Shifting Tourism Paradigm in the New Normal Era: Case Study of India and Indonesia

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Abstract - Pandemic such as Covid-19 has exposed the individual country’s resiliency plan against such a catastrophic event. The travel of the Corona Virus from Wuhan, China, has almost been unstoppable by the majority of the nations. Tourism is one of the sectors worst hit by the pandemic and consequently millions of people and community associated the industry are directly impacted. Now the pandemic has shown a sign of decline, and the industry has moved towards a normalcy, there is a big question how the outlook of the industry would be in a new normal era. The article analyses the spread of the virus and handling of the same by the respective governments and recommends steps for the sustainable industry in the new normal era.

Keywords: Corona Virus, Covid-19, New Normal Era, and Pandemic

I. INTRODUCTION
Tourism is integrated with the country’s other infrastructural pillars such as transportation, logistics, hygiene, hospitality, security, and healthcare facilities. The global tourism sector accounts for $194.30 billion during 2019, approximately 6.9 percent of the total economy. The sector has incurred around sixty percent of the loss of its remittances in the year 2020. In the year 2021, there is a recovery sign, but it has yet to signal permanency. It may go down further as the different mutant forms of the virus emerge at certain intervals, creating a hindrance for scientists to find a permanent cure soon.

According to the Organisation for Economic Co-operation and Development (OECD) tourism as a global industry has suffered most due to Covid-19 and has badly impacted its stakeholders. The worst part of this deadly pandemic was that the governments and the stakeholders were unprepared for this unforeseen situation. There was hardly any plan for the resiliency to combat this resulting in a domino impact on the other parts of the state's infrastructure, i.e., industrial and agricultural output. Now, the pandemic has reduced to almost a new low. However, the fear of uncertainty remains intact because of its continuous mutations. The stakeholders are waiting crossed fingers for the recovery of the sector.

These developments pose a big question about how the industry would run into the new-normal era where people have also learned to use the virtual world to do most of their activities. Tourism is one of the essential remittances for the global economy, and both India and Indonesia are very much part of it. Tourism creates a symbiosis for the other industries influencing the employment generations and helping establish the national identity and impression. Both Asian nations practice strong democracy, avoid any internal conflict, and
respect Human Rights. Historically both the countries are peace-loving and share common objectives of harmonious social lives. They give importance to society’s cultural and traditional fabrics, which reflects through their social attributes. All the above factors are part of good tourism that both countries have enjoyed for many decades since both countries have received freedom from their respective colonial masters during the early 1940s.

India and Indonesia are the two countries in Southeast Asia that exhibit more common values in the socio-cultural paradigm, apparently due to a long interaction between the two geographical entities for roughly two millennia. This deep and extended interaction also profoundly impacted its economy and other social attributes such as culture, music, and other art forms. The objective of fundamental ideals of life is intersubjective that reflects through epics such as Ramayana and Mahabharata’s hymns through various modes of performing arts.

This shared culture is discernible in monuments and heritage, which became an integral part of tourism of the national identity spontaneously becoming the great objective of the tourism.

In India, mainly Hindu religious places and shrines were the centers of pilgrimage depending upon the occasions, for example, Char Dham (four crucial sacred sites of Lord Shiva for Hindus) during the pre-Islamic period. There are still various ritual practices among the Hindu community performed outside of their home locations, and that place must be sacred, i.e., temple or bank of Ganga. Subsequently, when Islam prevailed, many Sufi religious sites became centers for Hindu and Muslim devotees. The Sufi saint Khwaja Nizamuddin Auliya was built-in 1238–1325 CE in Delhi, and The Haji Ali Dargah in Mumbai is still the leading center for the people to make the pilgrimage. Later, various sites of importance like mountains, valleys, beaches, rivers, etc., became the tourists’ attraction.

In Indonesia, similarly, Borobudur, Prambanan, Trowulan site, various religious places in Bali, etc., became the centers for tourism through the ages. Later, during the post-colonial period, tourists across the globe flocked towards the numerous tourist sites in both countries.

