourist arrivals and 1.481 USD billion tourism receipts, according to the United Nations World Tourism Organization (UNWTO). At the same time, tourism is a very sensitive activity to the occurrence of unforeseen factors, which can strongly affect this activity. The COVID-19 pandemic is one of the factors with a major impact on economic activity in general and on the tourism has been noticed from the very beginning. The pandemic has affected tourism worldwide, with major losses in tourist arrivals of 74% in 2020 compared to 2019. Despite all these difficulties, tourism is looking for solutions to resume business, and the administration of anti-COVID-19 vaccines offers a chance for economic recovery, some countries offering a new "all inclusive" package that includes the anti-COVID-19 vaccine. The paper aims to analyse how countries in which tourism plays an important role in the economy manage to find solutions for tourism recovery, sometimes using newer, atypical solutions.

Keywords: COVID-19 pandemic, domestic tourism, medical tourism, resilience, vaccine.

JEL Classification: I18, L83, L88, Z33.

1. Introduction

The tourism industry is one of the most important and dynamic industries, but in 2020, it was among the most affected by the COVID-19 pandemic. In fact, 2020 was the worst year in tourism history, with 1 billion fewer international tourists, down 74% from 2019, and losses were estimated at 1.3 trillion USD in export revenue (UNWTO, 2021). On the European continent, the total share of travel and tourism

¹ Bucharest University of Economic Studies, Bucharest, Romania, iuliana.pop@rei.ase.ro.

^{*} Corresponding author.

² Bucharest University of Economic Studies, Bucharest, Romania, delia.popescu@com.ase.ro.

[@] 2021 I. Pop, D. Popescu, published by Sciendo. This work is licensed under the Creative Commons Attribution 4.0 License.

in GDP in 2020 decreased dramatically compared to 2019 due to the pandemic, from 2.191 billion USD to 1.065 billion USD (Statista, 2021a). The speed with which the virus spread led to a dramatic decrease in tourism activity, especially after the declaration of the pandemic by the World Health Organisation (WHO), on March 11, 2020. International tourism has been particularly affected, but in many countries domestic tourism has also suffered especially during the lockdown (WTTC, 2020).

The tourism industry is highly vulnerable to many factors, including natural disasters, pandemics, terrorist attacks and more (Yeh, 2020). Pandemics are not new to human history, and the twentieth century has been repeatedly affected by the spread of dangerous viruses, which have manifested themselves more regionally, with varying intensities. Influenza pandemics are not only unpredictable, but also periodic events that can have serious consequences both for human health and economically (Del Rio & Hernandez-Avila, 2009).

Although in the 1970s it was believed that infectious diseases were defeated and remained a thing of the past, the early 21st century was marked by such epidemics as Severe Acute Respiratory Syndrome (SARS) and avian influenza A (H5N1) in the 2000s, as well as Middle East Respiratory Syndrome (MERS) and Zika virus disease (ZVD) in the 2010s (Hall, Scott & Gössling, 2020; Yang et al., 2020). The COVID-19 Pandemic (Yeh, 2020) is also one of them, but much more threatening.

Countries that have gone through various epidemics have mastered some personal hygiene practices, such as hand washing, as a measure to stop the spread of the virus but also as a necessary first step in health education (Chia & Oyeniran, 2020). After all, in the absence of specific medical treatments for coronavirus dysfunction, prevention is the first course of action (Cucinotta & Vanelli, 2020; Oyeniran & Chia, 2020) and citizens should be informed so that they are aware of the importance of prevention. In addition, first aid kits have been devised to restrict the spread of the virus, and intensive training of medical staff in using appropriate infrastructure and specific equipment in the fight against the disease has been performed.

China's case for fighting infectious diseases (Liang et al., 2012) is worth mentioning in this respect. There has been remarkable progress in building a national public health system and hospitals for infectious diseases in China since the country faced the SARS epidemic in 2003. Even techniques of traditional Chinese medicine have been put into practice. Traditional Chinese medicine is attracting more and more tourists (many of them being Russians) who come for treatment. Traditional Chinese medicine can also make a difference for domestic tourism, to restore post-COVID-19 health, to former COVID patients (Wen, Wang & Kozak, 2021).

