



THE EFFECT OF COVID-19 PANDEMIC ON THE TOURISM TRAVEL AND RISK MANAGEMENT IN THAILAND

Tunwarat Kongnun^{1*}, Sudarat Rattanapong², Chonticha Yuphuang³, Pongpon Puttavisit⁴, Maneejan Masoot⁵

¹ Faculty of Social Science and Local Development, Pibulsongkram Rajabhat University, Thailand
Email: tunvarat.tan@gmail.com

² Faculty of Social Science and Local Development, Pibulsongkram Rajabhat University, Thailand
Email: poonimza@hotmail.com

³ Faculty of Management Science, Pibulsongkram Rajabhat University, Thailand
Email: chonticha.yo@psru.ac.th

⁴ Faculty of Management Science, Pibulsongkram Rajabhat University, Thailand
Email: pongpan.p@psru.ac.th

⁵ Faculty of Management Science, Pibulsongkram Rajabhat University, Thailand
Email: Maneejan@psru.ac.th

* Corresponding Author

Article Info:

Article history:

Received date: 30.10.2022.

Revised date: 07.11.2022

Accepted date: 15.11.2022.

Published date: 31.12.2022.

To cite this document:

Kongnun, T., Rattanapong, S., Yuphuang, C., Puttavisit, P., & Masoot, M. (2022). The Effect Of Covid-19 Pandemic On The Tourism Travel And Risk Management In Thailand. *Journal of Tourism Hospitality and Environment Management*, 7 (30), 215-225.

DOI: 10.35631/JTHEM.730017

This work is licensed under [CC BY 4.0](https://creativecommons.org/licenses/by/4.0/)



Abstract:

The study aims to measure the effect of the COVID-19 pandemic on tourism travel and risk management in Thailand. This review utilised journals, historical records, newspaper articles, World Health Organization statistics, governmental data, and website materials on COVID-19 incidences in tourism and developed a new risk management method to deal with the crisis and post-crisis recovery. The objectives were to: 1) understand how tourism travel regain after the Covid crisis, 2) find out the opinions of tourism travel about the tourism opportunities after the COVID-19 crisis.; 3) explore the ideas on how tourism travel will adjust or adapt to fit with a shift in travel priorities after the COVID-19 pandemic. The purposive sampling method was used data through in-depth interviews with hotel and restaurant operations. During Aug-Sept 2020 in the provinces that are the most controlled areas are Bangkok and Chiang Mai, the qualitative data were analysed using Grounded Theory by symbolic interaction. According to the main finding, hygiene and safety are the most important priorities for tourists when they can travel again so the use of hygiene and safety protocols along with the collaboration with the public sector, and the support from the government. Also, crisis management strategies and risk management departments are vital for tourism travel to deal with challenges after the crisis.

Keywords:

The Effect Of Economic, Covid-19, Tourism Crisis, Tourism Travel, Risk Management

Introduction

The global outbreak of the COVID-19 pandemic has spread worldwide. COVID-19 is a contagious disease caused by a virus, the severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2). The first known case was identified in Wuhan, China, in December 2019 and the thousands of deaths caused by coronavirus disease (COVID-19) led the World Health Organization to declare a pandemic on 12 March 2020. To date, the world has paid a high toll in this pandemic in terms of human lives lost, economic repercussions and increased poverty (Ciotti, M., Ciccozzi, M., Terrinoni, A., Jiang, W. C., Wang, C. B., & Bernardini, S., 2020). The disease quickly spread worldwide, resulting in the COVID-19 pandemic (Akef, E., Eslahtalab, A., Dehghani, N., & Mardani, E., 2021). The first known case was identified in Wuhan, China, in December 2019. The public care strategies have included handwashing, wearing face masks, physical distancing, and avoiding mass gathering and assemblies. A pandemic, though undesirable, Thailand had learned from experience of SARR to deal with it (Yeh, S. S., 2021; Griffiths, 2020), such as the economic downturn, traveling changes behavior. SARS-CoV-2 is an RNA virus, and as such has a high mutation rate and can adapt to become more efficiently transmitted. To date no efficacious for humans vaccines or antivirals for coronavirus exist (Wang et al., 2020a ; Hoffmann, M., Kleine-Weber, H., Schroeder, S., Krüger, N., Herrler, T., Erichsen, S., ... & Pöhlmann, S., 2020) and the first vaccines for emergency use are anticipated by early 2021 (Li, R., Pei, S., Chen, B., Song, Y., Zhang, T., Yang, W., & Shaman, J., 2020). On that basic, the research questions that this paper seeks to answer, are the following:

1. How did covid-19 lockdown measures affect main tourism travel?
2. How can the above observations help us form new policy regulation and mobility fail-saves in place in the event of future pandemic?
3. How can management by governance and local to risk management?

The rest of this paper is structured as follows: In section 2, a brief report of the covid-19 pandemic and lockdown characteristic in Thailand. In section 3, a literature review is conducted, focusing on major findings of studies that explored tourism travel change behaviour during pandemic periods worldwide and risk management. In section 4, the research methodology. In section 5, which discusses and concludes the paper.

Literature Review

There are two points that will be discussed in literature:

The COVID-19 Pandemic in Thailand

COVID-19 is a contagious disease caused by a virus, the severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2). The first known case was identified in Wuhan, China, in December 2019. The disease quickly spread worldwide, resulting in the COVID-19 pandemic (Akef, E., Eslahtalab, A., Dehghani, N., & Mardani, E., 2021). The first known case was identified in Wuhan, China, in December 2019. The disease has since spread worldwide, leading to an ongoing pandemic with the continued distribution of various vaccines against

Covid-19, some parts of the world are distributing vaccines to their citizens at a higher rate than some struggling countries (Akef, E., Eslahtalab, A., Dehghani, N., & Mardani, E., 2021; COVID-19 has had a significant impact on the global economy, economic activity, and population. However, digitalization is also assisting many businesses in adapting to and overcoming the present predicament created by Covid-19 (khan, a.b., mookda, r., & kongnun, t., 2021). The situation of the epidemic of the Covid-19 virus Which started in December 2019 greatly affected Thai tourism and world tourism. causing disruption to international travel including affecting the number of foreign tourists entering Thailand. According to the latest data from the Department of Tourism and Sports Economy Ministry of Tourism and Sports. The cumulative number of foreign tourists arriving in Thailand between January and December 2020 was 6.7 million, a decrease from 39.9 million in the same period in 2019, or an 83.2% contraction. This epidemic of COVID-19 as a result, Thailand can generate substantially reduced income from foreign tourists. In the period from January to December 2020. Revenue from foreign tourists was 332,013 million baht, a decrease from the same period of 2019 which was 1,911,808 million baht (82.6 percent decrease). Ministry of Tourism and Sports) (Figure 1)

