

CORONAVIRUS BRIEF

LATEST FIGURES

- As of 27 February, there have been 82,170 reported cases, 78,497 of which are in mainland China. There have been 2,804 deaths and 32,898 full recoveries. The fatality rate is 3.4%, while the full recovery rate is 40.0% to date. The [linked tracker](#) provides the latest figures.
- According to the WHO most recent study from China CDC, 81% of cases are mild, 14% are severe and 5% are critical.
- Comparing the Coronavirus to SARS (2003). For SARS there were 8,437 cases, 813 deaths. The fatality rate was 10%. Comparing the Coronavirus to MERS (2012). For MERS, there were 2,494 cases and 858 death. The fatality rate was 34.4%.

IMPACT

- The impact of H1N1 (2009) on the global economy was estimated between \$45-\$55 billion. The costs of H1N1 on just the Mexican Travel & Tourism sector amounted to \$5 billion.
- The impact of SARS (2003) on the global economy was estimated between \$30-\$50 billion. China had a 25% reduction of its Travel & Tourism GDP as a result and experienced a loss of 2.8 million jobs. It took China's Travel & Tourism sector 16 months to recover to pre-crisis international arrivals levels.
- Coronavirus is more widespread in China in 2020 to date than the SARS virus in 2003. While the virus has spread to over 30 other countries, it has been on a comparatively limited basis.
- Oxford Economics (OE) believes that the virus will have a high but short-lived impact on Chinese Travel & Tourism and believes there will be a rapid recovery. The expected recovery periods vary according to the type of travel. Overall, the recovery is expected to begin in the second half of this year (2020), which is consistent with prior health outbreaks, for outbound and domestic travel.
- According to Oxford Economics (OE), the global impacts are expected to be greater than during SARS (2003), with significant impacts in more destinations due to a much greater reliance on Chinese Travel. The scenarios indicate that there could be 7-25 million fewer Chinese departures in 2020 as a direct result of the virus. In terms of spending, China, there is likely going to be a \$22 billion loss in Chinese visitor spending in 2020 (could reach \$73 billion under downside scenario).

CHINA IN CONTEXT

- The growth of Chinese tourism since the 80s has been nothing short of phenomenal. According to our research, Travel & Tourism GDP in China has increased nearly 11-fold between 1995 and 2018, with growth averaging 10.9% per year during the same period. The growth of outbound spending by Chinese travellers has increased nearly 52-fold between 1995 and 2018, with an average growth of 18.7% per year during this period. Between 1995 and 2018 international arrivals in China grew from 20 million to 62 million.
- China has become the world's largest spender with 16.3% of international tourism spending globally. In effect, Outbound spending has increased over 7-fold over the last 10 years (2008-18). It has expanded on average by 21.7% pa during this time.
- In fact, by 2018, China alone contributed one quarter of global Travel & Tourism growth and accounted for 51% of Travel & Tourism GDP in the Asia-Pacific region. Of China's 62 million outbound departures, 21% went to Hong Kong, 13% to Macau, 10% to Thailand, 7% to Japan, 7% to South Korea and 42% to the rest of the world.
- The top 20 Chinese outbound destinations (in order): Hong Kong, Macao, Thailand, Japan, South Korea, Vietnam, Singapore, Taiwan, US, France, Russia, Cambodia, Malaysia, Indonesia, Germany, Australia, UAE, the Philippines, Myanmar and Switzerland.

OUR RESEARCH

- We found that for outbreaks/disease cases, the average recovery time was 19.4 months to pre-crisis arrival levels. The range was 10 months to 34.9 months.
- The Travel & Tourism sector is becoming increasingly resilient. Our research (across the 4 types of crisis), shows that between 2001 and 2018, the months to recovery decreased from 26 months to 10 months on average.
- Here is the link to our [Crisis Readiness Report](#).

BEST PRACTICES FROM OUR RESEARCH

- **No one stakeholder group can do it on its own- Public Private Collaboration is Key:** The increasing intricacy and interconnectedness of global events requires governments to work with the private sector so as to improve their preparedness to mitigate the impact of crises, their management to effectively address the crisis as well as enhance their responsiveness to ensure a speedy recovery.
- **Fear and panic-** Margaret Chan, Former Director General of the WHO, stated that 90% of economic losses during any outbreaks arise from the uncoordinated and irrational efforts of the public to avoid infection. In this context, it is essential to enhance coordination and cooperation to make sure people are safe, both from a health perspective but also an economic one.
- **Countries learn from their experience and those of others-** The SARS outbreak brought China virtually to a standstill, forcing the country to thoroughly review its infectious disease control policies. Since then, the Chinese government has implemented new and innovative strategies, strengthened the related aspects of the legal system and the disease prevention and control system, and made substantial investments to improve infrastructures, surveillance systems, and emergency preparedness and response capacity, such as the development of a real-time monitoring system that is now serving as a model for worldwide surveillance and response to infectious disease threats. The world has moved on since the SARS epidemic, but the insights gained in mainland China remain valuable, with comparable infectious disease threats presenting continuously.
- **Educate People to Reduce Fear- Understanding Geography is Important:** Misperceptions, particularly relating to geography, still occur often. For instance, one public misconception was that the entire African continent (54 countries) was affected by Ebola while the outbreak was limited to Liberia, Guinea and Sierra Leone. This was also an issue for California when the public believed that “California” was on fire during the wildfires of 2018 when it affected just 1% of the State’s geography.

KEY TALKING POINTS

- China is in daily communication with WHO and is employing multisectoral approaches to prevent further spread of the virus. **The public and private sectors alike should avoid disproportional reactions** which may affect the economic health of a destination. In this context, a fact-based approach from trusted authorities such as WHO to decision-making is essential.
- **Do not Cancel Your Flights** – Postpone your Travels to China and or go somewhere else if you are travelling for leisure. Following the guidance of national authorities and the WHO is key.
- **WHO continues to call on countries not to impose travel restrictions-** Evidence indicates that travel restrictions directed at individual countries are unlikely to keep the virus out of a nation’s borders. Closing borders, blanket travel bans, and more extreme government policies may in fact exacerbate the epidemic’s social and economic tolls-making us less safe. According to experts a travel ban may actually discourage people from coming forward and being transparent about their systems and behaviours.
- **WHO standard recommendations for travellers** and the general public to reduce exposure to and transmission of a range of illnesses including frequent hand cleaning, covering mouth and nose with flexed elbow when sneezing or coughing, avoid close contact with anyone who has a fever and cough, avoid direct unprotected contact with live animals as well as the consumption of raw or undercooked animal products. [Here is the WHO FAQ](#). People with no respiratory symptoms, such as a cough, do not need to wear a medical mask. WHO recommends the use of masks

for people who have symptoms of COVID-19 and for those caring for individuals who have symptoms. WHO advises rational use of medical masks to avoid unnecessary wastage of precious resources and mis-use of masks.

- **Do Not Stigmatize:** WTTC supports the recommendation of WHO, cautioning against actions that promote stigma and discrimination.
- As Dr. Tedros, the Director-General of the WHO stated, “This is the time for facts, not fear. This is the time for science, not rumours. This is the time for solidarity, not stigma. We are all in this together”.

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