Another important lesson learned from the experience of states that have gone through flu epidemics has been communication (Liang et al., 2012), delivering information about the latest findings and preventive measures, which can be applied in potential pandemics or emergencies of the public health system. The resumption of safe tourist activities in tourist destinations, took into account, among other things, the request for negative Polymerasen Chain Reaction (PCR) tests. On November 1, 2020, 126 destinations, or 58% of the total, requested such a test from international

tourists, and 10 destinations required tourists to be quarantined on arrival (UNWTO, 2020).

This article aims to contribute to the burgeoning literature on tourism and health threats, especially infectious diseases that are spreading rapidly, affecting more and more large spaces and their longer-term implications. Since the Spanish flu, in the last century, until the current COVID-19 pandemic, there were no manifestations of such a great impact on a global scale on the conditions of modern medicine and advanced research in the field. -

2. Problem Statement

Sharma, Thomas and Paul (2021) propose a framework based on resilience for the revitalization of tourism, identifying four essential factors. Domestic tourism is a solution for resuming tourism activity and contributes to restoring the physical and mental health of COVID-19 patients (Osadchuk et al., 2020). Restoring domestic tourism through the development of traditional Chinese medicine is addressed by Wen, Wang and Kozak (2021). The need for patient rehabilitation for a shorter or longer period of time is particularly important (Amatya & Khan, 2020), in addition to health protection (Chhabra, 2020) and orientation towards therapeutic tourism. Last but not least, several authors present the vaccine as the best solution to travel with the lowest possible risk (Dubé & MacDonald, 2020; Liang et al., 2012; Loss, 2021; Martinez-Rodriguez, Gonzalez-Parra & Villanueva, 2021).

3. Aim of the Research

The research aims to highlight the way in which tourism identifies resilient solutions through the development of a tourism oriented towards health care, through medical spa or spa and wellness tourism, but also through safe travel conditions, based on vaccines.

4. Research Methods

To highlight how tourism has been affected by the pandemic, both the quantitative and qualitative methods – can help us make a comparison between the relevant data for 2019 and 2020. For tourism it is important to analyse the number of international and domestic arrivals, tourism revenues and the contribution of tourism to GDP. In order to carry out this research, data provided by WTTC, UNWTO, INS and Statista were used.

5. Findings

5.1. Domestic Tourism

Domestic tourism decreased globally, in 2020, by 45%, compared to 2019, achieving revenues of 2.36 trillion USD in 2020, compared to 4.29 trillion USD in 2019 (Statista, 2021b).

As travel restrictions began to rise, it was noticed that during the summer season, domestic tourism enjoyed more and more attention. Governments in several countries have encouraged this by providing aid in the form of vouchers (Poland, Croatia, Slovenia), tax breaks or other ways to support tourism in times of crisis (ETC, 2020; Osadchuk et al., 2020).

In Europe, in 2020, more tourists chose domestic tourism, which accounted for 73% of the total contribution to European GDP, compared to 2019, when participation was 66% (Statista, 2021c). However, spending by domestic travellers in Europe reached almost 631 billion USD in 2020, whereas it peaked at over 1.222 billion USD in 2019. Domestic tourism expenditure in Europe decreased by roughly 48 percent in 2020 over the previous year (Statista, 2021d). Among European Union (EU) member states, the highest spending on domestic tourism is recorded in Germany (54 billion euros on overnights trips, in 2019), followed by France, Spain, Italy, Sweden, Poland and others (Statista, 2020).

In the case of Russia, tourism is slowly recovering as a result of reduced restrictions and the possibility of domestic travel, and resorts in Crimea, the Baltic Sea, the North Caucasus and the Altai (Osadchuk et al., 2020).

In the United States, another country where domestic tourism has a very high share, various initiatives have been launched, such as "NYC-Cation", to encourage locals and regional visitors to stay and support the revitalization of New York exploration in these difficult times (WTTC, 2020).

Domestic tourism is a first step towards the resumption of tourist activity. It is deemed safer, from a health point of view, because it allows travel with the tourists' own means of transport, in a restricted environment, usually with family, thus avoiding congestion and enclosed spaces. Also, the fear of being quarantined has determined tourists to be more reserved in choosing remote destinations and to prefer destinations closer to home, which gives them more security. In Romania, throughout the COVID-19 pandemic, there has been a preference for more isolated, smaller accommodations, which involve smaller groups of tourists (Figure 1).



Figure 1. Establishments of tourists' reception with functions of tourist accommodation, 2019-2020 (%) Source: The authors, using INS data (2021).