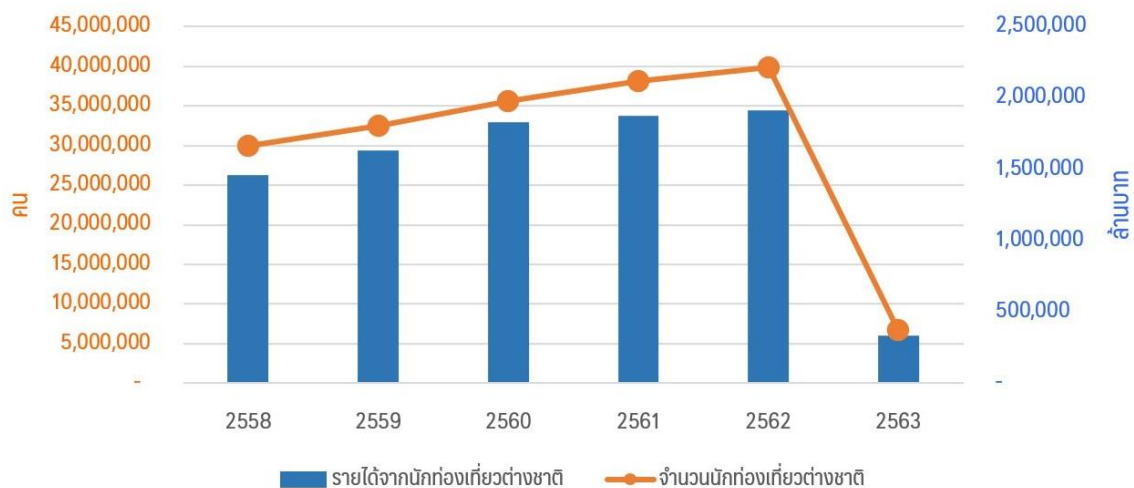


Figure 1: Number Of Foreign Tourists And Income From Foreign Tourists.

Source: (Thailand Development Research Institute (TDRI), 2021).

Before the outbreak of COVID-19, Thailand had 40 million foreign tourists a year from various nationalities. Each group has different spending behaviours such as Chinese tourists, who often travel in large groups with tour groups, like shopping and have a higher purchase of souvenirs than other national tourists. While European tourists want to stay on vacation. Popular for drinking alcohol and travelling at night, etc. After the epidemic of COVID-19, the main customers of Thai tourism businesses have changed from foreign tourists to Thai tourists, which costs less per head per trip and there are also travel behaviours that are clearly different from foreign tourists (Suriyankietkaew, S., & Nimsai, S., (2021). Most Thai customers have relatively short stays on Saturdays and Sundays or public holidays. Travel across regions or nearby provinces They often travel in private cars or travel in small groups because of concerns about the spread of COVID-19. Unlike foreign tourists, most of their costs are spent on short-term accommodation and meals, with higher cost per head per trip due to travelling further

therefore have a longer stay period. and continues to travel along the tourist route. Tourism behaviour and spending of Thai tourists are different from foreigners, resulting in the majority of businesses in the Thai tourism sector with mainly foreign customers, such as tourism businesses. Tour bus/van business consignment business and the entertainment business remains temporarily closed. especially in the main tourist areas of the country.

Including the social and economic conditions of the population, at the beginning of January 2020 there was a big outbreak, causing the spread of the disease to spread rapidly around the world. because the infection is caused by touch or from a traveler returning from a country with an outbreak of Covid-19 not following the advice of the Ministry of Health (Hinjoy, S., Tsukayama, R., Chuxnum, T., Masunglong, W., Sidetrack, C., Kleeblumjeak, P., ..& Iamsirhaworn, S., 2020; Jankhonkhan, J., & Sawangtong, W., (2020), gathering of close friends, drink the same glass, smoking the same roll, eating the same food not using a middle spoon and spend time together with the patients in a sealed air-conditioned room and places at risk of contracting Covid-19 include boxing stadiums, entertainment venues, movie theaters and public places. or slum communities, etc. (Department of Health Service Support, 2021) and the number of infected people continues to increase. Most recently, in the year 2021, the epidemic has continued and intensified. As a result, the number of infected people increased a lot. According to statistics as of August 8, 2021, the global population has 202,436,135 cases and 4,298,768 deaths. The United States has 36,447,123 cases and is the country with the highest number of deaths at 632,641 (Department of Disease Control, 2021).