II. INDIAN SCENARIO OF THE PANDEMIC

India has been one of the most affected countries by the Corona Virus. It suffered from the second-highest confirmed cases of 33,678,786 and the third-highest number of deaths (after the United States and Brazil), 473,757 until September 2021. India started its vaccination drive during the second week of January 2021 with Covishield (Oxford–AstraZeneca vaccine, manufactured by the Serum Institute of India (SII) under the trade name "Covishield) and Covaxin (BBV152), developed by Bharat Biotech in association with the Indian Council of Medical Research and National Institute of Virology). Later it added other vaccines like Moderna and Sputnik V. Till the second week of October 2021, India had 100 million vaccinated till the last week of December 2021. India got immunized 50 percent of its entire population.

The number of infections and the death tolls during the second phase occurred due to the lax and unprepared healthcare system. The government and people could not imagine the sudden spurt in the spread of the virus. This catastrophe happened when many religious festivals, social events, and the general elections in a few of the states of India were taking place. The color festival; Holi, which fell on March 29, involves social gatherings, and the Kumbh Mela, which lasted from April 1 to April 30, 2021. Millions of people flocked from across the globe to celebrate the festival near Haridwar, in the Uttarakhand province of India. Even though the local government ordered strict protocols, many devotees got infected with the Coronavirus, as reported.

Such social gatherings became a significant hurdle to control the spread of the virus amid the government's massive vaccination drive. The situation also coupled with the issues healthcare staff faced during the initial days of the vaccinations as there were different rumors about the ill effect of the vaccines among the common mass. However, a few months later, the government could overcome such hurdles with the help of the ASA workers and the local stakeholders.
The initial cases of COVID-19 in India appeared during the last week of January 2020 in Kerala. The victims were three students who had returned from Wuhan, in China, from where the deadly virus spread across the globe. Since then, sporadic cases of Covid-19 started appearing.

The spread of the Covid-19 appeared to be very clear in India when news of the congregation of the Tablighi Jamaat, a part of the religious gathering of an Islamic seminary movement at the Markaz of Nizamuddin, which also called as Banglewali Masjid, located in Nizamuddin West in South Delhi, India. During the congregation, a report came out that a few of the attendees from Malaysia and other countries started falling sick during the third week of March 2020. The incidents were the first cases of Pandemic Covid-19 on persistent intervals. Since then, the pandemic spread like fire. The government took several measures by circulating several compliances for the general public, including strictly maintaining the social distancing norms in the wake up of the fast outbreak of the pandemic.

The government apparatus took several measures to ensure the limit of the spread, and at one point in time, the number of cases came to a very low. Things started coming to the level of normalcy.

III. TOURISM SECTOR

India’s tourism sector holds 2.5 percent of the total GDP. According to the National Council of Applied Economic Research (NCAER) report, the country witnessed 14.5 million job losses during the first quarter of 2020, followed by 5.2 million, 1.8 million in the consecutive quarters during the lockdown period.

The government tried its best to control the breakout during the initial days. However, with the limited preparedness, the country suffered a massive toll impacting all the industries requiring a workforce in a large number. The government took several welfare schemes to offset the loss of the ordinary people, such as transferring direct funds to the accounts of the daily wagers, providing food and unrestrained gas cylinders for a few months.

India has made stringent guidelines for the inbound tourists, however, giving incentives to the tour operators responsible for bringing the inbound tourists. The government constituted a task force led by the Tourism Minister to investigate the loss incurred to the family associated with the tourism and the draft policies to bring back the economy related to the tourism and hospitality sector.

In April 2021, the Ministry of Tourism announced several schemes to rejuvenate tourism in the country. They revealed many incentives to the tour operators to rejuvenate the industry. The ministry announced between $ 30 to 50 $ US dollars per tourist to the foreign tour operators for sending the tourists to India for the minimum 100. This incentive varied from distance to distance.

To make the process easier for international travelers, the government has recently customized the compliance process against the Covid-19.