This tendency to choose domestic tourism has also been observed in China, which even before the pandemic practiced this form of tourism (WTTC, 2020). Among the preferences of tourists are outdoor destinations, less crowded, rural areas, or small towns, special attention being devoted to exercise and outdoor sports, activities that are also promoted by the European Travel Commission (ETC) (ETC, 2020).

5.2. Medical Tourism

The increasing susceptibility to the threat of pandemics at the beginning of the 21st century can be attributed to several reasons, such as increasing global mobility and numerical population growth worldwide; increasing population density in urban areas, more dependent on supply chains with food; and the nature of global transport networks (Hall, Scott & Gössling, 2020; Labonté, Mohindra & Schrecker, 2011), which have played an important role in the spread of the virus. Therefore, there is a need for a therapeutic oriented tourism, which has an important role in the recovery of patients or people affected by the restriction period. Restoring health can be quite expensive and time consuming (Amatya & Khan, 2020). Medical tourism, within the medical services provided, usually includes the diagnosis, treatment, cure, prevention and rehabilitation of the person traveling for this purpose (WTTC, 2020), and the purpose is to improve or rehabilitate health through medical interventions.

Health care abroad has grown rapidly, especially in the early 21st century, although medical tourism has been gaining ground since the 1980s, when several Latin American countries offered dental procedures, cosmetics and various surgeries to patients in the US and Europe, at cheap prices. The increase of the interest for medical interventions performed in another country that offers such medical services was possible also against the background of economic development, the increase of the population income from the countries that provide patients such procedures, and easier communication facilities. Among the main interventions are organ transplantation, cardiac and reproductive operations, but also cosmetic and dental procedures (Chen and Wilson, 2013). Health care abroad is associated with various issues, of a financial, legal, ethical nature and is closely linked to the process of globalization. Among the factors that determine patients to opt for medical interventions abroad are the type of medical intervention, infrastructure, modern equipment, the attention paid by medical staff and finally yet importantly the availability of medical service and especially lower costs (Mutalib et al., 2016). To these are added privacy and the opportunity to recover away from home, which combines an exotic vacation with a medical procedure (Chen & Wilson, 2013).

Nearby tourist attractions increase the decision, because many interventions involve spending more time in the area, and the natural setting facilitates the patient's recovery faster after a medical intervention. Countries that have turned to this form of tourism are located especially in Asia, such as India, Thailand, South Korea, Malaysia, Singapore, and Philippines; but there are also Latin American countries that are practicing medical tourism, such as Argentina, Brazil, Costa Rica, Cuba, and the Dominican Republic.

Malaysia was poised to receive an estimated 2 million tourists for medical treatment in early 2020, but the onset of the pandemic has hit medical tourism and tourism in general. The number of tourists who chose Malaysia for medical tourism doubled in 2011-2018, from 643,000 USD to 1.2 million USD, most coming from countries such as China, the United Kingdom and the United States. Worldwide, the tourism market reached 87.5 billion USD annually. The same drastic decline hit Thailand in 2020 (Tatum, 2020).

One of the countries recognized for practicing medical tourism is Cuba. This activity has been supported by the Cuban government since the 1990s, when tourist packages accompanied by medical treatments were offered under the name of "sun and surgery", a package intended especially for cardiac and transplant operations (Mutalib et al., 2016). In the new pandemic context, Cuba is trying to expand its medical program by offering the COVID vaccine, Soberana-2, still in testing, which it wants to produce and which will be offered to foreigners who want to be vaccinated (Yaffe, 2021).

In medical tourism, India is one of the countries that receive a number of patients coming for health care, many of them patients from the UK, and one of the dilemmas is whether it is ethical to treat patients from another country rather than the country's own patients (Meghani, 2013).

Until the COVID-19 pandemic, medical tourism has migrated from developed countries to developing countries, especially to avoid high costs or to reduce the waiting period. However, in the context of the pandemic generated by SARS-CoV-2 virus, a change of direction has taken place, i.e. from developing countries to developed countries and especially to countries that are the main producers of vaccines, with the hope of obtaining faster anti-COVID-19 serum, shortening the waiting period in the country of origin.

In the conditions of the COVID-19 pandemic, tourism takes place in specific conditions of social distancing and self-protection, so that a new tourist model is required, based on wellness that facilitates the healing process, exploiting the overall therapeutic potential of tourism. Once a patient is cured of COVID-19, the recovery process should continue to regain lung health. In almost all cases, a complex recovery program based on movement and the practice of light exercises to strengthen the muscles, sufficient rest and a balanced diet are recommended.

