Perceptions of Employees on Effects of COVID-19 Pandemic in Food and Beverage Industry: A Case Study from North Cyprus

Saeedeh Mohammadi

Submitted to the Institute of Graduate Studies and Research in partial fulfillment of the requirements for the degree of

> Master of Science in Tourism Management

Eastern Mediterranean University September 2020 Gazimağusa, North Cyprus Approval of the Institute of Graduate Studies and Research

Prof. Dr. Ali Hakan Ulusoy Director

I certify that this thesis satisfies all the requirements as a thesis for the degree of Master of Science in Tourism Management.

Prof. Dr. Hasan Kılıç Dean, Faculty of Tourism

We certify that we have read this thesis and that in our opinion it is fully adequate in scope and quality as a thesis for the degree of Master of Science in Tourism Management.

Prof. Dr. Ali Öztüren Co-Supervisor Prof. Dr. Hasan Kılıç Supervisor

Examining Committee

1. Prof. Dr. Habib Alipour

2. Prof. Dr. Hasan Kılıç

3. Prof. Dr. Ali Öztüren

4. Asst. Prof. Dr. Özlem Altun

5. Asst. Prof. Dr. Mehmet Güven Ardahan

ABSTRACT

The spread of the Coronavirus (COVID-19) virus, which causes acute respiratory infections, has become widespread worldwide, raising public health concerns. Transmission of the disease occurs through the animal to the human or in the food chain. In addition to the devastating effects of COVID-19, the world is directly affected by the various viruses leading to new challenges, which reduce economic growth and creates a social burden.

This thesis focuses on the impacts of the Coronavirus pandemic on perceptions of employees in food and beverage industry during quarantine and disease outbreaks. The data was collected using a qualitative method by interviewing with employees working at the food and beverage business in İskele, North Cyprus. The results of the study indicate that the Coronavirus pandemic and forced quarantine have hurt the social, economic, and psychological life of employees. The induced damaging effects have been much more tangible on jobs related to the tourism industry. The participants' perceptions focus on food safety, job security, and psychological impacts under COVID-19 pandemic.

Keywords: pandemic, COVID-19, food safety, job security, psychological impact, north Cyprus.

Akut solunum yolu enfeksiyonlarına neden olan Koronavirüsünün (COVID-19) yayılması dünya çapında yaygınlaşarak halk sağlığı endişelerini artırmıştır. Hastalığın bulaşması hayvandan insana veya besin zincirinde gerçekleşmektedir. COVID-19'un yıkıcı etkilerine ek olarak dünyamız, ekonomik büyümeyi azaltan ve sosyal bir yük oluşturan yeni zorluklara yol açan çeşitli virüslerden doğrudan etkilenmektedir.

Bu tez, koronavirüs salgınının, karantina ve hastalık salgınları sırasında yiyecek ve içecek endüstrisindeki çalışanların algıları üzerindeki etkilerine odaklanmaktadır. Veriler, Kuzey Kıbrıs İskele'de yer alan yiyecek ve içecek işletmesindeki çalışanlarla görüşülerek nitel yöntemle toplanmıştır. Çalışmanın sonuçları, Koronavirüs salgını ve zorunlu karantinanın çalışanların sosyal, ekonomik ve psikolojik hayatına zarar verdiğini göstermiştir. Bu dolaylı yıkıcı etkiler, turizm endüstrisi ile ilgili işler üzerinde çok daha somut hale görülmektedir. Katılımcıların algıları, gıda güvenliği, iş güvenliği, COVID-19 salgını altındaki psikolojik etkilere odaklanmaktadır.

Anahtar Kelimeler: pandemi, COVID-19, gıda güvenliği, gıda hijyeni, kişisel hijyen, psikolojik etkiler, kuzey kıbrıs.

ACKNOELEDGMENT

I would like to pay my special regards to my supervisor Prof. Dr. Hasan Kılıç who helped me to reach to this stage. And Prof. Dr. Ali Öztüren, thank you for being so patient, and helping me improve! Teachers like you are hard to find, and I'm eternally grateful for everything you've taught me. You are one of the most influential people in my life just because you taught me to ask questions, never give up, and never quit learning. You inspired me and showed me how important my education is.

TABLE OF CONTENTS

ABSTRACT	iii
ÖZ	iv
ACKNOELEDGMENT	v
LIST OF TABLES	ix
LIST OF FIGURES	X
1 INTRODUCTION	1
1.1 From 2003 SARS Pandemic to 2020 COVID-19 Pandemic	2
1.2 Prevalence of COVID-19	3
1.3 Impact of SARS and COVID-19 on Tourism Sector	4
1.4 Food Safety within the Pandemic Crisis	7
1.5 Impact COVID-19 on Businesses and Employees	7
1.6 Coronavirus Appearance in North Cyprus/ Iskele Region	9
1.7 Study Purpose	11
1.8 Study Contribution	11
2 LITERATURE REVIEW	12
2.1 Recent Infectious Diseases: SARS and COVID-19	12
2.2 COVID-19 on the Rage	15
2.3 Corona Virus and Food Safety/ Wild Stocks	15
2.4 Infected Personnel with COVID-19 in Food Industry	16
2.5 Infected Food Establishment with COVID-19	18
2.6 Food Safety Management Amidst COVID-19 Crisis	19
2.7 COVID-19 Crisis from Food Retailers' Perspectives	21
2.8 COVID-19 and Food Safety	22

2.9 COVID-19 Foodborne Infection and Transmission	. 23
2.10 Safety and Healthy Practices in Businesses During Pandemic	. 26
2.11 The Global Effects of the Pandemic on Tourism Sector	. 28
2.11.1 Impact of COVID-19 on Medical Tourism	. 39
2.11.2 Types of Health Tourism	. 39
2.11.3 Curative Tourism	. 39
2.11.4 Medical Tourism	. 40
2.11.5 Preventive Tourism	. 40
2.11.6 Health Tourism Over Time	. 41
2.11.7 Factors Affecting the Creation of Health Tourism	. 42
2.11.8 Legal Problems in The Field of Health Tourism	. 43
2.12 Important Ethical Issues Can be Raised About Medical Tourists	. 44
2.12.1 Activities in the Field of Health Tourism	. 51
2.12.2 The Slogan of Health Tourism in the World	. 52
2.12.3 Challenges of the Health Tourism Industry	. 52
2.13 Effects of The Pandemic on Media	. 53
3 METHODOLOGY	. 57
3.1 Introduction	. 57
3.2 Aim of the Research	. 57
3.3 Research Approach	. 58
3.4 Research Design	. 59
3.5 Sample Selection	. 60
3.6 Research Design	. 61
3.7 Measuring Instruments	. 62
3.7.1 Demographic Questions	. 62

3.7.2 Nature and Composition of the Main Questions	62
4 FINDINGS	64
4.1 Introduction	64
4.2 Effects of COVID-19 Pandemic on Employees' Social Life	65
4.3 Effects of COVID-19 Pandemic on Employees' Economic Conditions	67
4.4 Effects of COVID-19 Pandemic on Employees' Psychology	71
4.5 Effects of COVID-19 Pandemic on Food and Beverage Operations	73
4.6 Data Analysis	77
5 CONCLUSION	79
5.1 Implementation	82
5.2 Limitations	84
5.3 Recommendation	84
REFERENCES	86

LIST OF TABLES

Table 1: Credited Organizations on COVID-19 and Food Safety (self-arranged) 25
Table 2: Historical Trend and Growth of Health Tourism Industry 42
Table 3: Available Treatments and Services Available at Health Tourism Provider
Centers
Table 4: List of Interviewees
Table 5: Demonstration of the Data Analysis Process in Qualitative Research 77
Table 6: Encodings Words 78

LIST OF FIGURES

Figure 1: WHO Forecasts the Number of Foreign Tourists in the World	9
Figure 2: Demand and Supply in Market Equilibrium	. 36
Figure 3: Demand in Medical Tourism	. 51

Chapter 1

INTRODUCTION

The latest affliction to global health is the current outbreak of the coronavirus. This virus belongs to the family of viruses that provoke respiratory lapses such as at the 2003 SARS outbreak and 2010 MERS outbreak. Since the outbreak in December 2019, the Coronavirus virus dubbed the name of COVID-19 to get differentiated from its predecessors. The COVID-19 is the mutant form of the virus that caused SARS in 2003 in China. These two viruses, structurally related as both target the respiratory system of mankind (Nassiri, 2020).

However, as compared with the SARS outbreak (2002-3) in China and Middle-East respiratory syndrome (MERS) in 2012 till present, this COVID-19 has been an eerie phenomenon since it has posed significant havoc within medical communities, scientific centers, and public (Falzarano et al., 2016).

Guan and his colleagues in their article, they spotlighted an intricate clinical and epidemiological description of those 425 cases, who were at the focal center of this outbreak, the city of Wuhan in China (Guan and Wang, 2020). Therefore, they affirmed that 56% of patients were male, with no symptomatic cases in kids younger than 15 compared to adults. Either, kids are less likely to become infected or if they caught the disease, their symptoms are mild and evaded examination which has afflicted the scope of the population who contracted the virus (Guan and Wang, 2020). Latest studies have manifested that each infected person can transmit the virus to two individuals, at least, based on approximated preliminary reproduction number (2.2), since the momentum of dissemination of a respiratory virus, like COVID-19 has a concrete impact on the strategies which should be deployed to mitigate and cease the virus, therefore, till this number (2.2) has not plunged to less than 1.0, the outbreak will be unleashed. Some reports have raised concern on the early course of this virus contamination, as the symptoms seem not intense, the chance of infectivity during this cool period is high (Holshue et al., 2020).

1.1 From 2003 SARS Pandemic to 2020 COVID-19 Pandemic

In late December 2019, a series of unexplained cases of pneumonia were reported in Wuhan, China. The government and health researchers in China have taken swift steps to control the spread of the pandemic and have launched an etiological study (Gholamreza et al., January 2020).

On January 12, 2020, the World Health Organization (WHO) temporarily renamed the new virus coronavirus -2019. On February 11, 2020, the WHO officially named the disease caused by Coronavirus Novin-2019 Disease Virus Corona 2019 (19-COVID) (COVID-23). On the same day, the CSG (International Committee for the Study of Viruses) classified it as Acute Severe (SARS-CoV-2) (Respiratory Syndrome). On February 23, 2020, 77041 cases of COVID-23 infection were confirmed in China. The number of infections has exceeded the prevalence of severe acute respiratory syndrome (SARS) in 2002 in China. On January 12, 2020, the World Health Organization (WHO) temporarily renamed the new virus coronavirus -2019. On January 30, 2020, the WHO declared the Coronavirus virus-2019 pandemic an emergency public health concern (PHEIC). On February 11, 2020, the WHO officially named the disease

caused by Coronavirus Novin-2019 Disease Virus Corona 2019 (19-COVID () COVID-23). On the same day, the CSG (International Committee for the Study of Viruses) classified it as Acute Severe (SARS-COVID-2 (Respiratory Syndrome. Based on the documented archives, 2003 SARS, claimed the lives of 774 people and infested 8,098 individuals from different parts of the world, at the short time-lapse of November 2002 and July,2003 (Gholamreza et al., January 2020).

On the contrary, the novel virus, known as COVID-19, despite overlaps 80% of its genome with SARS, yet seems to be more aggressive since it has executed three times more in just eight weeks as compared with SARS in eight months. Ongoing scientific research has displayed that due to its swifter transmission, the virus has managed to claim more lives (Gholamreza et al., January 2020).

The outbreak of acute respiratory illness began with the sudden arrival of SARS, which began in November 2002. It has spread to more than 30 countries on four continents, killing 5,000 people and killing more than 300 in China, Canada, Vietnam, Singapore, and Thailand. The disease is transmitted from air borders or possibly other entrances by people who have traveled to infected areas. The first case of the disease in the Middle East in Kuwait was reported by the World Health Organization, and India has seen the first case, which is likely to spread with a population density. (Gholamreza et al., January 2020).

1.2 Prevalence of COVID-19

The outbreak of COVID-19 triggered international apprehension, due to its enigmatic features, easy transfer via some certain conditions and its momentum in quick spread

through public transit and fear-mongering by widespread media coverage. Hence, national and international dignitaries issued travel ban from and to some certain part of the world which had been hit the hardest by the disease, while setting up aggressive vetting screening system at congested transit zones and hotspots to assure the population that they had got it under control to diminish global psychological anxiety (Nassiri,2020). Such drastic measures once before, was taken during the SARS outbreak, impeded international travel in the year 2003, surpassed even the frontiers of those countries which they had the least impacted or not strike at all. Besides, on one hand, the slow reaction from the government and inept media coverage, especially in nonaffected areas, in another hand, expensive insufficient airport screening, all doled more momentum to the out-break which led to sweeping paralysis of international travel (John et al.,2005).

1.3 Impact of SARS and COVID-19 on Tourism Sector

The impact of SARS on the national economy of different countries in the year 2003, felt differently, for instance as China was the birthplace of the disease, the impact on its national economy, in particular, tourist economy was devastating since, China National Tourism Administration (CNTA), announced sharp revenue decline in these tourism-related areas; a sharp decline in domestic tourism, cost the country at around 24 billion dollars, as compared with a decline in international tourists cost at around 8 billion dollars. Also, other touristic related activities encompassing; lodgings for travelers, travel service anchors, tourist vehicle and ship enterprises, tourists' destinations and hotspot and job-related tourism, all struck enormously (Wilder and Smith, 2005).

The world travel tourism council (WTTC) in Portugal, released a special statement, outlining the graphic economic impact of SARS on tourism sector of some Asian countries (China, Hong Kong, Singapore, and Vietnam) due to WHO 's travel restrictions to these high alert destinations (See, hospitality net.org, Oberholzer, Sivitz, 2004). In most countries, the tourism industry is a very important source of income, and governments are trying to be very successful in this area. They have provided the right infrastructure to achieve the goals in the tourism sector. Because this industry plays an important role in strengthening business activities, foreign exchange earnings, and job creation in the country. This industry has been affected by unexpected events many times in the past, and suddenly the international demand in this industry is disappearing. (Blake and Sinclair, 2003).

The outbreak of SARS triggered international apprehension, due to its enigmatic features, easy transfer via some certain conditions and its momentum in quick spread through public transit and fearmongering by widespread media coverage. Hence, national and international dignitaries issued travel ban from and to some certain part of the world which had been hit the hardest by the disease, while setting up aggressive vetting screening system at congested transit zones and hotspots to assure the population that they had got it under control to diminish global psychological anxiety (John et al., 2005).

The tourism industry has historically seen declining demand due to natural disasters, social instability, war, terrorism, infectious diseases worldwide, and in 2002 and 2003 the SARS virus in the East Asian region imposed this declining demand on the industry. The first official SARS case was registered in November 2002 in Guangdong Province, People's Republic of China (Silva, 2004).

Unfortunately, the Guangdong government failed to control the outbreak in the early stages of the SARS outbreak (Silva, 2004). The number of people who died was growing, and the seriousness of daily affairs had increased dramatically. After the World Health Organization warned that fears of contracting the SARS virus led to the cancellation of a large volume of travel bookings (WTTC, 2003). The global spread of this infectious disease threatens the health and well-being of tourists and naturally reduces their motivation to travel. The dramatic decline in the fact that tourists are very sensitive to the crisis, so the tourism industry is characterized by sensitivity and volatility. SARS has influenced the preferences and preferences of tourists, especially the types of tours and travel patterns. People are more inclined to work outdoors and in the environment of tourism, and the residents of the city prefer to travel to the suburbs and suburbs (Zhang Wen et al., 2005). We have seen a decrease in travel around the world due to declining foreign incentives and measures and travel bans. SARS has caused the general public to take health issues seriously. Health and safety become a principle when deciding on travel and tourism. When it comes to COVID-19 has had significant ramifications on the global economy, targeting different players, from farmers and ranchers in the USA to manufacturers of automobile parts and solar panel screens in India and China to the tourism industry in Europe and some part of Asia. (Zhang Wen and Raphael Kavanaugh, 2005).

However, the world's attention has descended mostly on the mortality rate of COVID-19, rather than its significant economic toll, since more than 14 million people have been infected and 590,000 deaths so far have been pronounced by August, 20th (world health organization).

1.4 Food Safety within the Pandemic Crisis

Coronavirus has many negative consequences, the most important of which can be seen in food and beverage consumption (Manthey and et al., 2017). Psychological stress, lack of social interaction, and uncertainty about the future during and after crises such as the COVID-19 pandemic is a pattern that greatly exacerbates alcohol consumption and increases the attributable damage (Galanakis and Preface, 2019).