In Thailand, the epidemic is becoming more severe every day, with the first case of Thailand being a 74-year-old Chinese female tourist who entered the country as of April 8, 2020, causing Thailand to find 2,480 infections in the country of April 22, 2020, Thailand has an epidemic and there are 2,826 cases of Covid-19 (Nattawan Khamsaen, 2021; Riyapan, P., Shuaib, S. E., & Intarasit, A., 2021; Srichannil, C., 2020). The impact on the infection has spread across the country. This affects the economy because the economy is sluggish, and the industry affects the shortage of goods, resulting in loss of human resource development related to employment, loss of competitiveness and long-term economic growth. Because a lot of resources will be required to invest in the prevention and treatment of Corona 2019 (Computer Services Office Kasetsart University, 2021; Koolsriroj, U., Diteeyont, W., & Sutthinarakron, W., 2021; Diloktaweewattana, W., & Nanthachai, S., 2021). As a result, intensive protection in areas with severe outbreaks has been limited to 3 levels of control areas: the first level is the highest and strict control area of 29 provinces, comprising Bangkok, Kanchanaburi, Chonburi, Chachoengsao, Tak, Nakhon Pathom, Nakhon Nayok, Nakhon Ratchasima, Narathiwat, Nonthaburi, Pathum Thani, Prachuap Khiri Khan, Prachinburi, Pattani, Phra Nakhon Si Ayutthaya, Phetchaburi, Phetchabun, Yala, Rayong, Ratchaburi, Lopburi, Songkhla, Singburi, Samut Prakan, Samut Songkhram, Samut Sakhon, Saraburi, Suphan Buri, and Ang Thong (Prachachat Business, 2021; Sanrach, R., 2021). This is the area with the highest number of infected people in the country, with infected people traveling to different places, causing the number of infections to increase. resulting in extremely strict control There is the most screening in and out and strict surveillance (Health Service Center, 2021). The secondary level is the highest control level of 37 provinces, consisting of Kalasin, Kamphaeng Phet, Khon Kaen, Chanthaburi, Chaiyaphum, Chumphon, Chiang Rai, Chiang Mai, Trang, Nakhon Si Thammarat, Nakhon Sawan, Buriram, Phatthalung Phichit, Phitsanulok, Yasothon, Ranong, Lampang, Loei, Loei, Sisaket, Sakon Nakhon, Surin, Surin, Ubon Ratchathani, Amnat Charoen (Prachachat Business, 2021). It will be an area with a large number of infected people and more

than 1 infected area (Health Center, 2021) and the last level is the control level in 11 provinces, comprising Krabi, Nakhon Phanom, Nan, Bueng Kan, Phayao, Phang Nga, Phrae, Phuket, Mukdahan, Mae Hong Son and Surat Thani. (Prachachat Business, 2021). It is the area adjacent to the maximum control area (red area) or found that there are more than 10 infected (Health Service Center, 2021), which are widely affected throughout Thailand, including Phitsanulok province, affected by covid 19 infection. It is also the most controlled area in 37 provinces of Thailand. In Phitsanulok Province, the epidemic has spread widely as mentioned above. As a result, Phitsanulok has to act in accordance with the requirements issued under Section 9 of the Emergency Decree on Public Administration B.E. continuously to order the closure of places in areas that are at risk of contracting the disease temporarily (Bangkok, 2020). In Phitsanulok Province assigning a knowledgeable and competent department to operate and coordinating with many sectors, including officials (Environment and Sanitation Department Cleanliness and Parks Department Municipal Affairs Department Community Development and Social Welfare Department and administrative), military, police, officers, The Public Health Service Center under the supervision of Phitsanulok Province and and manage areas at risk of spreading disease as a result, communities in Phitsanulok province had to temporarily suspend their operations, affecting the way of life and main income of the people. very much in the area. The short run and long impact of covid-19, even after the Thai and foreign authorities began to relax the measures to control international travel. Foreign tourists began to gradually return to Thailand, but still a small proportion. This accounted for only about 5% of the pre-Covid-19 period, partly due to the disappearance of Chinese tourists. In 2019, the number 1 Chinese tourists came to Thailand, accounting for more than a quarter of the total number of foreign tourists. But due to the Chinese government's strict Zero-COVID policy, there is no sign of when Chinese tourists will return. In addition, the COVID-19 outbreak has also led to the adoption of more communication technology. This makes business tourists who used to be in the form of MICE (Meetings, Incentive Travel, Conventions, Exhibitions) change as well. From the past, having to travel to meet and build networks There is a high cost per trip. Switch to online meetings that don't require bookings, auditoriums, or vehicles when the number of international visitors isn't quite coming back.