Depending on the severity of the impact of COVID-19, patients may suffer a number of functional and psychological disorders in both acute and subacute stages, especially respiratory failure, dyskinesia, neuromuscular and cognitive disorders and stress, etc. (Khan & Amathya, 2020).

5.3. Spa Treatment and Medical Centres

In the new conditions created by the pandemic, the development of forms of tourism that can take place throughout the year becomes more and more attractive, which reduces the imbalances created by seasonality,. This is the case of medical and spa tourism. Not only do COVID-19 patients require post-COVID recovery, but so do other people who have had to spend more time at home, in solitary confinement, or working from home. All these people need to restore their physical and mental capacity, and the treatments offered in the spa and wellness centres help to relax, together with the natural resources in the area (baths, mineral water cures, mud cures, etc.).

In different countries, several spas have prepared tourist packages especially for patients who have suffered from COVID-19, for a faster and total recovery. Thus, based on medical recommendations from the treatment bases, tourists benefit from various procedures designed to help them regain their basic functions, such as restoring lung capacity, blood oxygen saturation levels, muscle strength, tolerance to stress, but also a normal diet and a restful sleep (Osadchuk et al., 2020; WHO, 2020).

Natural resources are very important for the development of health tourism. Romania, for instance, has mineral springs, hydrothermal springs, and healing mud, among other. At Băile Govora, a resort with a respiratory and rheumatic profile, approximately 30% of the tourists who currently arrive in the accommodation units come for recovery after COVID (Ziarul Financiar, 2021). Băile Govora offers a post-COVID-19 treatment package, based on a recommendation from a pulmonologist, for a spa treatment for post-COVID-19 recovery which is 100%, naturally, through the power of healing factors and spa treatment, followed by respiratory gymnastics. One of the procedures followed by patients who have had COVID is performed in the area of inhalation therapy. Another procedure is ultrasonic aerosol. Characteristic for this area is the presence of mineral waters, which are natural therapeutic factors used in the treatment of various respiratory diseases. Very useful in treating respiratory diseases are sulphurous waters, with a very high concentration, but also iodized and brominated waters found in the area. Also, in post-COVID recovery, breathing exercises are very important, because they help to clear the airways and in a short time, significant improvements in the patient's condition can be noticed. Similar packages are to be found in other Romanian resorts such as Băile Herculane and Geoagiu Băi.

5.4. Vaccine Tourism

The emergence of COVID-19, as in the past with SARS or Ebola, highlights the vulnerability of people to infectious diseases (Dubé & MacDonald, 2020). As the very few known medical treatments are fundamentally contested, treatment isolation remains essential, until the vaccine is found. The administration of vaccines against coronavirus disease began in December 2020. Initially, only a few vaccines were approved, with different mechanisms of action (Martinez-Rodriguez, Gonzalez-Parra & Villanueva, 2021).

For those who want to receive the COVID-19 vaccine faster, in the hope of traveling in safer conditions, since the beginning of the administration of the vaccine, in different countries, tourist offers have been prepared, accompanied by vaccination. This new tourism concept was launched in some US states, Cuba and

the United Arab Emirates, but also by travel agencies, which have prepared luxury offers (Loss, 2021). In Florida, the vaccine was offered free and unconditionally to people over the age of 65 who could afford to come for vaccines from abroad, or who still had a home in that state. But since January 21, 2021 that opportunity has changed, and only those who have been in Florida for at least three months a year can enrol in a vaccination centre. Patients who can afford this type of tourism package, which includes the vaccine, come from developing countries, or less developed, to developed countries, which are also major producers of anti-COVID-19 serums.

The concept of tourism vaccines, which offer services similar to those associated with medical tourism, has been promoted since the end of 2020 in India by Gem Tours & Travels agency, which offered Indian tourists a four-day stay to receive the vaccine from Bombay to New York (Loss, 2021). Shortly afterwards, in January 2021, India launched the Vaccination Campaign. Travel agencies, such as Gem Tours & Travels or Zenith Holidays, offered all-inclusive packages for the United States, the United Kingdome or Russia (Loss, 2021). The offer included plane tickets, sometimes accommodation and a cultural visit and vaccination. The stay varies from 3 to 12 weeks, to receive the second dose, or, two trips, to receive the second dose.