On the other hand, studies have shown that the coronavirus can remain frozen for up to two years. For this reason, hand washing and disinfection of potentially tangible surfaces in restaurants is mandatory and must be permanent. Food experts face major challenges because they ensure food safety and food security. They are also responsible for identifying appropriate and safe protein sources to meet consumer expectations (Rehm et al., 2017).

Besides, during the Coronavirus pandemic, viruses should provide innovations that are both economically viable and functional foods enriched with biologically active compounds and antioxidants that strengthen the immune system (Charis ad Galanakis, 2020).

1.5 Impact COVID-19 on Businesses and Employees

The first impact of the Coronavirus on the tourism industry is related to the unemployment of large numbers of people around the world. According to a study by the World Travel and Tourism Council, the outbreak of the Coronavirus will put 50 million people around the world at risk of losing their jobs. Of course, the impact of Corona on the tourism industry depends more on how long the virus continues to spread and the number of unemployed is likely to increase. But with a three-quarter drop in travel this year, the unemployment of 50 million people seems almost certain (Uddin et al., 2020)).

The World Tourism Organization estimates that the global coronavirus pandemic will have a far-reaching impact on the global tourism market, with a 20 to 30 percent drop in the number of international incoming tourists from 290 to 440 million. This is while in 2019, the number of international tourists is about 1.5 billion people, with a growth of 4% compared to 2018, and with the continuation of the growing trend of tourism in 2020, the number of incoming tourists increased by 3 to 4% to 1.6 It was estimated at a billion people. The damage to the world tourism market due to the corona outbreak has been far more devastating than the global recession of 2009 and the SARS outbreak in 2003. In 2009, the global recession was triggered by the 2008 economic crisis, as well as the 9/11 attacks, which reduced the world's 37 million incoming tourists and reduced the impact on the tourism market by 4%. Also, the prevalence of SARS in 2003 led to a decrease of 3 million tourists and as a result, its impact on the world tourism market was negative 0.4 percent (Lemieux et al., 2020).

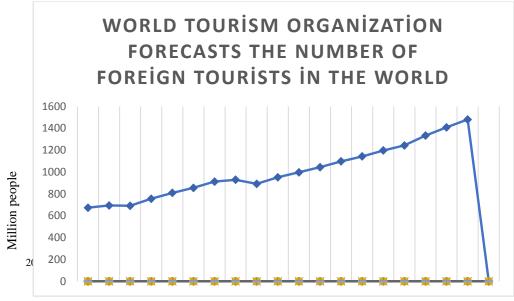


Figure 1: WHO Forecasts the Number of Foreign Tourists in the World (Lemieux et al., 2020).

The World Tourism Organization, which set four strategic goals and five program priorities in a two-year vision for 2020-2021 to support jobs and tourism development, will delay the outbreak of the Coronavirus for years. The devastating effects of the Coronavirus on the global tourism market will not be limited to 2020, and forecasts indicate negative effects and harms over the next 5 to 7 years, which will have a severe impact on jobs, opportunities, and the tourism market economy (Bartik et al., 2020).

1.6 Coronavirus Appearance in North Cyprus/ Iskele Region

North Cyprus is an Island, lied in the North East of the Mediterranean Sea, 65 kilometers far from its neighbor; Turkey in North and 97 kilometers far from Syria in East. Its hot summer, sandy beaches, scuba-diving activities, and tantalizing atmosphere has made it qualified to become one of the top tourist attraction spots, especially for Europeans who do not have the privilege of sun. Also, it is renowned in its numerous casinos and extensive gambling (www.Famagusta.org). Tourists start to flock to the island from the mid-February. While, one of the regions on the island, dubbed as Iskele region abounds with foreign tourists, predominantly, Russians and Iranians who either have purchased condos in Caesar or its vicinity or their lease has been a long-lasting lease due to being an international student. Such characteristics have made the region very much susceptible to harbor the cases of COVID-19, specifically regarding those foreign tourists who travel to the island from hard-hit areas of Europe, crossing through Istanbul international airport (www. Famagusta.org).

Since the COVID-19 was declared a pandemic by a world health organization, two split cases of the virus have been detected on the island, on the ninth of March 2020. First a 25-year-old man from Limassol, who just got back from Italy and 65-year-old health professional, Nicosia resident who flew back from the United Kingdom. As the days elapsed, more cases came to light. Thus, on March 11th, two Greek Cypriots who flew back from the UK and a Turkish Cypriot taxi driver were all hospitalized. Mean-while, as these cases were in stride, some individual, turned out to be the grandson of the tainted taxi driver got quarantined at home, lurking for any signs of symptom development (https://mfa.gov.ct.tr/ and https://www.aa.com.tr/).

Appallingly, the next day [12th of March] few more cases were reported as one who traveled in advance to the UK, visited dignitaries there, contracted the virus, and flew back to the island. Also, under similar circumstances, three more suspicious cases flew back from Italy, Greece, and one anonymous vector from Germany. As the numbers of affirmed cases were mounting, the president of North Cyprus, on 13th of March issued in a statement that for the subsequent 15 days, all borders had to get shut down, with an exception for nationals (https://www.aa.com.tr/ official website).

1.7 Study Purpose

The impact of 2003 SARS on the national and international economy was estimated, and its catastrophic outcomes emerged in different scholarly results. As the world is mastering more about the novel form of coronavirus, dubbed as COVID-19, its exasperating consequences on the national economy in general and tourism economy, in particular, has already been felt, due to sharp plunge in the stock exchange market in one hand, self-quarantine and creation of a new trend of social distancing in another hand. Therefore, based on retrospective scholarly researches on SARS and created havoc by its new successor; COVID-19, the study aims to address the impact of the coronavirus pandemic that has affected people's lives in terms of food and beverage, public hygiene, business, and mental health who are residents in Caesar region. The second aim of this study concentrates on the impact of COVID-19 on restaurants.

And the third aim of this study sheds light on the sensitivity of the decisions which consumers and owners of small businesses have made to deal with the outbreak more meticulously.

1.8 Study Contribution

This study will anchor the opportunity for authorities to deduce the sheer scale of the psychological toll on foreign consumers and their loud expectations from authorities and corporate folks in this pandemic crisis.

Also, this paper contributes by arousing the small destination businesses to create their contingency relief program to cope with such erratic events in a more well-equipped way.

Chapter 2

LITERATURE REVIEW

2.1 Recent Infectious Diseases: SARS and COVID-19

The story of SARS [Severe Acute Respiratory Syndrome] gets back to November, 2002 in Guangdong province of China, lingered approximately for six months, due to susceptibility of the virus to warm temperature, tainting almost 26 provinces in China, and penetrating health system of neighboring countries. Since SARS contraction and its global pandemic can be consolidated with travel, those who primarily affected by the disease, transferred it across the Chinese border, which led to an impulsive outbreak of the disease, to the extent that those tainted travelers dubbed as disease colluders, therefore tourism sector and those countries relied on their tourism economic power wheel got victimized by that (Wilder and Smith, 2006).

SARS was hailed as the pandemic disease of the 21st century. The rationale behind its designation was due to its infectious momentum since it disseminated globally after its first appearance in Foshan, Guangdong province in mainland China, then, later tainted more than 8000 individuals, led to 774 certified cases of death, in 26 countries located in five divergent continents. Such surge simply, spoke volumes on the dramatic role of globalization and international travel in the circulation of the disease, in a pandemic vein (Peiris et al., 2003).

Meanwhile, the outbreak initiated by one American businessman as disease colluder who unintentionally was carrying the local disease from China, through Hong Kong to Vietnam, on 23th of February 2003, turned it into an impulsive global outbreak, struck the Vietnamese health care system, led to the vigilant global announcement by WHO on March 12th of the same year (Zhong, 2003).

Besides, this business traveler, they were 10 more travelers who had contact with this traveler, stayed in the same hotel and the physician who treated this American patient without protective equipment, all contributed to this unleashed global outbreak in that particular year (Zhong, 2003).

Later down the road, all those countries with major outbreaks, they noticed that they had harbored the disease, without the knowledge and already had been infected before the implementation of infectious disease control measures. Interestingly, despite no vaccine was designed nor specific treatment was outlined, as soon as veins of disease transmission were detected and curbing measures were taken into the equation, the outbreak got neutralized (Dye and CGN, 2003).

Experience manifested that deployment of primitive public health measures entailing; precise medical screening, punctual identification, and isolation, quarantine of those who come across the potential vector and at last, aggressive infectious disease control scheme, as well as travel bans all could hamper the wild surge of this disease, which led to the declaration of the end of the SARS Pandemic on 5th of March. Since then, few cases got reported which none was a life-threatening or potential pandemic trigger (Dye and CGN, 2003).

The latest affliction to global health is the current outbreak of coronavirus. This virus belongs to a family of viruses that provoke respiratory lapses such as at the 2003 SARS outbreak and 2010 MARS out-break. Coronavirus which causes severe Flu, SARS, and MARS, they have one thing in common, symptoms of the common cold. Since the outbreak in December 2019 arose, the responsible virus, dubbed the name of COVID-19 to get differentiated from its predecessors. The virus responsible for COVID-19 is the mutant form of the virus that caused SARS in 2003 in China. These two viruses, structurally related as both target the respiratory system of mankind (Nassiri, 2020).

Latest studies have manifested that each infected person can transmit the virus to two individuals, at least, based on approximated preliminary reproduction number (2.2), since the momentum of dissemination of a respiratory virus, like COVID-19 has a concrete impact on the strategies which should be deployed to mitigate and cease the virus, therefore, till this number (2.2) has not plunged to less than 1.0, the outbreak will be unleashed. Some reports have raised concern on the early course of this virus contamination, as the symptoms seem not intense, the chance of infectivity during this cool period is high (Holshue et al., 2020).

Lie and his colleagues in their article, they spotlighted an intricate clinical and epidemiological description of those 425 cases, who were at the focal center of this outbreak, the city of Wuhan in China (Guan and Wang, 2020). Therefore, they affirmed that 56% of patients were male, with no symptomatic cases in kids younger than 15. Either, kids are less likely to become infected or if they caught the disease, population who contracted the virus (Guan and Wang, 2020).

2.2 COVID-19 on the Rage

USA, China, and European countries unanimously have created a travel ban globally, to rein in the rage of this disease. Such drastic restrain on human flows between different continents, especially from China and that Hubei province as the epicenter to the USA, has helped to diminish the momentum of such affliction dramatically since, 78,191 laboratory cases verified in China and from the onset of February 26, 2020, 2918 more cases, detected in 37 other countries or territories around the world which specifically, 14 cases confirmed in the USA due to loose travel between China and USA territory or confrontation with those who were vectors or had the virus undetected (Geneva, WHO, 2020). Further scrutiny unleashed that out of 14 contaminated USA citizens, 3 deported from China and others came to the proximity of contaminated or potential vectors. Further statistics revealed that among contaminated USA citizens, 42 retrieved from a cruise ship where the infection disseminated (Hageman, 2020).

The aggressive circulation of this virus among, different communities around the world, specifically, involving and afflicting the civic health of Americans, made the world, comes to a unanimous consensus on "social distancing", to budge the containing strategy to alleviating one, to curb the virus aggressive spread. Quarantining potential vectors, detecting unverified cases, isolating sick people, encompassing self-isolation, home-detention, the suspension on any public interaction, socialization, school closure all emerged under the umbrella of social distancing. In return, online communication and telecommunication were all postulated as a temporary resolution to tangle and overcome this unleashed out-break (Fauci, 2020).

2.3 Corona Virus and Food Safety/ Wild Stocks

Currently, it has been no confirmed case of dissemination of COVID-19 by tainted

food anywhere on the planet, meanwhile, since the origin of the virus, stems from wildlife, hence, wildlife market has been shut down and any soliciting wildlife animals or their products have been banned. Also, precautionary measures have been taken to sanitize the package or container of the food products and disinfect any hard or sloppy surface which comes to direct contact of the consumer. Due to such drastic measures, WHO has declared hands rinsing by hands sanitizer 20 seconds 20 times as the symbol of 2020, the current year which has been ambushed by the virus (Seymour et al., 2020).

Regarding wild stocks, recent reports have manifested the fact that the virus has originated from wild animals, which was the case in Wuhan, China. Further scrutiny by Chinese authorities revealed that the wet markets in Wuhan as the pivot of wildlife disposal, was the birthplace and epicenter of the virus transmission, as a virus could get disseminated quickly from one infected wildlife to another and tainted whoever was in contact with selling or buying that wildlife. In this regard, all wet markets in China got suspended indefinitely. Although, these precautionary measures were taken to clinch the safety of food and health of communities, still WHO advised that regular hygiene practices must be pursued in the case of explicit confrontation with live or dead animals. These devices should be entertained as it is followed; bathing hands after touching animals or hovering around them, workers who are dealing with any type of live or dead animal, for any reason, they must follow the same suit and finally in the case of virus contraction you must bar yourself from any contact with any living being, regardless of human or wildlife (Seymour et al., 2020).

2.4 Infected Personnel with COVID-19 in Food Industry

Corona's pandemic has created new challenges for universities and industries. Because wildlife consumption plays a prominent role in tourism, the industry relies on food,

but the food may have negative consequences for tourists and the general public (Ying et al., 2020).

Food is the cornerstone of tourism (Hall and Mitchell, 2001). Tourism can also stimulate tourists to consume wild animals due to changes in geography, self-knowledge, and moral identity (Ying et al., 2019). Travelers are attracted to exotic foods. In Mexico, for example, local foods such as huitlacoche (a dish made from corn mushrooms), cactus worms, ant eggs, and hawthorn tacos (locusts) may be eaten (Pilcher, 2004).

Wildlife markets are publicly or covertly operated in many countries (for example, the Mongolian market in Myanmar, the Kad Tong Kiwiana market in Thailand, and the Huana seafood market in China) (Hoffman et al., 2005; Marcotti et al., 2019).

Consumption of wild animals and food neophilia tourists in China and other Asian countries such as Indonesia, consumption of meat, and products from wild animals' dates back to prehistoric times. Although wild animals are no longer part of the food requirement, they are considered as a symbol and special food in certain areas. (Li, et al., 2020).

In general, norms have always determined that any staff who is subjected to any particular sickness or pestilence, should have access to leave of absence, which plenty of employees despite they are awfully sick, will not grab leave of absence due to unpaid leave, however, in the case of contagious disease, or the rare case of endemic or pandemic, they must brace for even redundancy. In regard to, the sweeping spread of COVID-19, staff who either have been diagnosed for the virus, or have been suspected to be the vector or others who have not come to the explicit or implicit contact with the virus, but due to the compromised immune system, or diagnosed for other health issues[acute or chronic] they must be laid off, treat themselves with home- quarantine in order to ward others off this contagious disease. In addition, as some of the symptoms of this COVID-19 has been undisguised, encompassing: hacking in the air, sneezing, sore throat, fever, headaches, flu-type symptoms, therefore, such redundancy or solicit for being safe and stay at home can safeguard against any unsanitary conditions (Seymour et al., 2020).

Such precautionary measures have been advised to be taken since, it has been attested scientifically that COVID-19 can transfer from one individual to another via, coughs and sneeze drop-outs, flocking into the air and landing on the facial features of the opposite person [nose, mouth, skin, hands... other exposed part of the body which comes in proximity to the oral cavity] who is standing by (Seymour et al., 2020).

2.5 Infected Food Establishment with COVID-19

Preliminary data attested that there would be a possibility that the virus which induces COVID-19 like other viruses, can survive on hard surfaces, objects. Further, Scrutiny debunked the reservation and testified that responsible virus has the capability to stay in the air for several days and on hard surfaces for several hours, therefore, WHO in a new statement urged all people from different walks of lives due to confronting this pandemic to sanitize hard surfaces, packages, containers and anything which has been touched outdoors and drifted indoors (Seymour et al., 2020).

Meanwhile, there has been no reported evidence or complaint of COVID-19 transmission from either "edible food or food packaging to human as other scientific evidence shed a light on this fact that COVID-19 requires a living host [animal or human] to maintain its function, therefore, cannot grow inside food (Seymour et al., 2020).