This latest government mandate is simplified and based upon travelers from the most impacted countries and their risks. The passengers must bring the negative RT-PCR (Reverse transcription-polymerase chain reaction) report. Upon arrival at the airport, they will have to complete a mandatory Covid-test for Rs 500 (6.6 US dollars) and get the test report within 5-6 hours. If tested positive, the passenger will be shifted to a medical facility and have to go through the standard procedure and be in quarantine for seven days and then reappear for the new test on the next day.
Indonesia Scenario:
India-Indonesia has similar experiences in controlling the mayhem of the Coronavirus. Indonesia witnessed initial covid-19 victims during the first week of March in 2020 caused by the severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2). By the second week of April, this pandemic spread across the 34 provinces of the country. As per the latest report, Indonesia has 4,258,560 cases, the highest in Southeast Asia with 143,918 reported deaths.

The unconfirmed report alleged that the unofficial data of deaths from Covid-19 could be much higher. The healthcare system of Indonesia is much lower than India, and there have been various reports about the end of the healthcare workers. The tests so far Indonesia has conducted are significantly less compared to the ratio of populations with India.

The challenges Indonesia faced from the beginning of the Covid-19 cases is the streamlining of data which shows the government's poor management of the information system, which may become a big hurdle in controlling the pandemic. One of the claims from an Australian online journal, "The Conversation", is very surprising. According to their analysis, the government's data on the number of infected persons from Coronavirus is 0.4 percent, which is too low and quoting a Reuters report.

On June 2, 2021, Reuters reported that around fifteen percent of Indonesians had already contracted COVID-19, while the government data shows that only approximately 0.4 percent of the people suffered from the virus.

There have been various reasons for the lurching healthcare facility in Indonesia. Since the country got independence, the government did not pay substantial attention to building sound medical infrastructure as the population grew multifold. The country's private organizations have 63.5 percent in the healthcare sector, and they virtually run the show. Still, as per a report, there are 0.9 beds per 1000 people, with not all having standard quality.

IV. TOURISM SCENARIO IN INDONESIA
Like some of the religious sites in India, Bali is also a sacred and spiritual tourism site. The religious and spiritual conscience of the people become a source of their strength to find any outside elements meant to harm humanity. However, some of them tend to ignore scientific development in doing so. Many such people turned to be the victims of the Coronavirus. India and Indonesia both witnessed such a situation, where people ignored the government circular to maintain the distance with specific protocol meant to avoid contraction of Covid-19. However, such people succumbed to the pandemic and became the strong vector.

Tourism in the New Normal:
Tourism in both countries depends upon a community-based ecosystem that includes the demonstration of traditional life, culture, religious chorus, etc.

Hence, the government may take specific steps and educate the community against Corona and its adverse impact in the future. First of all, seeing the status of Corona and the forecast by the WTO, that Covid-19 has come to stay for a very long time in such a scenario, there have to be sustainable protocols to prevent such pandemics in the future.

Pre-arrival and the Post Arrival of the visitors:
1. The host government can connect with the guest government to ensure that any foreigner inbound/outbound is free from the Coronavirus.
2. Arrangement of direct airways from the source country will help to avoid quarantine in the target country.
3. The packaged tour operators should be trained to educate the passengers as per the prevailed protocols of the country.
4. Separate hospitals equipped with substantial healthcare facilities be facilitated for any eventuality at every big tourist spot.
5. A real-time data from the arrival till the departure of the tourists can be facilitated in collaborations with tour operators.
6. The hotels, parlors, discos, concerts, or other places should have real-time information about the tourists.
7. The tour operators may ask and share the medical history of the passengers to deal with any eventuality.
8. Similarly, the tour operators and the local hosts may update real-time data about the Corona-free environment.
9. The host country may keep the guest country on hold for the time being if the same are having a significant number of Covid-19 patients.
10. The government may provide subsidies and other incentives to enable the industry to pick the road of sustainability.

V. CONCLUSION
As the global community’s conscience is marred with the Coronavirus coming from Wuhan, China, and it is expected that the laboratory-created virus has come to stay for a longer period because of its continuous mutating properties. The community involved in the tourism can prepare to customize themselves so that the sustainability of the industry continues. Tourism should not be considered as only a money-making industry, but it’s a process that a country that showcases its culture, tradition, and heritage. Therefore, it’s very pertinent that the entire community may be educated with the given facility so adopt a new normal. The government must invest in creating strong healthcare facility and be resilient against such pandemic in future.

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