Risk Management after COVID-19 of Tourism Travel

Travelling to the next normal era of the Thai tourism sector still has many obstacles for the business sector to overcome. Both from the number and demand of tourists that are constantly changing. This is a result of the country's opening policy of the country of origin and concerns about the spread of Covid-19 of different groups of customers coupled with the uncertainty that the situation is changing rapidly, and the impact is difficult to predict from (1) the epidemic situation of Covid-19 that has mutated and caused periodic concern (2) Climate change may result in a change in tourism seasons. Also, crisis management strategies and risk management departments are vital for tourism businesses to deal with challenges after the crisis. The emerging trends, the use of technologies, the use of digital marketing, and the collaboration with unrelated and medical-related businesses are opportunities arising after the crisis which can be adapted by tourism businesses in their strategies to rebuild the business volume after the Covid-19 crisis. To conclude, the modification of the safety and hygiene standards is crucial for tourism businesses to fit with tourists' travel priorities and rebuild the business volume in the post-Covid-19 pandemic.

According to the state of emergency declaration in all areas throughout the Kingdom, announced on 25 March 2020, Guidelines for operating under the epidemic situation of COVID in working in the situation of the coronavirus disease 2019 (COVID-19) epidemic as follows: 1) The government supervisory agency and its affiliated officers shall proceed according to the law, rules, regulations, cabinet resolutions including orders Strictly related provinces. 2) Prohibition of travelling out of the country and tourists entering the country. 3) Close places at risk of spreading with overcrowding and refrain from collective activities. A large number of people are at risk for the spread of the coronavirus disease in 2019. 4) Do not spread the news or spread it through any media that contains messages or news about the Coronavirus disease 2019 situation without knowing the correct facts and lack of investigation first (Bulut et al., 2020, Lian and Yen, 2014, Monahan et al., 2020; Seifert, A., Cotten, S. R., & Xie, B., (2021).

Before the outbreak of COVID-19, Thailand had 40 million foreign tourists a year from various nationalities. Each group has different spending behaviours such as Chinese tourists. who often travel in large groups with tour groups, like shopping and have a higher purchase of souvenirs than other national tourists. While European tourists want to stay on vacation. Popular for drinking alcohol and travelling at night, etc. After the epidemic of COVID-19, the main customers of Thai tourism businesses have changed from foreign tourists to Thai tourists. which costs less per head per trip and there are also travel behaviours that are clearly different from foreign tourists (Suriyankietkaew, S., & Nimsai, S., (2021). Most Thai customers have relatively short stays on Saturdays and Sundays or public holidays. Travel across regions or nearby provinces They often travel in private cars or travel in small groups because of concerns about the spread of COVID-19. Unlike foreign tourists, most of their costs are spent on short-term accommodation and meals. with higher cost per head per trip due to travelling further therefore have a longer stay period. and continues to travel along the tourist route. Tourism behaviour and spending of Thai tourists are different from foreigners, resulting in the majority of businesses in the Thai tourism sector with mainly foreign customers, such as tourism businesses. Tour bus/van business consignment business and the entertainment business remains temporarily closed. especially in the main tourist areas of the country.