2.6 Food Safety Management amidst COVID-19 Crisis

Indubitably, food safety always has been recommended, regardless of encountering endemic, pandemic, or pandemic. However, in the case of COVID-19 outbreak and its pandemic declaration by WHO, our precautionary measures must be more aggressive here, are cautionary recommendation which has been highlighted by all active legitimate sources, covering on this pandemic. Recommendations featuring as; vetting food preliminary source of production, soliciting any ambiguous question regarding the food or its packaging from licensed food experts, purchasing the food from well-acknowledged, licensed sources. Moreover, in respect to food preparation; sanitizing the whole area and whatever comes in direct contact with the food such as utensils, assuring the hygiene of our hands and hard surfaces in contact with food and finally, cook the food with proper heating temperature and retain it in the safely-recommended temperature. In the case, these advisory hints will get pursued, the prospect of catching any food poising or contracting any virus will get plummeted and hopefully, eradicated (Seymour et al., 2020).

So far, no single evidence has been informed on the spread of COVID-19 via food. Similarly, no evidence of viral transmission came to notice during the outbreaks of SARS and MERS via food consumption or packaging. However, there are cautionary reports on other forms of corona virus's infection due to food intake (Hobbs, 2020). Based on the presented evidence and latest scholarly research, dissemination of COVID-19 from one human to another through consumption of tainted food is infeasible since the virus cannot linger outside alive host [human/animal] therefore, overall risk of spread from food is low key.in addition, the feasibility of spread from food products, food packaging which has been shipped for days and weeks, refrigerated or frozen is highly low too. Therefore, those individuals who are involved in food preparation and processing and consumers, simply have been advised to follow the projected guidelines by WHO in order to remain safe and un-contaminated. The pivot of these approved health-safety guidelines descends over one consented fact which is sanitization of hard surfaces, rinsing hands, and covering nose and hands by protective tools such as disposable masks and gloves. In addition, any contact with those who have contracted the virus with or without symptoms, is a potential risk to health stability of those who have not contracted the virus and at the same time, they are high risk, businesses they must comply with WHO announced guidelines to keep everyone in check and safe, in this case, those contaminated staff must not get engaged in any part of food preparation nor food delivery. They must get redundant (www.WHO/food standards/gov safety).

Since the crisis such as pandemic COVID-19 Usually unemployment and reduced working hours led to a reduction in income for an increasing portion of the population, it is possible to budget more difficult and reduce the consumption of alcohol and the problems of excessive (Rehm et al., 2020).

As alcohol consumption could prevent the spread of COVID-19, the news spread in Thailand, Iran, and Belarus, killing about 180 people in Iran. That's why the government has banned the sale of alcohol in these countries. Disinfecting your hands with alcohol has created a misconception among people that drinking alcohol can help prevent the virus. If doctors have confirmed that alcohol consumption destroys the immune system (Chick, 2020).

2.7 COVID-19 Crisis from Food Retailers' Perspectives

The crisis we encounter recently has been unprecedented, therefore, food retailers can learn lessons from the past crisis by SARA and MARS and this current plague in order to adjust their business settings. The past few weeks have revealed that to what extent the purchasing behavior of consumers has got evolved, steering to unhealthy trends such as; panic buying, hygiene hoarding, medicine hoarding, and changes in demand for some items used to be treated as trivial items. Such unprecedented transition has led to stockpiles and shortages of some certain food and goods items in shops, stores, and their warehouses and complication of delivery for deliverers (WHO/food standard/gov safety).

Food retailers in order to refrain from any complication, disorientation, and safeguard employees, they keep updating their contingency relief programs, to equally support the employees and their position. However, it is absolutely pivotal to maintain operation at a high level in order to fulfill the persisting demands of employees and customers. In addition, retailers must re-assess their pre-crisis competitive advantage strategies (Mussell and Hedley, 2020).

FDA has assured the American public that there has been no food crisis and shortage of some certain products are due to local hoarding of the same products by folks in some particular neighborhoods. In fact, they negated, food scarcity due to food plant's closure as a response to the COVID-19 crisis since the primary customers of food plants; schools and restaurants are shut down due to the practice of social distancing. A customary grocery store today can accommodate over 50,000 different food items.

While they have been a report of scarcity in some certain stores related to certain products, the reality is that, most food items have been piled up in the warehouse or store's storage. In fact, the retail supply chain is robust as before, as manufacturers and staff are bending over backward to replenish the shelves. In addition, FDA confessed that they are working closely with food industries to eradicate any shortage or any disruption in the food supply chain (www.FDA.gov).

2.8 COVID-19 and Food Safety

When it comes to minimizing risk in shopping for groceries, first, we have to heed some primary steps encompassing: usage of hand sanitizer by entering the store, carrying sanitizer in your pocket, or bathing your hands by sanitizer before leaving the house or after departing the store, disinfect yourself. In addition, bringing disinfecting wipes to wipe off dirt, virus and any germ from the carts, handles and any object comes to be touched is conventional wisdom. Exercise, social distancing, maintain 6 feet distance with others. Fudge touching places, unnecessary items, and your face. And of course, do not shop in the case you have suspension that the place has been exposed to the virus (Danyluk et al.,2020).

Groceries are complying with guidelines to cleanse and disinfect; however, some have confined hours to fulfill the task. Plenty of stores, during these crises, have been bidding hand sanitizers wipe cleaners, disposable gloves for complimentary to combat the virus. In addition, those individuals with the susceptible immune system, are allowed to order their stuff home-delivered, which such service will diminish the numbers of un-necessary contacts and shrink the size of the crowd outdoors. Moreover, delivery can ward off those vectors who are not manifesting any sign or symptom of the disease, from others who have not contracted yet (Danyluk et al., 2020). In regard to purchasing groceries, refrain from touching all products, until you get sure you want to buy it. Although there has been no statement on the transmission of the disease through food item or food packaging still, food packages, surfaces and food items such as fruits and veggies need to get disinfected, meanwhile, there is no need to leave fruits and veggies inside enclosed places outside the home, like garages, cellars and inside cars. Nevertheless, it is not advised to wash groceries and fruits, edible stuff with detergents, washing liquids, or other disinfectant chemicals. In addition, there has been no single scientific proof of evidence that the virus can propagate by food, nor any heating temperature has been scientifically affirmed to deactivate the virus (Danyluk et al., 2020).

2.9 COVID-19 Foodborne Infection and Transmission

Bats and pangolins have been scrutinized due to suspicion of this virus transmission; therefore, further studies are required before excluding the possibility of disseminating the virus from tainted food to humans. Foods contain meat entailing; seafood, poultry, pork, and beef, all they contain a high level of heparin sulfate an element that nourishes COVID-19 (Mycroft et al., 2019). Knowing that this virus, based on the current released evidence can survive on hard surfaces such as cardboards, plastics and stainless steel for hours, therefore, there is a real concern that this virus can get sanctuary inside such food thanks to their nourishing element, then get transferred into the human body, hence, more studies with clinical trials must emerge in order to debunk or endorse this concern (van domain et al., 2020).

In contrast to other infected viruses or robust withstanding bacteria, which could endure extreme temperature and sustain their detrimental impact, COVID-19 cannot live on surfaces for a long time. As a matter of fact, unlike bacteria, viruses cannot metastasize in food, and as time elapses, they get shrunk in numbers. Recent trials manifested that COVID-19 can linger on hard surfaces up to 9 days, therefore, Surface disinfection with 0.1% sodium hypochlorite (bleach), 0.5% hydrogen peroxide, or 62-71% ethanol might retard COVID-19 infectivity impact in one -minute exposure. A similar story was reiterated for SARS. In fact, recent trials attested to the fact that COVID- 19 can survive in the air up to three hours on copper up to four hours, on cardboard up to 24 hours and on plastic and steel up to 72 hours (Kampf et al., 2020).

When it comes to food handling, there is a feasibility that COVID-19 can get transferred by touching tainted packages via, contaminating the hands, and patting your facial features, however, there has been no single report on such mode of contamination so far. Although, some certain individuals might become infected such as the elderly, people with the susceptible immune system, chronic patients, therefore it is recommended to rinse hands with soap and alcohol-based hand sanitizers. Ironically the virus does not remain alive inside the stomach due to the power of HCL (www/who is it/ Recommended by WHO, 2020).

The European Food Safety Authority (EFSA) have cited that there is no single alibit to support the dissemination of COVID-19 through food or food packaging .nevertheless, these outcomes manifest that the infected form of COVID-19 get through GI tract system and taint the human wastes which can lead to the outbreak of SARS-COVIT 2 known as COVID-19. Such a cycle also is more proof that why protection against COVID-19 by the simple act of handwashing is crucial (Danyluk et al., 2020). There are several agencies that can dole up-dated insight regarding COVID-19 and food safety, which all have been categorized in this following table.

Organizations	Websites
World health organization (WHO)	https://www.who.int/emergencies/diseases/novel-
	coronavirus-2019
Food and Drug Administration	https://www.fda.gov/emergency-preparedness-an-
(FDA)	dresponse/mcm-issues/coronavirus-disease-2019-
	COVID-19
Center for disease control and pre-	https://www.coronavirus.gov
vention (CDC)	
USDA animal plant health inspec-	https://www.usda.gov/coronavirus
tion service (APHIS)	
European food safety authority	https://www.efsa.europa.eu/en/news/novel-corona-
(EFSA)	viruswhere-find-information
Institute of food technology (IFT)	https://www.ift.org/about-ift/novel-coronavirus-up-
	dates

Table 1: Credited Organizations on COVID-19 and Food Safety (self-arranged)

Based on the provided information by all these agencies, virus epidemiology is enigmatic, and disorientation has mounted since the virus has the ability of mutating its genome and gets evolved and withstanding and can transfer from animal population to human hosts. How precisely such transfer is happening, it is still an uncharted territory but it seems can get transmitted from a congested wilds stocks environment to human who is in that environment. Laboratory results have underpinned clinical trials that fecal-oral dropouts must be contained to cease the virus curve. The bottom line, released information from the FDA has not issued any threat so far from food materials and food packaging contamination, and virus transmission to humans (www. FDA, GOV). however, those people who are sick by the virus they must get isolated and not come in direct contact with food items since the virus through their dropouts and mucous can land on the food and taint them. In addition, despite exotic wildlife cited as a preliminary source of virus transmission, yet, no single case was affirmed by CDC, regarding early or late human infection due to ingesting contaminated meat which literally was sold in the wholesale market in China (Norton and Monu, 2019). The first line of prevention, is screening staff, employees, workers, and whoever comes in explicit contact with food, materials, and environment in which food is piled up and stored. Since the virus has the ability of several hours' survival on hard surfaces therefore, decontaminating all those surfaces which have been presumed to have come in direct contact with the virus, in addition, disinfecting hands can be sensible to suppress this virus transmission. In addition, all food services must comply with the latest guidelines that have been issued by the WHO, FDA, and CDC regarding this recent pandemic (Norton and Monu, 2019).

In the case, you have purchased groceries for someone, the best option is just dropping it off the door, or in the case you are forced to carry it in, you must disinfect your hands upon arrival, while unpacking and re-arranging the stuff (Norton and Monu, 2019).

2.10 Safety and Healthy Practices in Businesses During Pandemic

The optimal way to assure the hygiene of businesses and ward businesses off the COVID-19 is to follow sanitary guidelines that have been released by WHO. Each accredited established business, it must own an approved food safety program for hygiene, sanitation, and cleansing the business environment and its pertinent amenities. Therefore, having access to healthy running water to bathe the grounds, floors, and any utilizing tools and equipment, reinforcing the sanitization process with approved detergents by FDA, is the first step in the right direction when it comes to combat COVID-19 pandemic. Moreover, doors windows, desks tables, any hard surface which staff come in direct contact must be disinfected as much as staff must take care of their personal hygiene, rinsing their hands with approved sanitizers, wearing disposable gloves, masks and other protective tools such as an apron or disposable overalls in order to maintain the health of themselves and others. In addition, a poster which is

exhibiting how the process of hand washing should take place must get provided and suspended on those more confronting walls in order to be seen by staff (www. WHO business guidelines/COVID-19).

Management of business must alert all staff that in the case of any fallout, any sickness symptoms such as headache, cough, sneeze, fever, any pestilence which compromises the immune system must be reported to human resource immediately and that affected staff must go for leave of absence, either with preserved payroll or without any bonus. Such strict guidelines must be pursued for the sake of the whole company's health. In addition, that personnel who are elderly, at high risk due to their age or they have bee sustaining a chronic disease which has dissolved or tried their immunity enormously, they must sign for leave of absence (www.WHO business guidelines/COVIT19).

The corporate managers they must adopt aggressive approaches such as compulsory redundancy in the case, sick or at-risk staff refutes or withstands to depart the business or his post. On top of that, business operators they must collaborate with health services, to inform on sick cases, individual staff members, who have come across sick or a potential vector, in addition, each staff must be taught that in the case of feeling of any affliction, they must self- quarantine themselves for at least 14 days as it is the incubation time for the virus. An employee who is diagnosed with COVID-19 must be isolated, gets treatment till he gets recovered, and tested negative. In addition, public authorities must conduct a thorough investigation regarding who this sick employee has come across, all those cases must get identified and quarantined for the sake of outbreak decline. At the same time, businesses must refrain from any intrusion or har-assment in the intimate lives of those staff who contracted the virus, showing the sign

of compassion, consideration, and solidarity is the best tool to support the embattled employee (www.WHO.COVID-19).

Businesses all must abide by the guideline which WHO has created, in fact, monitoring the presence and absence of employees at work, to what extent they seem rejuvenated and actively engaged in the job since COVID-19 symptoms snatch away body stamina and instigate enormous fatigue, sticking cautionary notes and health guidelines addressing COVID-19 crisis to the most prominent part of the office, where human eye contact gets the most shot in order to put the staff on cautionary alert and resuscitate the intensity of the circumstance. In addition, the WHO has recommended that extra staff must be laid off and others must be distributed between weekdays in order to curb any unnecessary contact with the vector (WHO, 2020).

2.11 The Global Effects of the Pandemic on Tourism Sector

The disease pandemic (COVID-19) began in late 2019 in Wuhan, China, and continues to spread worldwide. With the spread of COVID-19 worldwide, researchers in the medical, health, and social sciences are working to enlighten all sections of society. The spread of COVID-19 and travel and mobility sanctions have permeated almost every aspect of daily life. These restrictions also destroy the tourism industry and hospitality. Accommodation services have stopped and restaurants are closing. COVID-19 has raised public concerns about public cleanliness, health, and access to health care. Given the range of effects of the outbreak on tourism and hospitality, practical implications are needed for tourists, tourism practitioners, and industry policymakers to act responsibly now. Joint research projects will be crucial to activating medical and health professionals, as well as tourism and hospitality professionals, and will use relevant medical knowledge to improve the tourism industry after COVID-19. Doing so

will help protect the health and well-being of different segments of tourism, from travelers to employees. Unless tourism workers can follow the recommendations of public health organizations to prevent COVID-19, customers are reluctant to visit their jobs (Wen et al., 2020).

It is necessary to have a "bridge" to transfer medical knowledge to disciplines such as the social sciences that are driving the growth of the tourism industry. This connection will benefit the people. Given the tourism and hospitality efforts to recover COVID-19, stakeholder decisions should be based on credible scientific evidence. It should also be noted that COVID-19 is not the first disaster of its kind to hit the tourism industry. SARS had similar consequences in 2003. The commonalities between these viruses show that the tourism community is gradually improving, as was the case with SARS. However, the COVID-19 scale is much larger, and more intensive recovery measures will boost the success of the tourism industry (Wen et al., 2020).

The tourism industry in the world has been involved in a major crisis that will witness the collapse of the stock market in all sectors. The tourism industry in the world has been affected more than anyone else because visitors are not allowed to visit any state. Hotels, airlines, and sea cruises were suspended. This leads to the creation of an impact on GDP because the virus is spreading. Sure, the hospitality industry is likely to have suffered much greater damage than other parts of the tourism industry, so workers face destructive trials. The hotel's revenues from each room have dropped 11.6 % every week on 7 March 2020 in the United States. By 2020, the volume of occupation in China decreased by 89 %. Other hotel companies in the United States are seeking an estimated \$ 150 billion in direct aid for the employees due to an unprecedented decrease in demand, along with the destruction of \$ 1.5 billion since mid - February (Patel and Khemariya, 2020).

More than 1.4 million people have been infected with the coronavirus, and nearly 83,000 have died. Researchers believe that the world may be experiencing an economic downturn and its negative impact can be seen in all industries around the world (Maria Nicola, et al., 2020). Tourists and travelers from China, Korea, Italy, and Iran can spread COVID-19 to other affected countries. As of February 29, 164,270 cases of infection and at least 8071 deaths have been reported in Iran. The rapid rise in infection is disrupting the country's production and trade. With the spread of the virus in Iran, school authorities closed schools, canceled art and film events, and neighboring countries closed their borders with Iran (Arezki, and Nguyen, 2020).