Cuba has even made a new tourist attraction out of vaccination. At the beginning of 2021, there were four vaccines in Cuba at an advanced stage of testing, and Cuban authorities planned to produce 100 million doses of Soberana 2, more than necessary for the total population of the island (Loss, 2021).

Maldives was one of the countries that opened up completely to visitors, and now it wants to be one of the pioneers for vaccination tourism. However, for now, visitors who want to "visit and get vaccinated" have to wait a little longer. The scheme will start after the country's population of 550,000 is immunized.

The resumption of international tourism will largely depend on vaccination and the vaccination certificate or passport, which will facilitate the access of tourists to different destinations and will exempt them from quarantine (European Commission, 2021).

6. Conclusions

The tourism industry is highly vulnerable to many factors and is looking for resilient solutions. Domestic tourism is a first step towards the resumption of tourist activity and has become significant in more and more countries worldwide.

In the new conditions created by the pandemic, the development of new forms of tourism that can take place throughout the year, and which reduce the imbalances created by seasonality, becomes more and more attractive. This is the case of medical, spa or spa and wellness tourism. In various countries, several spas have prepared tourist packages especially for patients who have suffered from COVID-19, in order to facilitate a faster and total recovery.

References

- Amatya, B. & Khan, F. (2020). COVID-19 in Developing Countries: A Rehabilitation Perspective. Journal of the International Society of Physical and Rehabilitation Medecine, 3(2), pp. 69-74.
- [2] Chen, L.H. & Wilson, M.E. (2013). The Globalization of Healthcare: Implications of Medical Tourism for the Infectious Disease Clinician. *Clinical Infectious Diseases*, 57(12), pp. 1752-1759.
- [3] Chia, T. & Oyeniran, O.I. (2020). Will Africa Experience a Spike in COVID-19 cases?, *Asian Pacific J Trop Med*, 13, pp. 285-287.
- [4] Cucinotta, D. & Vanelli, M. (2020). WHO Declares COVID-19 a Pandemic?. Acta Biomed, 91(1), pp. 157-160.
- [5] Del Rio, C. & Hernandez-Avila, M. (2009). Lessons from Previous Influenza Pandemics and from the Mexican Response to the Curent Influenza Pandemic, *Archives of Medical Research*, 40, pp. 677-680.
- [6] Dubé, E. & MacDonald, N.E. (2020). How Can a Global Pandemic Affect Vaccine Hesitancy?. Expert Review of Vaccines, 19(10), pp. 899-901.
- [7] European Commission. (2021). Communication from the Commission to the European Parliament, the European Council and the Council, A common path to safe and sustained re-opening, Brussels, 17.3.2021, COM (2021), 129 final. https://ec.europa.eu/ info/sites/info/files/communication-safe-sustained-reopening en.pdf.
- [8] European Travel Commission (ETC). (2020). Handbook on COVID-19 Recovery Strategies for National Tourism Organisations, Brussels: TOPOSOPHY Ltd.
- [9] Hall, M.C., Scott, D. & Gössling, S. (2020). Pandemics, Transformations and Tourism: be Careful What You Wish For. *Tourism Geographies*, 22(3), pp. 577-598.
- [10] INS (2021). Sosiri ale turiștilor în structuri de primire turistică cu funcțiuni de cazare turistică pe tipuri de structuri. TEMPO-online-INSSE.
- [11] Khan, F. & Amatya, B. (2020). Medical Rehabilitation in Pandemics: Towards a New Perspective. *Journal of Rehabilitation Medicine*, 52(4).
- [12] Labonté, R., Mohindra, K. & Schrecker, T. (2011). The Growing Impact of Globalization for Health and Public Health Practice. *Annual Review of Health*, 32, pp. 263-283.
- [13] Liang, W. et al. (2012). Response to the First Wave of Pandemic (H1N1) 2009: Experiences and Lessons Learnt From China. *Public Health*, 126, pp. 427-436.
- [14] Loss, L. (2021). COVID-19: Vaccine tourism is developing around the world. *Tourism Review*, February, 8, 2021. https://www.tourism-review.com/vaccine-tourism-setting-off-around-the-world-news11879, (accessed 10.04.2021).
- [15] Martinez-Rodriguez, D., Gonzalez-Parra, G. & Villanueva, R.J. (2021). Analysis of Key Factors of SARS-CoV-2 Vaccination Program: A Mathematical Modeling Approach. *Epidemiologia*, 2(2), pp. 140-161.
- [16] Meghani, Z. (2013). The ethics of Medical Tourism: From the United Kingdome to India Seeking Medical Care. *International Journal of Health Services*, 43 (4), pp. 779-800.