COVID19 is on the rise, and the WHO "s warning will lead to the instability of health care, as well as the impact on economic degradation of activities. The EU tourism industry, which is close to 13 m people, is expected to lose about one billion euros per month due to its prevalence of COVID19. In several popular tourist destinations, hotels have been abandoned and restaurants, cafes, tourist attractions, topical parks, and museums have been closed. Winter skiing ended at the beginning of the season. The cruise company has stopped the operation and has been stranded on the sea because they don't allow them to enter (Patel and Khemariya, 2020).

The tourism industry has always been one of the industries that were at risk of pandemics and crises. Historically, the industry has suffered a major pandemic of injuries, especially the Black Death (1346-1353), influenza (1918-1920), SARS (2002-2004), H1N1 swine flu (2009-2010) and viruses Ebola (2014-2016). For example, the Spanish flu, restrict travel for four months and 21 million in the medium term. Also, the swine flu pandemic leading the Mexican tourism industry alone lost nearly one million overseas visitors over five months, translating into losses of about \$ 2.8 billion (Patel and Khemariya, 2020).

Pandemics and outbreaks, a destination for tourists who risk suffering the inexplicable. Usually travel restrictions, border closures, quarantine, and social distance measures applied by the government to minimize or eliminate viruses advertising. The World Health Organization issued a travel advisory to travel also to prevent pandemic diseases. These measures, along with feelings media news reports, the destination does not affect all takers. The resulting fear of travel to that destination and canceled flights, hotel reservations, and other programs is planned (Patel and Khemariya, 2020).

During an outbreak, almost all tourism-related items except the environment are affected. In Italy, one of the countries hardest hit by COVID-19, popular tourist destinations such as Rome, Venice, and Milan are deserted and their occupancy rate has dropped to 6%. On March 26, the World Tourism Organization in a press release predicted 20 to 30 percent of international losses. Meanwhile, the Tourism Council has announced that 50 million travel and tourism jobs are at risk due to COVID-19 (Patel and Khemariya, 2020).

Despite significant impacts on the tourism and hospitality industry, tourism looks losses can take advantage of the environment. At the same time reduce greenhouse gas emissions in industrialized countries occurred in particular, that satellite images coronavirus hot spots around the world are evident. It is widely published on social media. For example, when factories were closed and cities in China were shut down, greenhouse gas emissions have fallen 25%. Moreover, the use of coal in six large power plants dropped 40 percent. Airlines, travel tours, travel agencies, attractions, car rentals, restaurants, and hotels have all been negatively affected. All businesses and service providers along the tourism value chain are affected, including the farmer who prepares vegetables for the restaurant and the taxi driver who transports tourists from the airport to the hotels (Patel and Khemariya, 2020).

As a result of widespread cancellations of flights, tours, events, hotel reservations and the resulting drop in incoming trips, hotel occupancy rates, and average room rates have fallen sharply, leading to an unprecedented drop in profit margins. In Italy, 90% and 80% of all hotel reservations are canceled in Rome and Sicily, respectively, and for a relatively small tourist destination such as Ghana, hotel occupancy has dropped from 70% to below 30%, with some hotels They are few. 5% Also, it is reported that the hotel industry REVPAR in the United States for the week ending March 7, 2020, decreased by 11.6%. This problem is being addressed by locks and other social distance protocols announced by governments in an attempt to "smooth the curve" (Patel and Khemariya, 2020).

Governments are concerned with how to flatten the curve without degenerating their economies. Although hotels are experiencing significant revenue losses, water and electricity programs, wages, and salaries, as well as other recurring costs and statutory payments must be met. Of all the goals and objectives, the hotel industry is heading for an unprecedented downturn in COVID-19. According to experts, the pandemic will last for about two years. However, the fear of traveling and implementing social distance protocols does not go away soon after the pandemic subsides. COVID-19 is severely destroying the hotel industry, and they are confident that the industry will not return to its former glory long after the locks and travel restrictions were lifted. But hoteliers cannot use the current pattern of operations. Hotels must adopt survival strategies against COVID-19. This requires repackaging of hotel services to make this COVID-19 course more attractive. Of all these, disappointing situations require promising action. While many fear is on the all-consuming nature of the therapeutic process is ongoing. There is expected to be until the pandemic, nature is not a problem. Because the environment is a tourism product base, become more attractive destinations (Patel and Khemariya, 2020).

Many countries have stepped up border control and passengers are not allowed to enter their territory. This situation is particularly difficult in several EU countries, which are the major destinations for tourism such as Italy and Spain. According to estimates by the Italian Federation of Tourism, Italy is expected to lose about 60 % of its tourists this year (Patel and Khemariya, 2020).

According to the World Tourism Organization (UNWTO), millions of jobs in the global tourism industry may disappear from the pandemic, no event such as the coronavirus has not impacted on the tourism industry in the history, causing 96 % of the total global destinations to put restrictions in response to this outbreak (March, 2020).

On April 6, 96 % of the world's total destinations have introduced travel restrictions, according to the World Tourism Organization (WHO). Some 90 destinations complete

or partially closed their borders, or partially, to tourists, while 44 other countries remain closed depending on the country of origin and depending on some tourists." Vietnam received almost 1.45 m Chinese visitors in the first quarter of 2019, but in January 2020 644000 is estimated to be reduced. It is estimated that the Vietnam tourist sector will incur \$ 5 billion in losses. Also, the Philippines is reduced to 0.3 - 0.7 % of GDP in the country's gross domestic product. Indian entry tourism is closing by Section 144, which led to the suspension of visa and global consultation against travel. There is no future for the future, and the current cases have been canceled. The possibility of foreign tourists arriving is very low, and most of October - March - that have been done in the summer - has dropped. As the situation worsens in February, the report predicts the second half of the year has the highest impact. Indian air transport is one of the affected sectors in the COVID19 crisis (Patel and Khemariya, 2020).

Airlines worldwide will lose more than the \$ 113 billion because of the spread, according to the International Aviation Association. Plane tickets are also under pressure due to a nearly 30 percent drop in reserve. Domestic traffic growth has gradually stopped and domestic passengers suspend or cancel their travel plans. Some companies have reported more than 30 % of the domestic passenger decline this summer compared to last summer. Air flights have dropped by 25 - 25 % on popular local routes and the plane ticket is forecast to drop in the summer. Almost 585 international flights have been canceled in India from February 1st to March 6 because of the spread of the virus from India and India, according to the Civil Aviation Ministry (Patel and Khemariya, 2020). Factors such as school closures, being forced to stay home, people's fear of food shortages, increased need for medical equipment as a result of the Coronavirus virus pandemic, while production has declined. Coronavirus has negatively affected the three main parts that can be divided in this way. The first part includes the extraction of raw materials, the second part includes the production of products and the third part includes all services industries. Corona virus has had a significant impact on supply and demand in the tourism industry. In economics, equilibrium is established when supply and demand factors are equal. When the supply curves are cross-demand, we can say that there is a balance (Jamal et al., 2020).

The virus spreads rapidly and rapidly around the world. This scenario will help the economic downturn if not managed with the right management approach. Demand price elasticity is an economic criterion for changing the quantity demanded or buying a product about changing its price. Price traction for the tourism industry is generally calculated using the equation. The results show that a decrease in demand performance reduces the equilibrium price offered and balances (Jamal et al., 2020).

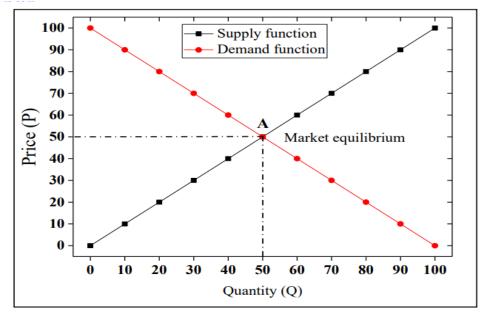


Figure 2: Demand and Supply in Market Equilibrium (Jamal et al., 2020).

Global crises, including the spread of disease and pandemics, raise serious questions about the readiness of institutions related to global and regional tourism to coordinate management measures, and improve the crisis. Issues related to justice arise because the most vulnerable and poorer vulnerable targets are disproportionately affected by the outbreak of the disease. Gloria Guara, President and CEO of the World Travel and Tourism Council (WTTC), called for global cooperation in the tourism sector, saying that sharing information and "cooperation between the public and private sectors in travel and tourism is essential to reduce the impact of the virus. Although the World Tourism Organization does not have oversight power, it can provide a platform for communicating and representing the interests of global tourism (Jamal et al., 2020).

The spread of coronavirus, called COVID-19, has disrupted China's economy and is spreading around the world. The evolution of the disease and its economic impact is highly uncertain macroeconomic policies and developing appropriate responses to difficult policymakers. Studies show that by investing more in public health systems in all economies, economic stagnation may be prevented. But especially in less developed economies to less developed health care systems and high population density, this type of investment is to be avoided (McKibbin and Fernando, 2020).

The study of the macroeconomic effects of the SARS pandemic in 2003 reflected significant impacts on the economymeds through a sharp decline in consumption of various goods and services, an increase in business operating costs, and a reassessment of the risk country in increasing risk premiums. The shock was transmitted to other economies due to countries' exposure or susceptibility to the disease. Despite very few cases and deaths, global costs were significant and not limited to countries directly affected (Lee and McCabe, 2003).

With the decline in global demand in high-consumption sectors such as hotels and restaurants. the price of agricultural goods has fallen by 20% (https://www.avma.org/resources-tools/animal-health-and-welfare/COVID-19). During a meeting at the Organization of the Petroleum Exporting Countries (OPEC) in Vienna on March 6, Russia's refusal to reduce oil production prompted Saudi Arabia to take extra discounts for buyers and threaten more raw pumps. At a meeting of the Organization of the Petroleum Exporting Countries (OPEC) in Vienna, Russia said it would reduce oil production, so Saudi Arabia had a good opportunity to offer discounts to more buyers and sellers. Although declining mortality has stabilized oil prices, there is still uncertainty. Poverty kills poor people, but the prevalence of COVID19 shows that if diseases in poor countries are caused by population overcrowding, poor sanitation and engagement with wild animals, these diseases can kill any economic and social group in any society. There is a need to invest much more in public health and development in the wealthiest, but in particular, in the poorest countries (Mc Kibbin and Fernando, 2020).

98 % of business owners in the UK are concerned about the negative effects of this pandemic and believe that if the disease continues for more than two months, the turnover will be greatly reduced. 16 Import problems and labor shortages are their main concerns. Although many jobs can be controlled from outside the workplace, many there departments in a manufacturing unit are not able to "work from home" (Smith et al., 2019).

Large manufacturing companies, such as Buff, which has increased production, are now forced to suspend or delay production. This accelerates production forecasts by 1.2%. The Socio-Economic Implications of the Coronavirus and COVID-19 Pandemic. Corona has affected the entire learning system around the world. From preschool to university. Different countries have made different decisions. Such as a complete holiday in the German element and a targeted holiday in England. An estimated 900 million learners are affected by the virus, according to UNESCO. However, the effect of long-term school closures has not yet been determined (Fan et al., 2018).

Week-long closure of schools in Taiwan during the H1N1 outbreak in 2009 showed that 27% of families could not go to work, 18% of families with incomes lost \$ 6,433. It has had a profound effect on the postgraduate course, as all non-coronavirus-related research has been discontinued or suspended (https://www.harvard.edu/coronavirus).

In the UK, all clinical trials have been suspended to provide more power to protect patients and counteract the spread of the disease. NIH shifts non-mission-critical laboratory operations to the minimal maintenance (https://www.nih.gov/news-events/news-releases/nih-shifts-non-mission-critical laboratory operations- minimal-maintenance-phase) (IUTO, 1973).

The same thing was done in the United States. Following the spread of the virus, all unimportant research was stopped so that employees could be released and help in the required areas. To that end, Harvard University closed all science and art labs (IUTO, 1973).

2.11.1 Impact of COVID-19 on Medical Tourism

Medical tourism is one of the emerging sectors in the tourism industry that has grown very rapidly in recent years (Balaban and Marano, 2010). Health tourism as a part of tourism that provides health and medical facilities using the country's natural resources, especially climate and mineral water (IUTO, 1973).

2.11.2 Types of Health Tourism

Health Tourism includes a variety of subspecies such as Curative Tourism, including medical care, non-conventional therapies, medical, surgical-clinical, diagnostic, surgical-hospital, traditional medicine, and medicine. Needle, Energy-Yoga Therapy, Meditation, and Preventive Tourism.

2.11.3 Curative Tourism

In this type of tourism, nature facilities are used, but the main difference is that the applicants have certain diseases or problems, and they go to these places to return to normal and get out of the physical or mental illness. Naturally, these people should use

it under the supervision of specialists and during treatment and recovery programs (Harahsheh, 2002).

Skin, respiratory, rheumatological, and muscular patients are usually the main clients for such services. Also, patients who have undergone surgery and are recovering using hot springs, salt lake, sludge therapy, sun and sand, and sand ... and under the supervision of a doctor and in a treatment and health care program, the recovery process They accelerate themselves (Harahsheh, 2002).

2.11.4 Medical Tourism

In this type of tourism, medical interventions are needed. The patient who suffers from a chronic or acute illness either uses conventional medical methods to solve their treatment problems or uses treatments and procedures that are considered unscientific by experimental scientists. In the medical field, due to the scope of intervention and the need for health care or surgery, there are two types of light divisions (diagnostic and treatment processes without surgical intervention and non-hospital surgical processes and vital impact on the patient's life) and heavy (treatments). With the need for hospitalization or the need for intensive care and post-hospital care) (Connell, 2006).

2.11.5 Preventive Tourism

In this type of tourism, people travel to use the natural facilities available at the destination. These facilities, which include favorable weather, hot springs, mud therapy complexes, relaxation environments, etc., are provided to people so that they can relax their nerves. The use of these facilities, both psychologically and physically, restores a person's ability and provides the necessary energy to continue his normal activities. People in this category are not particularly distressed or ill, but by using natural resources, they prevent physical and mental illness and distress (Calafat et al., 2010).

2.11.6 Health Tourism Over Time

Health tourism has long existed in Greece and ancient Rome in Europe and then spread to other parts of the world. In ancient times, people with respiratory and rheumatic diseases found that in some areas the climate was particularly good for their wellbeing. Health tourism includes any trip to promote health and as one of the dimensions of tourism, it contributes to the sustainable development and dynamism of the country's economy. Health tourism is also a national strategy to increase the country's income and an arm of national security. To achieve this goal, an attempt has been made to examine the current situation and study the obstacles and advantages of the country's health tourism. The word SPA is probably derived from the Latin root ESPA meaning "spring" (Smith et al., 2014).

They are used in areas with mineral and hot waters that have welcomed tourists for rest and treatment. These tourists go to the spas for body water, drinking mineral springs, or staying in the medical sludge. Others call it the Neolithic and Bronze Ages. In the 16th century, Ponce de Leon brought a new meaning to the world, when he traveled to Florida in search of a spring of youth. In the 1700s and 1800s, the use of hot water was known in hot cities such as Baden-Baden on both sides of the Atlantic Ocean (Travel 1390). It has long been known that many human beings have traveled to nearby springs and mineral waters for the comfort of their souls, and today many cities in Europe, such as Vienna, Budapest, Wiesbaden, Germany, etc., have been built around mineral springs. My White helps treat rheumatic pains, arthritis, extreme fatigue, skin infections, and gastrointestinal upset. In the United States, facilities such as libraries, theaters, music halls, and playgrounds have been set up to maximize the spa's convenience. In Iran, Bu Ali Sina divided such areas into spiritual sanatoriums, springs, and hot springs. For example, in the city of Neishabour, a stone canal system

was used to transport mineral water to the Anahita Temple (Smith et al., 2014).

2011).		
Historical trend and growth of health tourism industry		
historical period	health tourism	
The Stone Age After the Stone Age (New	Visit hot springs	
Age) The Bronze Age		
Medieval	Visit the temperature springs	
16th century AD	At this time visit the springs called "Youth	
	Springs"	
17th - 18th century	Visiting SPAs was common	
19th century	At this time, the use of the climate of the	
	coasts of the coast and the mountains in or-	
	der to enjoy health was common. This time	
	coincided with the outbreak of tuberculosis	
	in the world.	
20th century	Forming health farms or obesity farms that	
	tried to maintain fitness in those places by	
	using physical exercises and diet.	
1991	Formation of International Spa Associations	
At the present time	It's time for hospitals to create spas and spas	
	for hospitals.	

Table 2: Historical Trend and Growth of Health Tourism Industry. 1.(Smith et al., 2014).

2.11.7 Factors Affecting the Creation of Health Tourism

Globalization and trade liberalization in the field of health services, the Asian financial crisis, favorable exchange rate changes in the global economy of Asian countries have led to the rapid growth of tourism in these countries. Among other factors, the following can be mentioned:

- A) High costs of medical services in the United States and Europe
- B) Long waiting times
- C) Convenience and ease of travel to other countries
- D) Improving technology and treatment standards in the destination countries (Schalber, 2012).

2.11.8 Legal Problems in The Field of Health Tourism

Understanding medical tourism is not always positive. In countries like the United States, which have high-quality standards, high-risk medical tourism is seen. However, the number of Americans traveling abroad for health care is increasing. In some parts of the world, the breadth of political issues can affect the opinion and choice of medical tourists to the point where they will look elsewhere for health care (Schalber, 2012).

The legal problems in the field of health tourism as follows:

1) Inability to transfer insurance coverage to other countries:

In most countries, insurance coverage is valid only in the country of origin, and despite claims by some insurance companies to pay for treatment in other countries, in many cases, no insurance is paid by insurers (Henry, 2012).

2) Failure to provide valid international certificates by sick hospitals:

Hospitals that accept foreign patients must have one or more internationally recognized certificates. Numerous institutions evaluate and validate hospitalization at the global level, including the following:

- A) SOFIHA (International Health Services Credit Association);
- B) MTA (Health Tourism Association;
- C) UKAF (British Accreditation Forum) (Henry, 2012).

3) Inability to track patients after returning to their country:

Foreign patients return to their country of residence immediately after receiving the desired medical services; This rapid return does not complete the course of treatment and complications, and in some cases does not improve patients (Henry, 2012).

4) Lack of legal resources to support foreign patients in treatment cases:

Getting medical care in other countries may cause patients some legal issues. Weaknesses in treatment laws are one of them. While most morbid countries present themselves as attractive centers for health tourism, there are few rules to protect patients in cases of abuse. In these countries, offending staff and physicians are protected by law, while foreign patients are not (Henry, 2012).

5) Lack of scientific evidence by human resources in hospitalized hospitals:

Although most host countries claim that their staff is trained at reputable scientific universities, it is not possible to be very sure about the compliance of these pieces of training with current international standards (Henry, 2012).

2.12 Important Ethical Issues Can be Raised About Medical Tourists

1) Prioritize foreign patients:

While the public health care system of the host countries is unable to meet the medical needs of local patients, it provides excellent quality services to international patients, which has caused serious concern. Some critics say the host countries have a dual system for providing health care. On the one hand, there are private hospitals equipped with the latest technology to treat foreign patients, and on the other hand, the public sector has a severe budget shortage that cannot provide adequate and adequate services to domestic patients (Hall, 2014).

2) Allocation of government subsidies to private hospitals to attract foreign patients: In some sick countries, various forms of subsidies, such as buying cheap land or importing medical equipment without paying customs duties and taxes, are allocated to private hospitals. This raises the fundamental question of whether developing countries should subsidize the treatment of foreign nationals. Critics of health tourism fear that the private sector in sick countries will only seek to provide services to outpatients (Hall, 2014).

3) Transplantation of foreign patients:

Internal patients are placed at the bottom of the waiting list for organ transplants due to lack of financial resources, while foreign patients have priority. Another important point is the illegal purchase of organs by local citizens to provide to foreign patients. Such illegal purchases were common in India and China until 2007 (Hall, 2014).

4) Infectious patients with local diseases:

In some countries, such as India, Malaysia, Costa Rica or Thailand, various infectious diseases are common and can be transmitted to foreign patients. Because most patients in these areas are not immune to these diseases, common infectious diseases such as gastric and intestinal diseases, hepatitis A, dysentery, quasi-tuberculosis, mosquitoborne diseases, influenza and tuberculosis can be dangerous. People are weak and low resistance to them. Although the disease in the tropics is spreading due to poverty, doctors in those areas appear to be ready to deal with any infectious diseases such as HIV, tuberculosis and tuberculosis. While there have been cases where patients with such diseases are rare due to their rarity in the West, their illnesses have not been diagnosed for years (Hall, 2014).

The coronavirus has challenged the world. Lack of vaccines and treatment, limited medical facilities and facilities, severe and unprecedented travel restrictions, and forced to stay at home have severely disrupted the economy. 90% of the world's population faces travel bans and restrictions. The World Tourism Organization predicts a 20 to 30 percent drop in international revenues (Gösslingn et al., 2020).

As more than 80,000 people were registered in early February and the entire city was fully quarantined, Wuhan's flights to all continents in one month were delayed, and the virus was spread between 146 countries. Since April 15, more than 200 countries have

confirmed the number of infected people, with more than 2 million infected and 125,000 deaths reported. It was a human tragedy. However, it can be said that the actual number of patients is unknown, as the test is limited (Gösslingn et al., 2020).

Cancel international and national events that include conferences, large exhibitions, concerts, festivals, elections, and political programs, sports and summer Olympics, daily visits, domestic trips, public transport, sea voyages, air travel, coffee Notes, and restaurants have been a major blow to the tourism economy (Gösslingn et al., 2020).

The cruise ship, which shone like a diamond in the sea, became the altar of thousands of passengers. Twenty-five ships that had been infected by the virus by March 26 remained at sea and could not find a port that would allow them to be cleared (Gössling, et al., 2020).

The virus has an undeniable impact on the hospitality industry because it cannot store and sell at any other time. The industry is irreversible, and the industry has been completely wiped out in terms of washing, accommodation, transportation, and catering (Lee et al., 2019).

We know that the industrial tourism industry is resistant to accidents. As in the 2000-2005 crisis, events such as the 9/11 attacks, the SARS respiratory syndrome, the 2008 and 2009 economic crisis, and the 2015 Middle East respiratory syndrome, only 4% or less led to a drop in international inflows. But the effect of COVID-19 has been unprecedented (Lee et al., 2019).

There are many reasons why this disease is so dangerous. Reasons such as world population growth, urbanization, populated cities, consumption of ready-to-eat foods, and the growth of the transportation system. (Gössling et al., 2020).

Over two centuries, Siu and Wong (2004) the world has experienced seven pandemics. Three diseases in the 20th century (Asian, Spanish, Hong Kong influenza) and five diseases in the 21st century (SARS, avian influenza, MERS, Ebola, COVID 19).

Despite the outbreak of the swine flu virus, 284,000 people have been killed. But according to the World Health Organization, 5 million people have been infected and 338,000 have been killed so far (World Health Organization).

But worse is the fact that two other viruses, such as Morse and Ebola, have been recorded in Egypt, Congo, and Sudan at the same time as the coronavirus (Al-Taw fiqef et al., 2014).

However, the number of people with COVID-19 is very high. (Nicolaides et al., 2019). As Baldwin and Weder di Mauro (2020, p.11). But the Spanish flu has been the most devastating disease the world has ever experienced. (Garrett, 2008). It indeed originated in the United States, but it was registered because of the prevalence in Spain. The disease affected 500 million people and killed between 17 and 50 million (Holtenius et al., 2014); (Hatchett et al., 2007).

A pandemic could reduce global GDP by 2.5 trillion. This is even though the Spanish flu virus has reduced global GDP by 9 trillion. Due to this, the coronavirus also affect global GDP and delay and weaken the outlook for achieving the 2030 goals. Examination of the data estimated that 90% of the world's support lived in consultations that imposed travel and travel restrictions. According to the World Tourism Organization, the number of guests has dropped to 50 percent. Naturally, the countries most exposed to this crisis (Italy) have also suffered the most (Sethi et al., (2020).

In the United States, more than 20 percent have been affected by housing and food services, with more than 10.5 million workers affected. Of these, 3.6 million are vulnerable in the catering sector (including fast food businesses), 2.6 million in the restaurant sector, and 1.3 million in the restaurant's kitchen (Gossling et al., 2013).

It is noteworthy that the workers in the tourism industry have the lowest annual income and the lowest level of activity, which makes them more vulnerable than other sectors. Many foodservice businesses make their raw materials from large markets at the lowest cost. It is clear, therefore, that there is currently a large number of disposable materials in the warehouses that cannot be stored and that there is a huge cost to the business owners (Gossling et al., 2013).

Deforestation and habitat destruction are some of the causes of the spread of viruses. Environmental and climate change and crises such as floods and droughts are leading to human migration. (Barlow et al., 2016; Lade et al., 2020).

The main source of development of greenhouse gas in the world can be the tourism industry. because of that we can say it able to increase the risk of a pandemic. Coronavirus is a virus that has spread around the world. The spread of this disease causes panic among the people, which reduces the demand for travel and travel (Fernandes, 2020).

Health tourism is divided into 5 sections, which are summarized below (Marvel, 2002):

- Recreational tourism, including sunbathing and fun activities.
- health tourism, adventure, an outdoor excursion, the main motivation for health.
- marine tourism, travel to different climates to health
- Tourism in Asia "spa" (sauna-Jacuzzi, massage, health activities)
- Medical and dental treatment.

Another part of health tourism is related to the spa. Which includes 7 categories. Special treatment centers with traditional facilities offer treatment for diseases such as osteoarthritis, back pain syndrome, obesity, trauma, asthma, sterility, beauty, postoperative rehabilitation, as well as creating unique relaxation (Marvel, 2002):

- 1. Spa Club: The main goal of fitness is to provide spa services daily.
- 2. Cruise ship spa: Fitness, health, spa cuisine, and spa services on a cruise ship.
- 3. Daily spa: Daily spa services.
- 4. Destination spa: accommodation, spa cuisine, spa services, programming training, and physical fitness are provided to improve lifestyle and strengthen health.
- 5. Medical spa: integrated spa services and conventional treatments to provide health and medical care, for example, hospitals that provide medical services.
- 6. Spring Mineral Spa: A traditional spa with a local source of thermal minerals or seawater used for hydrotherapy.

7. Tochal / Hotel Spa: Fitness, health, spa cuisine, and other spa services are available at one resort or hotel (Balaban and Marano, 2010).

In contrast, in the medical literature, health tourism is known as a term that a person travels abroad for treatment (Balaban and Marano, 2010). But in the medical literature, health tourism is known as a term that a person travels abroad for treatment. Medical tourism has received international attention because of the following reasons.

First: The cost of medical services in the country producing health tourism is cheaper, which can be referred to as the dental department (MacReady, 2009).

Second: medical tourism in the destination country can be associated with recreation and entertainment (MacReady, 2009).

Third: In this section, we can refer to family, cultural and linguistic relations that immigrants return to their country for treatment ("stem-cell tourism") (MacReady, 2009).

Fourth: Access to medical services and the definition of a supervisory structure in the country producing tourism is not limited, and an easy hub is available to everyone. For example, abortion has different rules all over the world. Or different methods of pregnancy in homosexuals (Hall, 2011).

Fifth: Impossibility of organ transplantation in all countries (Hall, 2011).

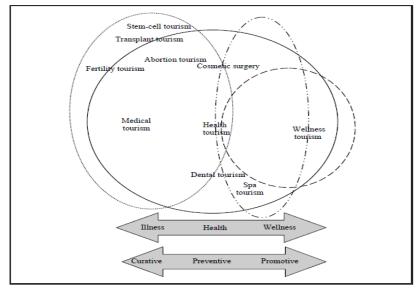


Figure 3: Demand in Medical Tourism (Gössling et al., 2020)

2.12.1 Activities in the Field of Health Tourism

- Health Spas
- Weight management programs
- Cosmetic and Plastic Surgery
- Replacement Knee (Knee Replacement)
- Coronary By-pass Surgery
- Organ Transplant
- Lasik Surgery
- Dental Implantation
- Rehabilitation and Recuperation (Alleman et al., 2011).

List of available treatments and services available at health tourism provider centers		
In the mana in the spas	Physical activities	Relaxing activities
Acupuncture	Gym	March
water pressure	Swim	Massage
Herbal baths	riding bike	Beauty treatment
Individual treatment	horse riding	Reflection
Salt room (tank)	Carting	Indian head massage
Magnetic therapy	Boating	Mineral water springs
Ultrasound treatment	Golf	Floating chambers
Oxygen treatment	Sail less boat	water pressure
Medical sludge pack	Rescue cycling	Yoga
(Treatment of cannabis)	Driving on the track	Eat and drink with high
Treatment of neuropathy		quality local and natural
with movement, heat and		foods
water pressure		
Light treatment	Voice therapy	Cairo Practice
Lumbar exercise	Massage therapy	Sea water treatment

Table 3: Available Treatments and Services Available at Health Tourism Provider Centers. (Alleman et al., 2011).

2.12.2 The Slogan of Health Tourism in the World

- Facilities, as far as the countries of the first world
- Prices, as much as third world countries (Alleman et al., 2011).

2.12.3 Challenges of the Health Tourism Industry

The main challenges of this industry can be classified into seven cases, which are as follows:

- Most insurance companies do not pay for patient insurance all the time and generally only cover the bulk of treatment and do not ensure post-treatment care that sometimes takes several years (Gössling, and Hall, 2020).
- There is no possibility of post-treatment care in that country and the patient is forced to return home after completing the main stage of treatment (Alleman et al., 2011).
- Weak laws in the field of medical crimes (Alleman et al., 2011).

- Continuous change of modern technologies in the field of medicine: To remain in the list of top countries in the field of health tourism, the technologies used in the field of health care by modern technologies and the country's healthcare industry must always have the highest quality standards. Any blow in this tough competition means getting out of the map of global health tourism (Gössling et al., 2020).
- Insurance laws must comply with international standards and approved by reputable insurance companies (Alleman et al., 2011).
- Lack or shortage of skilled physicians, nurses, and manpower in the field of health tourism is considered as one of the challenges (Alleman et al., (2011).
- Marketing programs to attract health tourists are also one of the challenging issues in this area (Alleman et al., 2011).

2.13 Effects of The Pandemic on Media

•

The proliferation of social media has accelerated the delivery of information. Today, the media is essential to providing timely news to the public. These channels are expected to report general crises or disasters immediately. Social media plays an important role in people's understanding of such events. The media's misguided response to the outbreak of the coronavirus has led to severe discrimination against Asians, especially Chinese nationals and people of Chinese descent (Wen and Ying, 2020).

Tourists and others returning from China are quarantined upon arrival at their destination and sprayed with disinfectant. Although this precaution may seem logical at first, such behaviors may cause prejudice. Even Chinese people who have not traveled to their home country or are living elsewhere are likely to be discriminated against at this time in their daily lives (Wen and Ying, 2020). In many countries, for example, Chinese students were barred from attending classes. Even if they were in the country before the outbreak. Many companies have reduced trade with Chinese countries (Wen and Ying, 2020).

Anti-Chinese and anti-Asian xenophobia have been observed in many countries such as the United States, Canada, the United Kingdom, Europe, Malaysia, and Australia. Countries such as Japan, South Korea, and Vietnam were not allowed to enter Chinese customers in public facilities such as restaurants, halls, shops. In Indonesia, Chinese hotel guests were asked to leave the country. (Amnesty International, 2020). These reactions are discriminatory and may adversely affect the health of Chinese people (for example, poor mental health associated with social isolation and lack of self-confidence) (Wen and Ying, 2020).

Racial discrimination is a violation of human rights. All human rights laws seek to protect the right of everyone to coexist without discrimination, regardless of the country of residence (Wen and Ying, 2020).

News reports of racial discrimination against the Chinese at the time of the outbreak could have far-reaching implications. For example, negative news coverage could jeopardize the national and destination of China and other countries infected with the disease, such as Italy and Iran. In tourism literature, country structures and destination images are commonly used to understand tourism marketing and tourist behavior (Masberg and Klepe 2005).

In particular, the concepts of hierarchical organized the country's image in a country where the image is a collection of images to concepts included in the product image. While the destination image as a concept for a lot of geographical units which are to make up the framework. The integration between the image and the image to the specified reference objects. Studies also satisfied with the effects of tourism on the country's image, the image of the destination and purpose of visits (Nisco and Napolotano, 2015).