- [17] Mutalib, N.S.A. (2016). Medical Tourism: Ethics, Risks and Benefits. Indian Journal of Pharmaceutical Education and Research, 50(2), pp. 261.
- [18] Osadchuk, M. A. et al.. (2020). Rehabilitation Tourism Opportunities in the Russian Federation for Recovering COVID-19 Patients. *Journal of Environmental Management* and Tourism, (Volume XI, Winter), 7(47), pp. 1865-1870.
- [19] Oyeniran, O.I. & Chia, T. (2020). Fighting the Coronavirus disesase (COVID-19) pandemic: Employing Lessons from the Ebola Virus Disease Response, *Ethics. Medicine* and *Public Health*, 15: 100558.
- [20] Sharma, G.D., Thomas, A. & Paul, J. (2021). Reviving Tourism Industry post-COVID-19: A Resilience-based Framework. *Tourism Management Perspectives*, 37:100786.
- [21] Statista (2021a). Total Contribution of Travel and Tourism to GDP in Europe from 2012 to 2020, https://www.statista.com/statistics/617528/travel-tourism-total-gdp-contribu tion-europe/.
- [22] Statista (2021b). Domestic Tourism Spending Worldwide from 2000 to 2020. https://www.statista.com/statistics/1093395/domestic-travel-spending-worldwide/.
- [23] Statista (2021c). Distribution of Travel and Tourism's Contribution to GDP in Europe from 2014 to 2020, by Domestic and International Spending. https://www.statista.com/statistics/617405/travel-tourism-contribution-europe-gdp-foreign-domestic/.
- [24] Statista (2021d). Domestic Tourism Expenditure in Europe from 2012 to 2020. https://www.statista.com/statistics/617517/domestic-tourism-expenditure-europe/.
- [25] Statista (2020). Domestic Tourism in European Countries Statistics & Facts. https://www.statista.com/topics/3925/domestic-tourism-in-european-countries/.
- [26] Tatum, M. (2020). Will Medical Tourism Survive COVID-19?. BMJ, 370: m2677, dx.doi.org/10.1136/bnj.m2677.
- [27] UNWTO (2021). World Tourism Barometer and Statistical Annex, January. 19(1). https://www.e-unwto.org/toc/wtobarometereng/19/1, accessed 10.04.2021.
- [28] UNWTO (2020). World Tourism Barometer and Statistical Annex, December. 18(7). https://www.e-unwto.org/doi/epdf/10.18111/wtobarometereng.2020.18.1.7, accessed 10 .04.2021.
- [29] Wen, J., Wang, C.C. & Kozak, M. (2021). Post-COVID-19 Chinese Domestic Tourism Market Recovery: Potential Influence of Traditional Chinese Medicine on Tourist Behaviour. Anatolia, 32(1), pp. 121-125.
- [30] World Health Organization. (2020). Support for Rehabilitation Self-Management after COVID-19- Related Illness. Available at: https://apps.who.int/iris/bitstream/handle/ 10665/333287/WHO-EURO-2020-855-40590-54571-eng.pdf, accessed 10.04.2021.
- [31] WTTC (2020). To recovery & Beyond. The future of travel & tourism in the wake of COVID-19, september, 2020. https://wttc.org/Research/To-Recovery-Beyond report wttc september 2020.
- [32] Yaffe, H. (2021). Cuba's ve COVID-19 vaccines: the full story onSoberana 01/02/Plus, Abdala, and Mambisa, https://blogs.lse.ac.uk/latamcaribbean/2021/03/31/cubas-fivecovid-19-vaccines-the-full-story-on-soberana-01-02-plus-abdala-and-mambisa/, accessed 10.04.2021.

- [33] Yang, D.Y. et al. (2020). Preparedness of Medical Education in China: Lessons from the COVID-19outbreak, *Medical Teacher*, 42(7), pp.787-790.
- [34] Yeh, S.S. (2020). Tourism recovery strategy against COVID-19 pandemic. *Tourism Recreation Research*, DOI: 10.1080/02508281.2020.1805933.
- [35] Ziarul Financiar, 19.04.2021, https://www.zf.ro/companii/circa-30-din-turistii-ajunsi-in-hotelurile-care-au-centre-de-20044818, accessed 10.04.2021.