Awareness of this issue may increase media consumption with better awareness, as well as a closer look at how news reports affect the parties involved. Further interdisciplinary studies are needed to examine the backgrounds and consequences of racial discrimination on tourism marketing and tourism behavior during public health crises and other large-scale events. Several research gaps related to tourism discussed here, I hope, will encourage researchers to delve deeper into issues such as the impact of racial discrimination on the destination image (Wen and Ying, 2020). Since the negative impact of COVID-19 disease has been on all jobs and organizations, it is clear that it could have a significant impact on financial markets and the global economy. On the other hand, with the development of COVID-19 in other countries, the recovery process in China was also progressing, so at this time China is ready to negotiate with its European and Western counterparts and is in a favorable position. For example, after the outbreak in the United States, the stock market index of Dow Jones and the NASDAQ fell sharply until the government supported the indicators. European bonds have also fallen sharply to the level of the impact of the 2011-2012 crisis. The pandemic has an unprecedented impact on communities around the world. Because governments issue strict social order guidelines and order non - essential jobs to reduce the prevalence of this outbreak, there is a lot of uncertainty about the impact of such practices on life and livelihood. While demand for space sectors such as health care,

such as air transport and tourism, is witnessing a reduction in demand for services. At the same time, many sectors experience a problem in the supply sector because governments restrict the activities of unnecessary industries and workers go to their homes (del Rio-Chanona, and Farmer, 2020).

The dollar strengthened against gold and fell on March 50 in the German DAX, the British FTSE 100, and the Euro Stokes. With the expansion of Corona, in early February 2020, 59 countries banned and canceled flights to China. These countries include the United States, Canada, Italy, the United Kingdom, and Australia (Chinazzi et al., 2020). Studies show that although travel bans on Wuhan have reduced the number of cases, the trend has expanded significantly over the past two to three weeks, indicating a rapid transmission of the disease (Chinazzi et al., 2020).

Chapter 3

METHODOLOGY

3.1 Introduction

This chapter describes methodology of the study by discussing sampling technique, data collection, and analysis techniques.

The sample of the present study was taken from a group of employees, managers, and residents of the tourism industry in Caesar resort. The measurement tools include interviews with five sections: demographic questions, food safety questions, the influence of media questions, psychological impact questions and intention turnover questions. These tools have been used to collect data for the present study.

First, the permission was obtained from the managers to conduct interviews in the complex. This is done through group and individual meetings with each of the participants, thus ensuring an optimal rate of return. Participants also agreed about recording the interview and ensure that their name was kept confidential.

3.2 Aim of the Research

This study examines the views of employees about the pandemic and how it affects people's lifestyles, community economy, and changes in their life plans.

In this study, the relationship between the prevalence of coronavirus and its effect on food safety, workplace safety, and service health is examined. In summary, this chapter describes the research design, sampling design, data collection method, and measurement techniques that have been used to answer the research questions of the present study.

3.3 Research Approach

Scientific knowledge is constructed using quantitative, qualitative, or mixed methods. As Curzol points out, "a quantitative approach is one in which the researcher first uses post-positivist claims to grow knowledge" (2003). This includes thinking about cause and effect, reducing to specific variables and hypotheses and questions, using measurement and observation, and testing theories. Also, it uses research strategies such as experiments and surveys and collects data for predefined tools that provide statistical data (Basit, 2010).

On the other hand, a concept or phenomenon about which little research has been done has a qualitative approach. Qualitative research is exploratory and is useful when the researcher does not know the important variables to study. A qualitative approach was also chosen because the qualitative approach "unstructured and largely open" (Atkinson and Bouma, 1995).

Because the study's character is "exploratory" and due to the lack of information on the subject, a new phenomenon, it was believed that an open approach to the researcher the opportunity to discuss issues of unusually investigate the only after the investigation unfolds (Creswell, 2003). So, for this research, a qualitative approach was used to achieve depth knowledge of the host population's perceptions. Qualitative research allows the researcher to gather information about people's lives and behaviors and to understand the views of the subjects. Besides, it provides the opportunity to discover unexpected issues that become apparent only after the study began. In order to collect this qualitative information, indepth interview method was used.

3.4 Research Design

A research plan is a strategic framework for action that acts as a bridge between research questions and research implementation. Research projects are programs that "guide the arrangement of data collection and analysis conditions in a way that seeks to correlate the relationship between the purpose of research and economics in practice" (Blanche and Durrheim, 2002).

At first, the residents of the Caesar region were linguistically separated. Because the number of foreigners living on the island is very high, a study has been conducted between Russian-spoken people and Persian residents.

Depending on the limitations imposed during quarantine, employees were interviewed both in groups and individually, both outside the private residence and outdoors, subject to social distance. Interviews with managers of various departments of the company, such as restaurants, accounting, accommodation, manpower, who were working, were also conducted in groups and individually. Only one interview was conducted with two managers in groups and compliance with health laws. The other managers participated in the individual interview. Records of room occupancy, building sales, revenue, and profit margins were collected with the help of the company's finance and accounting department to compare the effects of the coronavirus in the year before and after the outbreak Sakaran (2001, p. 225).

Rosnow and Rosenthal (1999) defined a population as the world of elements drawn from the sample elements, or the world of the elements we want to expand. One population defines it as "the whole group of people, events, or things that the researcher wants to explore" (Sakaran (2001, p. 225). The statistical population of the study included a group of employees, managers, and residents of the tourism industry in Iskele, Famagusta. Caesar Resort was selected as a sample because of the pandemic as limitation of the study.

3.5 Sample Selection

Sampling is defined by Serakwane (2005) as a way to use a small number of items or parts of a larger population to conclude the entire population. Roberts (2005) defines sampling as a method in which a researcher selects a sample of participants to study from the target population.

According to Cooper and Schindler (2003, p. 179), "the main idea is a sampling by selecting elements in a population, we may conclude the entire population. " Convenience sampling was used in this study because members who were selected as participants were readily available due to quarantine. This method is faster, easier, and cheaper, but on the other hand, it is not generalizable at all (Sekaran, 2001).

According to Sekaran (2001), a response rate of thirty percent is acceptable for most studies. A convenience sample will be used, which according to Roberts (2005) refers to a sample of participants that are readily available. Interviews were conducted with 32 of the 35 selected and invited individuals. The participation rate in the interview

can be estimated at 92%. Administering interviews within a group was convenient and the response rate was quite high.

3.6 Research Design

In this study, in-depth interviews were used as a tool to collect initial data. Interviews are an important technique in qualitative research (Atkinson and Buma, 1995).

Interviews are designed to provide information about how the virus has spread and its effects on various aspects of people's lives. Thus, interviews allow the researcher to describe personal reactions to the effects of the disease because the interviewee expresses it from their point of view.

After granting the permission from the director, the researcher contacted the head of the complex to explain the purpose of the research and to ask the staff for permission to conduct a personal interview. The management team agreed and confirmed that they would be satisfied with the proposed research from their employees, managers, and residents. The researcher was easy to deal with employees because the researcher is also an employee of the organization. In short, the researcher confirmed to all employees the purpose of the research and ethical considerations, the confidentiality and anonymity of the participants.

The study was conducted over 3 weeks and included group and individual sessions. Upon arrival, the researcher repeated the purpose of the research to the staff and then began the question. The researcher explained the questions to the participants and that the interview would take a maximum of 1 hour.

3.7 Measuring Instruments

For the present study, appropriate questions were considered. The questions used for the present study consist of five sections:

- Section 1 Demographic questions
- Section 2 Food safety questions
- Section 3 The influence of media questions
- Section 4 Psychological impact questions
- Section 5- Turnover questions (Santos and Labrague, 2020; Shahidi, 2020; Ahmad and Murad, 2020).

3.7.1 Demographic Questions

Biographical questions were asked in this section. The questions included the follow-

ing personal information that was answered by the participants:

- 1) Age
- 2) Education
- 3) Gender
- 4) The number of years of work in the organization and life in the complex
- 5) Position and turnover

3.7.2 Nature and Composition of the Main Questions

The two sets of questions were prepared for managers and for residents.

Impact of COVID-19 on Food Safety: In this section, food safety and health, food sources of the virus transmission, the role of disinfectants, preventive measures before

and during food preparation, tools used to ensure food safety were considered. According to the answers, the respondents' views on the importance of self-care, family, and work environment in the pandemic period were shown.

The Effect of COCID-19 on Social Life: In this section, the effect of the COVID-19 on people's social life is discussed, as well as influential factors such as social Medias. we aimed to examine the role of social media in disseminating information among participants. Despite the existence of independent social networks and the importance of their presence in the rapid transmission of news and information and their global news coverage, we can emphasize their prominent role in transmitting information about coronavirus and preventive information.

Psychological Impact under COVID-19: In this section, we discuss the effects of pandemics on the private lives and personal behaviors and emotional and psychological needs of participants. Expressing the positive and negative effects of the pandemic and home quarantine era. Increased anxiety and stress.

Economic Impact under COVID-19: Another negative effect of the Coronavirus pandemic has been the loss of many jobs, an increase in the number of unemployed workers, and an increase in costs without income. The virus has dealt a severe blow to the economies of businesses and households, and efforts have been made to interpret the virus's effectiveness.

Chapter 4

FINDINGS

4.1 Introduction

In this chapter, the results of the interviews are presented. Transcript analysis of the interviews provides rich information about the prospects of the host population. The interview was conducted by Eleven Russian-spoken people and Eleven Iranian residents of Caesar region, Iskele, and Ten man, including, and each was given about an hour. Each manager was given 1 hour to do the interview. The average age of the residents was between 19 and 42 years old, and the managers were between 26 and 44 years old. There was only one female manager in the company. Residents were interviewed for 8 days and managers were interviewed for 5 days. The results of this research were produced by taking notes, recording voice, and summarizing word-forword content.

	Date	Gender	Age	Marital status	Job status	Nationality
1	May 25,2020	Female	30	Single	Employee	Russian
2	May 25,2020	Female	33	Single	Employee	Russian
3	May 25,2020	Female	35	Married	Employee	Russian
4	May 25,2020	Female	44	Married	Employee	Russian
5	May 25,2020	Female	31	Married	Employee	Kazak
6	May 25,2020	Female	29	Married	Employee	Kazak
7	May 25,2020	Female	24	Single	Employee	Iranian
8	May 25,2020	Female	27	Single	Employee	Iranian
9	May 20,2020	Female	37	Married	Employee	Iranian
10	May 20,2020	Female	26	Single	Employee	Iranian
11	May 20,2020	male	19	Single	Employee	Iranian
12	May 20,2020	male	18	single	Employee	Iranian
13	May 20,2020	male	23	Single	Employee	Iranian
14	May 20,2020	male	27	Single	Employee	Iranian

Table 4: List of Interviewees

15	May 20,2020	male	29	Single	Employee	Iranian
16	May 17,2020	male	35	Single	Employee	Iranian
17	May 17,2020	male	34	Married	Employee	Russian
18	May 17,2020	male	39	Married	Employee	Russian
19	May 17,2020	male	30	Single	Employee	Russian
20	May 17,2020	male	31	Single	Employee	Russian
21	May 17,2020	male	44	Married	Employee	Kazak
22	May 17,2020	male	46	Married	Employee	Ukrainian
23	May 17,2020	male	43	Married	Employee	Ukrainian
24	May 17,2020	male	32	Married	Owner	Israeli
25	May 07,2020	male	33	Married	Employee	Iranian
26	May 07,2020	male	38	Married	Employee	Iranian
27	May 07,2020	male	39	Married	Employee	Israeli
28	May 07,2020	male	41	Married	Owner	Israeli
29	May 07,2020	male	62	Married	Owner	Israeli
30	May 07,2020	male	47	Married	Owner	Israeli
31	May 07,2020	male	43	Married	Employee	Israeli
32	May 07,2020	female	38	married	Owner	Israeli

4.2 Effects of COVID-19 Pandemic on Employees' Social Life

The pandemic nature of the coronavirus has separated the life cycle from normal. Fear of leaving home due to a lack of environment and healthy people. Disruption of activities and hobbies that were sometimes even very small but had to give up all of them. The news of the release of the virus has been terrifying. The obligation to use a mask, social distance and the absence of any close contact with friends have imposed very complicated conditions.

"We just went to the nearest store to buy food and hygiene ingredients. He did not interact with any of his friends and acquaintances and we were only allowed to leave the house to buy the necessary items. This was very boring. The atmosphere in the apartment was depressing and I needed fresh air, and I would just leave the house under the pretext of buying from the store so that I could breathe fresh air. The use of masks, gloves, disinfectants, the social distance was mandatory" (interviewee 5). "Although our residence was very safe and clean due to timely action, we felt much less dangerous. Hygiene was mandatory, and all people obeyed the law, creating a sense of security that there was no danger. Hygiene is quite effective, and we have not seen any positive cases in the town where we live, and there is a sense of security that we are safe" (interviewee 7).

"Compulsory quarantine, while ensuring your physical health, tested all activities and entertainment outside the home. Absolute housekeeping, cycling in the open air, walking and sitting in a cafe for hours, chatting with friends, spending time in casinos and nightclubs, group, and weekly games. All activities outside the home were forcibly canceled, creating a very dull period" (interviewee 19).

"Despite all these limitations, watching my favorite movies, playing online computer games, listening to music, designing software, and writing application programs related to my field of study have kept me from getting bored. The pandemic period has been a great time for me to succeed in my short-term plans" (interviewee 17).

And social networks are most important and effective tools that can be used against viruses because technology and communication have connected the world and all the news and information is instantly recorded and published on official and social networks from the farthest corners of the world. Corona also benefited from it and what effect it had on people's lives during the pandemic, to what extent they follow social media.

"At the beginning of the news, I was not completely worried about the pandemic. But the spread of the disease and its severity in a limited time and without limits led me to follow not only the official news but also social networks and look for ways to protect against the disease and immunity. What kind of food can strengthen the body and increase the level of immunity?" (interviewee 1).

Since not all social media news is credible and citational, publishing incorrect information intensifies fear among followers. As stated:

"At first, I followed all the news and websites on all the news networks, because I live abroad and I do not have access to my family due to the closure of the borders. The coronary heart disease, as well as the numerous reports of anxiety and stress, was a double whammy. That's why I closed social networks and followed only official news" (interviewee 12).

"Social media has created a lot of challenges in this period of my life. Following them has led me to make clear changes in my diet and to consume warm foods. And this change in diet has disrupted my immune and respiratory systems" (interviewee 8).

4.3 Effects of COVID-19 Pandemic on Employees' Economic Conditions

"By order of the government, all construction, recreation, and tourism sectors have been completely closed and no activities have been carried out. We have returned more than 300 employees' home" (interviewee 25).

"Since our business is dependent on the tourism industry, the closure of borders has put all plans to be suspended. According to the guidelines issued by the government, the use of masks and disinfectants are required. We started the business with a minimum of labor and social are respected. All consumables completely disinfected and completely sealed containers and closed environment, free of any contamination kept and used. All personnel are required to adhere to health regulations. There is enough space between the customer and customer acceptance limits to be there" (interviewee 26).

"The stress caused by the spread of the virus has been devastating. The company has been forced to lay off hundreds of workers. Many foreign customers, including Europeans and Asians, are in trouble. Because they have pre-purchased the buildings and have problems paying their installments. More than 90% of customers have called and asked to stop paying installments because they cannot pay due to the loss of their jobs. This is a double burden on the company that has paid huge costs and it is not possible to receive these amounts" (interviewee 27).

"The high season was completely shut down. We lost all reservations. Parties and parties were canceled and a lot of income was lost. The closure of the borders, the cancellation of any gathering, the fear of the people from getting sick, has imposed a lot of economic and psychological pressure on the company. The demand for loans around the staff to pay for living expenses had increased and the company has suspended the payment of loans due to unawareness of their future careers" (interviewee 28).

"We started working in two days, but our capacity is very low. In addition to our construction, there are other small businesses such as Spa, Kindergarten, Bar, Restaurant, Bakery, Training center. But it's all closed and some of my employees are staying at home and some are returning home. And they are waiting for me to return to work, and at this time I am obliged to pay the rent for their houses" (interviewee 30). "Working hours were reduced from full-time to part-time. In business, not earning money every day means making a loss. Three months of complete closure of all businesses have been a fatal blow to the company's economy and its employees. Because the fear of the disease caused no one to leave the house and all the raw materials in the refrigerators spoiled and were thrown away. On the other hand, there is no need for labor without sales, and there are concerns about job loss, indescribable tension, and anxiety among employees" (interviewee 29).

"Many financial and social costs have been incurred by the company. Because the end of spring is the beginning of the tourist season and customer attraction, and all customers and reservations of the company are suspended. The horror that has arisen between customers and the workforce needs a lot of time to make up for. In fact, this season is gone. Due to the closure of the borders, managers are satisfied with the return of 30% of last year's income" (interviewee 23).

"We can't estimate exactly how much damage we've lost numerically, but we're sure that the lack of revenue every day, despite equipping places, has cost us dearly. Especially since all customers have cancelled flight tickets, room reservations, party reservations" (interviewee 27).

"All my workforce is sitting at home and there is no cost and nothing to do, but I have to pay the rent for the buildings. All the equipment and machinery now and the tools are idle. In a business, we know that we will lose money every day because of the lack of work, and this amount of closure has cost us a lot. My concern is that this summer has been the winter for me, and I know I can't make much money this winter. This is understandable to me. This summer has been a very long winter for us. If this is the *case in August and we do not have any income from tourists, this loss will be very big for us*" (interviewee 23).

"The government has done nothing for the companies in this financial crisis. At least it could reduce taxes. Not only has it not forgiven the legal costs we have to pay, but it also has not even reduced it. I think the government should help the company. Because the company helps the government get money and import currency by attracting tourists from all over the world. And without paying taxes, the government cannot survive. So, for the company to stay afloat and reduce the company's pressure, the government must reduce the company's government spending. We pay a lot of taxes every month and year for all the activities, and in these two, three months or six months, it is the government's turn to help us" (interviewee 31).

"In my opinion, full quarantine was not the right thing to do, and it would be better to quarantine all the hotels. They did the right thing, but if the virus had not been allowed into the country from the beginning, there would have been no need for quarantine for nearly two months. In my opinion, it is better to quarantine only polluted places and not to suspend the whole country" (interviewee 30).

"Three factors must be considered in my mind. First of all, a budget for this period of the crisis must be considered so that we can support the employees and keep the company alive. The second case is that of students who study on the island and work temporarily in various departments, and if they cannot be granted temporary work permits, they can work legally and receive government support. Therefore, the company cannot pay for students. The third case is about restaurant raw materials. There is a huge amount of raw materials in restaurants that need to be managed and maintained during the quarantine period, and to cut everything off altogether is an irreparable cost to restaurants. And the government could consider arranging to return or return raw materials to distributors and wholesalers. Financial management and psychological management of employees and customers is a factor that should be considered for the future of the company" (interviewee 29).

"We follow all the rules to reduce the risk. And this is the best view of Quarantine. This performance made us lucky and we didn't have any illnesses and we were completely safe. This city is not crowded. And crisis management can easily control difficult situations. As the government did now, it was successful" (interviewee 21).

"The crisis was out of their control, and that it would be better for the government, as the decision-maker for the whole country, to be responsible for coordinating the crisis so that the people would suffer the least. On the other hand, due to the small size of the country and the lack of infrastructure, the government cannot be expected to receive the same support as other developing countries. That's why the company has sought help from the crisis headquarters within the organization to maintain and prevent harm. But there were three main factors for managers that can only be enforced and controlled by the government" (interviewee 26).

4.4 Effects of COVID-19 Pandemic on Employees' Psychology

The most important and destructive effect of the coronavirus has been on the thoughts and psyche of society. Because many jobs have been lost, forced quarantine and the closure of all businesses have caused great financial and social damage to families.

As stated by the interviewee:

"The company closed all departments and many workers were forced to return to their home countries. Because we are students, we do not have any support from the government and we are even pressured to pay basic expenses such as bills and consumables".

"The rising price of the dollar against the lira has put double pressure on us because our income is in lira and we have to pay the university tuition in dollars and euros. On the other hand, we have incurred more costs due to job loss" (interviewee16).

Anxiety and tension have increased and families have lost the ability to support. This anxiety and stress are more common among married people than single people.

"Because they are often immigrants, in addition to the financial burden on their lives, the stress of disrupting plans and escalating disagreements between couples because they spend so much time at home," they said. This has greatly increased the tension" (interviewee 21).

"Government support for students has been very weak, as rent for dormitories and houses is set in dollars and salaries are paid in the lira. Homeowners do not have any discounts on fees. There was only a 15% discount on the payment of bills, which could not be helped at all. Although students are the most lucrative group in the country and on the other hand the most vulnerable, they have received the least attention. Due to the lack of hospitals and creating more space for patients, students in government dormitories have been asked to leave the dormitories. Despite this crisis and the lack of income and quarantine, the government has put the most pressure on students" (interviewee 4). In contrast, we have seen the positive effect of quarantine on some families.

"Quarantine provided a good opportunity for me and my family to spend more time together. Answer the questions we had and resolve the misunderstandings between us. Read books, watch movies, and spend time together, Take enough time for our children and find a better way to deal with problems. Let's do the backlog and it has been an opportunity to address our interests" (interviewee 7).

"Quarantine has given me enough rest. Due to my studies and long working hours, I had very little time for myself and could not handle other programs. I was also able to take online courses related to my field and add to my skills. Make a precise and calculated plan for my daily life and plan to achieve my goals" (interviewee 1).

4.5 Effects of COVID-19 Pandemic on Food and Beverage Operations

To highlight the effects of the pandemic in Iskele and thus to identify the changes that have taken place since the outbreak in Iskele, the host community claimed that the pandemic had a direct effect on various aspects of people's lives (psychological, economic, social, cultural).

According to the interviewees, Cyprus is a quiet country, far from any environmental pollution, and for this reason, it is one of the largest tourist destinations between Europe, Asia, and Africa. But now, due to the crowds and the advancement of technology and the expansion of the tourism industry, as in other countries, it is facing challenges, and the COVID-19 is no exception.

Since the transmission of this virus is very fast and accessible and can be spread in any form, and often, domestic animals are freely present in the environment, the question

was asked whether these animals can transmit the disease? Often because of their emotional connection to the animals, they were not considered carriers of the disease at all, and a number of them stated briefly.

"Animals are very kind to us and can be our friends. They cannot be carriers of the disease in any way. Humans may cause them to become ill, but they cannot transmit the disease to humans" (interviewee 13).

On the other hand, the virus is an external agent that can be transmitted in any way. Several respondents stated like below.

"Although pets are harmless, the disease is no exception. Since there is no complete knowledge of this virus, it is better to take the necessary precautions and avoid contact with animals" (interviewee 12).

Besides, eating fresh foods such as raw meat, raw eggs, raw vegetables and fruits, and raw seafood can transmit the disease. The respondent believed that like below.

"Fruits and vegetables can be more carriers of the disease than other cases because in the culture of Cyprus, the raw consumption of meat and seafood, as well as eggs, is very limited. For this reason, they must be disinfected more carefully and then consumed" (interviewee 15).

The unknown behavior of the COVID-19 virus has made us much more careful and alert to any health behavior. Because new findings have been made about the virus, which contradicts past information, people are paying more attention to personal hygiene and food security. For this reason, when preparing the required raw materials and preparing them before cooking, they perform activities to be completely sure of the health of the food.

"I carefully disinfect all the raw materials prepared from the supermarkets and then expose them to the sun for at least one hour so that direct light shines on them. I limit the consumption of fast food and cook, and while cooking I am sure that the temperature is higher than 80 degrees Celsius and the virus will be eliminated if present. I keep the rest of the food in a container with a lid in the refrigerator and I will consume it in less than two days" (interviewee 13).

On the other hand, some of them had different opinions.

"In this way: because of living in a safe town, there is no need to observe health issues and there is no change in their normal life. The method of cooking, washing, and disinfection is done according to the previous procedure and we have no worries about this" (interviewee 5).

It is noteworthy that although some of the interviewees did not have any concerns about the spread of the coronavirus, due to the prevailing laws and the severity of the disease, they tried to have the least contact with the outside environment and follow the rules. Participants discuss how to change cooking behaviors at home compared to pre-pandemic times. The number of times cooking at home has increased. Hygienic points are observed during cooking. As well as disinfecting pre-cooked foods. "During the outbreak of the disease, quarantine, and closing of all service centers are done every day in the cooking house. And sometimes I cook twice a day. Before I got sick, I only cooked on the weekends, usually once a week" (interviewee 14).

"Not only has the number of cooks in the day quarantine, but hygiene is also very annoying. Due to the use of disinfectant, often the house does not smell and can cause breathing difficulties. Before you start cooking, using disinfectants to clean my all raw materials. I consider carefully the sintering temperature and the microwave and the oven used to bake it right and I will make a full meal" (interviewee 8).

"The main management decided to talk to the forces in compliance with the rules of the government during the quarantine period and sincerely encourage them. Help their financial plan by paying interest-free or low-interest loans. With the help of the security system, we made the area completely safe in terms of health to reduce anxiety. By forming online groups, we communicate with the staff and we are by their side during the quarantine period. By making a video of the town and sharing it on social media, we have assured our customers that tourists from outside the city and the country are in a completely safe and healthy environment and can travel here after the borders are opened with health tips" (interviewee 31).

"Initially, all staff perform non-viral testing. We closed everywhere to keep the security of the personnel. After that, the whole restaurant is disinfected. We will train employees to take care of themselves and their clients according to the new rules of the Health Organization. Observance of public health tips, which all personnel should follow, and personal hygiene among employees. All points such as changing clothes, how to use sanitary ware such as masks and gloves, which of course is provided according to the job position of each department, we as the manager are obliged to provide them and they are obliged to observe and use them. We only return for delivery. We disinfect all systems, such as elevators and handles. We try to get customers to come back and enjoy all the space here" (interviewee 33).

In addition to consolidating the government's power to control and control the disease, this course has shown the government's weakness in the way it provides services and supports citizens, especially students. Because people have been very vulnerable in meeting the basic needs of their lives and we have witnessed many complaints from people.

4.6 Data Analysis

To review and analyze the data, the responses of the interviewees have encoded in addition to preventing the repetition of words, we identify important points. The code is shown in the table below.

Categorization	The logical grouping
Coding	Data analysis by converting raw data into standard data that can be iden-
	tified and tagged
Constant	According to the framework of fundamental analysis, after collecting the
comparison	data, we first encode them and they are analyzed in comparison with
comparison	other parts of the data, as a result, more data are collected and analyzed.
Thematic anal-	Normally used for self-report interview data, but can be used for text
ysis	analysis until the questions asked are over.

 Table 5: Demonstration of the Data Analysis Process in Qualitative Research

In this table, 4 sections of data collection are shown, the description of each of which is briefly shown in the table. In this chapter, research methods, techniques, approaches to data collection, sampling and analysis of data in qualitative research is covered. To determine the encoding and encryption of the data, great attention must be paid to the sentences and the repetition of the sentences so that the data is properly covered. The encodings are shown in the table below.

Item	Recurrent Word	
1	Food safety	
2	Sanitation program	
3	Budget	
4	Preparation	
5	Tourist impact	
6	Eating habit	
7	Hobbies	
8	Self-Hygiene program	
9	Anxiety and stress	
10	Financial problem	
11	The role of Social media	
12	Government relief program	
13	Environment security	
14	Government health program	
15	Negative Influence	

Table 6: Encodings Words

In this section, the most important questions were examined and the results of the stud-

ies will be fully interpreted in the conclusion section.

Chapter 5

CONCLUSION

This dissertation examines the pandemic effect of Virus Corona on the social, economic, and psychological people' life. Based on the research questions, the data were analyzed. The research findings will be discussed first and then the limitations will be stated.

In terms of tourism demand and analyses the interviews, several factors including hygiene and food safety, turnover, psychological impact and government supporting program are extracted. Before the expansion of COVID 19, the food retail sector had higher sales through supermarkets and stores, and the foodservice sector grew significantly with a significant increase in market share of retail sales.

The results of this study showed that the company has weak human resource management strategies and they have no possible plan to control this type of health and epidemiological crisis. Also, the beverage and beverage departments do not have a strategy for managing the various negative psychological effects of COVID-19 on employees. Therefore, since companies should develop a comprehensive contingency plan to manage the prevalence of COVID-19 as a mandatory requirement set by the health organization, the human resources department should develop strategies to control anxiety, depression, and staff stress during a Reduce pandemics and/or crises. Due to the increasing concerns, fears, and sleep disorders associated personnel for fear of not being able to see your family and friends, not being able to donate to their families and other members of striking and the feeling that they control their own lives lost. Anxiety employees because of fear of an uncertain future and the economic downturn are inflated.

The results of this study showed that the state of hope and sense of belonging of the employees of the beverage and food sector is at its lowest level. The company's leadership failed at several levels of human resource management because they reached a point where they were recognized as unreliable and untrustworthy by their employees.

As a result, without any government support, the possibility of a massive shutdown of the tourism industry will occur. Government participation is needed to recover and develop a destination in the future. Besides, business owners need to be involved in the ongoing development of business solutions. This crisis has a significant negative impact on tourism destinations. In this case, business owners are forced to work with local authorities and destination management organizations. On the other hand, state officials need to understand the role of tourism in destinations and reconsider sustainability policies in government tourism policies to deal with the crisis more effectively in the future.

The COVID-19 disease has shown that developing a comprehensive strategy to help employees is extremely important.

Leaders need to be approachable, and they need to identify members who are anxious and depressed, and explain that feeling anxious is normal because insecurity and loss of control are the two main factors associated with stress and anxiety. Business owners must not only be prepared to respond to the crisis and recover their businesses but also be able to manage future crisis events sustainably.

Managers believe that the revival of tourism may take longer than a natural disaster and that conditions may not improve soon. Governments are making significant investments in the tourism sector and intend to create incentives for tourists as a tool to strengthen the country's economy in the long run. The COVID-19 pandemic has sensitized the entire population as well as central and local authorities to the need for quality health care.

The tourism industry will certainly experience a significant decline in employment due to the COVID-19 pandemic. However, this issue will also affect the family members of the employees. Employees who do not receive a salary while unable to engage in activities such as looking for another job, finding ways to increase visibility in the labor market, reorganizing family finances by reducing costs, tourism companies should have a minimum basic salary for all Provide staff affected by the COVID-19 pandemic.

It has completely impacted the organization's financial goals and long-term plans. As a result, with increasing fear of COVID-19, psychological anxiety as well as organizational and professional turnover goals increase. Kadarth and Seville (2018) detailed study of the economic problems in the wake of COVID-19 include the cost of the health system, both public and private, pressure on health systems to control outbreaks, loss of productivity, employment, observing the social distance that disrupts economic activity and its results Pandamyk negative impact on tourism and foreign direct investment. (Goodell, J. W. 2020)

The results showed that the expansion of COVID-19 has created a lot of fear and panic among residents and managers of the region, and the severity of this fear has been much higher among women than men. It has completely impacted the organization's financial goals and long-term plans.

Both children and adults need to stay home. People have come to realize that they are personally vulnerable, that they are both sick and losing their jobs, and that eating habits need to change - for example, three meals at home on Day. Change the number of times "buy.

There was an increase in demand for groceries online, which made the weakness of the infrastructure more tangible. Chain stores Grocery stores and supermarkets hired more employees to deliver orders and distribute online, and increased wages.

Short-term problems due to lack of transportation service due to over-transportation, processing, and packaging challenges, a sharp decline in major customers due to mass closures of restaurants and bakeries.

5.1 Implementation

Although an advanced warning system cannot guarantee success in preventing a pandemic, studies have shown that the role of government and the public in controlling the disease overlaps. The main factors to control the outbreak, timely, informing the public awareness of the disease and how-to adherence to health protocols, the most important step toward better control of the disease so that in the event of the loss of life and financial minimized.

The study showed that the spread of the corona virus has had a severe negative effect on restaurant and coffee shop staff. Many employees lost their jobs, as a result of which the crisis among families has intensified. It is almost impossible to replace and find a new job, and if there is not enough support from the government, the family will disintegrate.

Although the Pandemic cause loss of small businesses, but the industry greater opportunity to more market share in compromise and at lower cost small business owners more and power, but because of the loss of trust and lack To ensure the health of passengers, managers have to incur exorbitant costs for advertising.

As the tourism industry is the largest and most lucrative industry in the world, it is also the most vulnerable. For this reason, the existence of an independent and efficient crisis headquarters that can deal with and find ways to reduce economic, psychological, and social pressure among the people is essential. Since the government has a key role in maintaining and developing the country, it needs a group of thinkers to be able to manage the crisis and control the crisis with minimal harm to society, businesses, and enterprises. On the other hand, the cooperation and interaction of the people with the government and the observance of the laws, cause the government to fully focus on solving the problems caused by the pandemic to find the best way to overcome the crisis.

5.2 Limitations

This study can conduct several limitations;

- 1- Our study was not conducted in a high season, so we had lower customers numbers visiting the restaurant.
- 2- There was no access to all the managers of the restaurant department because they were outside the organization and the country due to quarantine and closed borders.
- 3- Several interviewees refused to attend the interview due to fear of contracting the disease.
- 4- Due to curfews, some residents were unable to attend the interview.
- 5- Due to the closure of the offices, it was not possible to access some administrative and accounting staff.
- 6- The interviews with the customers were made quickly because the customers would prefer to relax and spend time with their friends and/or family while enjoying their meals and drinks rather than answering questions.

5.3 Recommendation

Timely awareness and accurate information about the risks of pathogens and the importance of good health measures due to the current pandemic of COVID-19. An active food security system Food safety is a top priority when an pandemic is required. Governments must ensure full attention and funding for the provision of safe food. Government officials can ensure that consumers are preparing safe food by approving foods after approval by appropriate laboratories. This requires that the government have a strong food control system. Fundamental policy changes and funding will be needed to maintain progress in each country. Consumers are required to maintain good hygiene and hygiene practices and should avoid eating raw or hidden foods of animal origin and follow key control measures for food safety.

REFERENCES

ANADOLU AJANSI. (2020). Retrieved from https://www.aa.com.tr/ official website.

- AARP.2020 Retrieved from https://www.aarp.org/health/conditions-treatments/info-2020/coronavirus-facts.html
- Aghababaeian, H., Araghi Ahvazi, L., & Ostadtaghizadeh, A. (2019). The methanol poisoning outbreaks in Iran 2018. *Alcohol and alcoholism*, *54*(2), 128-130.
- Ahmad, A. R., & Murad, H. R. (2020). The impact of social media on panic during the COVID-19 pandemic in Iraqi Kurdistan: online questionnaire study. *Journal* of Medical Internet Research, 22(5), e19556.
- Air New Zealand. (2020). COVID-19 FAQs. Retrieved April 6, 2020, from https://www.airnewzealand.co.nz/COVID19-faqs [Google Scholar].
- Alleman, B. W., Luger, T., Reisinger, H. S., Martin, R., Horowitz, M. D., & Cram, P. (2011). Medical tourism services available to residents of the United States. *Journal of general internal medicine*, 26(5), 492-497.
- AVMA.2020. Retrieved from https://www.avma.org/resources-tools/animal-healthand-welfare/COVID-19)
- Blake, A., & Sinclair, M. T. (2003). Tourism crisis management: US response to September 11. Annals of Tourism Research, 30(4), 813-832.

- Bramstedt, K. A., & Xu, J. (2007). Checklist: passport, plane ticket, organ transplant. *American Journal of Transplantation*, 7(7), 1698-1701.
- Business.Insider.Com.2020, Retrieved from http://www.business.in sider.com/China,Whuan/coronavirus
- Calafat, A., Blay, N., Bellis, M., Hughes, K., Kokkevi, A., Mendes, F., ... & Duch, M.A. (2010). Tourism, nightlife and violence: a cross cultural analysis and preventive recommendations. *Valencia, Spain*, 10-43.
- Coronavirus disease control. (2019). Retrieved from https://www.cdc.gov/coronavirus/2019- ncov/infection-control/hcp-hand-sanitizer.htm
- Chatley, R., Donaldson, A., & Mycroft, A. (2019). The next 7000 programming languages. In *Computing and Software Science* (pp. 250-282). Springer, Cham.
- Cheng, V. C., Wong, S. C., Chuang, V. W., So, S. Y., Chen, J. H., Sridhar, S., ... & Yuen, K. Y. (2020). The role of community-wide wearing of face mask for control of coronavirus disease 2019 (COVID-19) pandemic due to SARS-CoV-2. *Journal of Infection*.
- Chick, J. (2020). Alcohol and COVID-19. Alcohol and Alcoholism (Oxford, Oxfordshire).

- Chinazzi, M., Davis, J. T., Ajelli, M., Gioannini, C., Litvinova, M., Merler, S., ... & Viboud, C. (2020). The effect of travel restrictions on the spread of the 2019 novel coronavirus (COVID-19) outbreak. *Science*, *368*(6489), 395-400.
- Cordesmeyer, M., & Papathanassis, A. (2011). Safety perceptions in the cruise sector: A grounded theory approach. In *Cruise sector challenges* (pp. 127-146). Gabler Verlag.
- Danyluk, M., Seymour, N., Yavelak, M., Christian, C., & Chapman, B. (2020). COVID-19 and Food Safety FAQ: Shopping and Handling Groceries. *EDIS*, 2020(2).
- De los Santos, J. A. A., & Labrague, L. J. (2020). Impact of COVID-19 on the Psychological Well-Being and Turnover Intentions of Frontline Nurses in the Community: A Cross-Sectional Study in the Philippines. *medRxiv*.
- De Wit, E., Van Doremalen, N., Falzarano, D., & Munster, V. J. (2016). SARS and MERS: recent insights into emerging coronaviruses. *Nature Reviews Microbiology*, 14(8), 523.
- Drosten, C., Meyer, B., Müller, M. A., Corman, V. M., Al-Masri, M., Hossain, R., ...
 & Alhakeem, R. F. (2014). Transmission of MERS-coronavirus in household contacts. *New England Journal of Medicine*, *371*(9), 828-835.
- Dye, C., & Gay, N. (2003). Modeling the SARS pandemic. *Science*, *300*(5627), 1884-1885.

- Fauci, A. S., Lane, H. C., & Redfield, R. R. (2020). COVID-19—navigating the uncharted.
- FDA. (2020, March 30). Retrieved from https://www.fda.gov/consumers/consumerupdates/safely-using-hand-sanitizer CDC. (2020, March 14).
- Fernandes, N. (2020). Economic effects of coronavirus outbreak (COVID-19) on the world economy. *Available at SSRN 3557504*.
- Foldy, S. L., Barthell, E., Silva, J., Biedrzycki, P., Howe, D., Erme, M., ... & Eby, E. (2004). SARS Surveillance Project—Internet-enabled multiregion surveillance for rapidly emerging disease. *Morbidity and Mortality Weekly Report*, 215-220.
- Galanakis, C. M. (2020). The Food Systems in the Era of the Coronavirus (COVID-19) Pandemic Crisis. *Foods*, 9(4), 523.
- Gössling, S., Scott, D., & Hall, C. M. (2020). Pandemics, tourism and global change:
 a rapid assessment of COVID-19. *Journal of Sustainable Tourism*, 1-20.
 (McKercher & Chon, 2004; Siu & Wong, 2004).
- Hageman, J. R. (2020). The coronavirus disease 2019 (COVID-19). Pediatric annals, 49(3), e99-e100.
- Hall, C. M. (2011). Health and medical tourism: a kill or cure for global public health?. *Tourism review*.

Hannum, E., Liu, X., & Wang, F. (2018). Estimating the Effects of Educational System Consolidation: The Case of China's Rural School Closure Initiative. Available at SSRN 3140132.

HARVARD.2020. Retrieved from https://www.harvard.edu/coronavirus

- Hatchett, R. J., Mecher, C. E., & Lipsitch, M. (2007). Public health interventions and pandemic intensity during the 1918 influenza pandemic. *Proceedings of the National Academy of Sciences*, 104(18), 7582-7587.
- Holshue, M. L., DeBolt, C., Lindquist, S., Lofy, K. H., Wiesman, J., Bruce, H., ... & Diaz, G. (2020). First case of 2019 novel coronavirus in the United States. *New England Journal of Medicine*.
- Holtenius, J., & Gillman, A. (2014). The Spanish flu in Uppsala, clinical and epidemiological impact of the influenza pandemic 1918–1919 on a Swedish county. *Infection ecology & epidemiology*, 4(1), 21528.
- Hospitalitynet.2020. Retrieved from https://www.hospitalitynet.org/news/4015946.html
- Hubbs, C., Edwards, R. J., & Garrett, G. P. (2008). An annotated checklist of the freshwater fishes of Texas, with keys to identification of species.
- Jamal, T., & Budke, C. (2020). Tourism in a world with pandemics: local-global responsibility and action. *Journal of Tourism Futures*.

- John, R. K. S., King, A., De Jong, D., Bodie-Collins, M., Squires, S. G., & Tam, T.
 W. (2005). Border screening for SARS. *Emerging infectious diseases*, 11(1),
 6.
- Kampf, G., Todt, D., Pfaender, S., & Steinmann, E. (2020). Persistence of coronaviruses on inanimate surfaces and their inactivation with biocidal agents. *Journal of Hospital Infection*, 104(3), 246-251.
- Knobler, S., Mahmoud, A., Lemon, S., Mack, A., Sivitz, L., & Oberholtzer, K. (2004).Learning from SARS: preparing for the next disease outbreak.
- Lade, G. E., & Rudik, I. (2020). Costs of inefficient regulation: Evidence from the Bakken. *Journal of Environmental Economics and Management*, 102336.
- Lê, M. P., Jaquet, P., Patrier, J., Wicky, P. H., Le Hingrat, Q., Veyrier, M., ... & Bouadma, L. (2020). Pharmacokinetics of lopinavir/ritonavir oral solution to treat COVID-19 in mechanically ventilated ICU patients. *Journal of Antimicrobial Chemotherapy*, 75(9), 2657-2660.
- Lee, T. H., & Jan, F. H. (2019). Can community-based tourism contribute to sustainable development? Evidence from residents' perceptions of the sustainability. *Tourism Management*, 70, 368-380.
- Li, Q., Guan, X., Wu, P., Wang, X., Zhou, L., Tong, Y., ... & Xing, X. (2020). Early transmission dynamics in Wuhan, China, of novel coronavirus–infected pneumonia. *New England Journal of Medicine*.

- Li, X., Song, Y., Wong, G., & Cui, J. (2020). Bat origin of a new human coronavirus: there and back again. *Science China Life Sciences*, *63*(3), 461-462.
- Lindvall, O., & Hyun, I. (2009). Medical innovation versus stem cell tourism. *Science*, *324*(5935), 1664-1665.
- Macready, A. L., Kennedy, O. B., Ellis, J. A., Williams, C. M., Spencer, J. P., & Butler,
 L. T. (2009). Flavonoids and cognitive function: a review of human randomized controlled trial studies and recommendations for future studies. *Genes & nutrition*, 4(4), 227-242.
- Mycroft-West, C. J., Su, D., Elli, S., Li, Y., Guimond, S. E., Miller, G. J., ... & de Lima, M. A. (2020). The 2019 coronavirus (SARS-CoV-2) surface protein (Spike) S1 Receptor Binding Domain undergoes conformational change upon heparin binding. *BioRxiv*.
- Nassiri, R. (2020). Perspective on Wuhan viral pneumonia. *Advances in Public Health, Community and ropical Medicine*, 2.
- Nicola, M., Alsafi, Z., Sohrabi, C., Kerwan, A., Al-Jabir, A., Iosifidis, C., ... & Agha,
 R. (2020). The socio-economic implications of the coronavirus and COVID-19 pandemic: a review. *International Journal of Surgery*.
- Nikpouraghdam, M., Farahani, A. J., Alishiri, G., Heydari, S., Ebrahimnia, M., Samadinia, H., ... & Dorostkar, R. (2020). Epidemiological characteristics of

coronavirus disease 2019 (COVID-19) patients in IRAN: A single center study. *Journal of Clinical Virology*.

- National Institutes of Health. (2020). Retrieved from https://www.nih.gov/newsevents/news-releases/nih-shifts-non-mission critical laboratory operationsminimal-maintenance-phase.
- Norton, R. A., & Monu, E. A. Novel Coronavirus (2019-nCoV) and Food Safety: A Time for Facts, Not Panic.
- Patel, P. K., Sharma, J., Kharoliwal, S., & Khemariya, P. (2020). The Effects of Nobel Corona Virus (COVID-19) in the Tourism Industry in India.
- Peiris, J. S., Yuen, K. Y., Osterhaus, A. D., & Stöhr, K. (2003). The severe acute respiratory syndrome. *New England Journal of Medicine*, 349(25), 2431-2441.
- Rehm, J., Kilian, C., Ferreira- Borges, C., Jernigan, D., Monteiro, M., Parry, C. D., ...
 & Manthey, J. (2020). Alcohol use in times of the COVID 19: Implications for monitoring and policy. *Drug and Alcohol Review*.
- Sánchez-Pulido, L., Martín-Belmonte, F., Valencia, A., & Alonso, M. A. (2002). MARVEL: a conserved domain involved in membrane apposition events. *Trends in biochemical sciences*, 27(12), 599-601.
- Seraphin, H., Sheeran, P., & Pilato, M. (2018). Over-tourism and the fall of Venice as a destination. *Journal of Destination Marketing & Management*, *9*, 374-376.

- Seymour, N., Yavelak, M., Christian, C., Chapman, B., & Danyluk, M. (2020). COVID-19 and Food Safety FAQ: Is Coronavirus a Food Safety Issue?(Mandarin Chinese). *EDIS*, 2020.
- Shahidi, F. (2020). Does COVID-19 Affect Food Safety and Security?. Journal of Food Bioactives, 9.
- Shield, K., Manthey, J., Rylett, M., Probst, C., Wettlaufer, A., Parry, C. D., & Rehm, J. (2020). National, regional, and global burdens of disease from 2000 to 2016 attributable to alcohol use: a comparative risk assessment study. *The Lancet Public Health*, 5(1), e51-e61.
- Smith, Melanie, and László Puczkó. Health, Tourism and Hospitality: Spas, wellness and medical travel. Routledge, 2014.
- Uddin, M. N., Alam, B., Islam, S. S., Arif, M., Alam, M. M., & Kabir, S. L. (2020). Impact of COVID-19 on food safety and security in low and middle income countries. *Asian Journal of Medical and Biological Research*, 6(2), 130-137.
- Van Doremalen, N., Bushmaker, T., Morris, D. H., Holbrook, M. G., Gamble, A., Williamson, B. N., & Lloyd-Smith, J. O. (2020). Aerosol and surface stability of SARS-CoV-2 as compared with SARS-CoV-1. *New England Journal of Medicine*, 382(16), 1564-1567.

- Wen, Z., Huimin, G., & Kavanaugh, R. R. (2005). The impacts of SARS on the consumer behaviour of Chinese domestic tourists. *Current Issues in Tourism*, 8(1), 22-38.
- WHO. (2019). Retrieved from https://www.who.int/emergencies/diseases/novel-coronavirus-2019
- WHO. (2019), Retrieved from https://www.who.int/gpsc/5may/Guide_to_Local_Production.pdf
- WHO, (2020). Retrieved from World Health Organization Coronavirus disease 2019 (COVID-19) Situation Report–36. Geneva: WHO; 2020.
- WHO, (2020) . Retrieved from World Health Organization. (2020). Coronavirus disease 2019 (COVID-19): situation report, 72.
- WHO,.(2020), Retrieved from World Health Organization. April 2010. Guide to Local Production: WHO recommended Hand rub Formulations;
- Wilder-Smith, A. (2006). The severe acute respiratory syndrome: impact on travel and tourism. *Travel medicine and infectious disease*, *4*(2), 53-60.
- Worldguides. (2020). Retrieved from http://www.worldguides.com/europe/cyprus/famagusta/famagusta_attractions

- Wu, H. C., Li, T., & Li, M. Y. (2016). A study of behavioral intentions, patient satisfaction, perceived value, patient trust and experiential quality for medical tourists. *Journal of Quality Assurance in Hospitality & Tourism*, 17(2), 114-150.
- Ying, T., Wang, K., Liu, X., Wen, J., & Goh, E. (2020). Rethinking game consumption in tourism: a case of the 2019 novel coronavirus pneumonia outbreak in China. *Tourism Recreation Research*, 1-6.
- Zhong, N. S., Zheng, B. J., Li, Y. M., Poon, L. L. M., Xie, Z. H., Chan, K. H., ... & Liu, X. Q. (2003). Epidemiology and cause of severe acute respiratory syndrome (SARS) in Guangdong, People's Republic of China, in February, 2003. *The Lancet*, 362(9393), 1353-1358.
- Zou, L., Ruan, F., Huang, M., Liang, L., Huang, H., Hong, Z., ... & Guo, Q. (2020). SARS-CoV-2 viral load in upper respiratory specimens of infected patients. *New England Journal of Medicine*, 382(12), 1177-1179.