Including the social and economic conditions of the population, at the beginning of January 2020 there was a big outbreak, causing the spread of the disease to spread rapidly around the world. because the infection is caused by touch or from a traveller returning from a country with an outbreak of Covid-19 not following the advice of the Ministry of Health (Hinjoy, S., Tsukayama, R., Chuxnum, T., Masunglong, W., Sidetrack, C., Kleeblumjeak, P., ..& Iamsirhaworn, S., 2020; Jankhonkhan, J., & Sawangtong, W., (2020), gathering of close friends, drink the same glass, smoking the same roll, eating the same food not using a middle spoon and spend time together with the patients in a sealed air-conditioned room and places at risk of contracting Covid-19 include boxing stadiums, entertainment venues, movie theaters and public places. or slum communities, etc. (Department of Health Service Support, 2021) and the number of infected people continues to increase. Most recently, in the year 2021, the epidemic has continued and intensified. As a result, the number of infected people increased a lot. According to statistics as of August 8, 2021, the global population has 202,436,135 cases and 4,298,768 deaths. The United States has 36,447,123 cases and is the country with the highest number of deaths at 632,641 (Department of Disease Control, 2021).

In Thailand, the epidemic is becoming more severe every day, with the first case of Thailand being a 74-year-old Chinese female tourist who entered the country as of April 8, 2020, causing Thailand to find 2,480 infections in the country of April 22, 2020, Thailand has an epidemic and there are 2,826 cases of Covid-19 (Nattawan Khamseen, 2021; Riyapan, P., Shuaib, S. E., & Intarasit, A., 2021; Srichannil, C., 2020). The impact on the infection has spread across the country. This affects the economy because the economy is sluggish, and the industry affects the shortage of goods, resulting in loss of human resource development related to employment, loss of competitiveness and long-term economic growth. Because a lot of resources will be required to invest in the prevention and treatment of Corona 2019 (Computer Services Office Kasetsart University, 2021; Koolsriroj, U., Diteeyont, W., & Sutthinarakron, W., 2021; Diloktaweewattana, W., & Nanthachai, S., 2021). As a result, intensive protection in areas with severe outbreaks has been limited to 3 levels of control areas: the first level is the highest and strict control area of 29 provinces, comprising Bangkok, Kanchanaburi, Chonburi, Chachoengsao, Tak, Nakhon Pathom, Nakhon Nayok, Nakhon Ratchasima, Narathiwat, Nonthaburi, Pathum Thani, Prachuap Khiri Khan, Prachinburi, Pattani, Phra Nakhon Si Ayutthaya, Phetchaburi, Phetchabun, Yala, Rayong, Ratchaburi, Lopburi, Songkhla, Singburi, Samut Prakan, Samut Songkhram, Samut Sakhon, Saraburi, Suphan Buri, and Ang Thong (Prachachat Business, 2021; Sanrach, R., 2021). This is the area with the highest number of infected people in the country, with infected people traveling to different places, causing the number of infections to increase. resulting in extremely strict control There is the most screening in and out and strict surveillance (Health Service Center, 2021). The secondary level is the highest control level of 37 provinces, consisting of Kalasin, Kamphaeng Phet, Khon Kaen, Chanthaburi, Chaiyaphum, Chumphon, Chiang Rai, Chiang Mai, Trang, Nakhon Si Thammarat, Nakhon Sawan, Buriram, Phatthalung Phichit, Phitsanulok, Yasothorn, Ranong, Lampang, Loei, Loei, Sisaket, Sakon Nakhon, Surin, Surin, Ubon Ratchathani, Amnat Charoen (Prachachat Business, 2021). It will be an area with a large number of infected people and more than 1 infected area (Health Center, 2021) and the last level is the control level in 11 provinces, comprising Krabi, Nakhon Phanom, Nan, Bueng Kan, Phayao, Phang Nga, Phrae, Phuket, Mukdahan, Mae Hong Son and Surat Thani. (Prachachat Business, 2021). It is the area adjacent to the maximum control area (red area) or found that there are more than 10 infected (Health Service Center, 2021), which are widely affected throughout Thailand, including Phitsanulok province, affected by covid 19 infection. It is also the most controlled area in 37 provinces of Thailand. In Phitsanulok Province, the epidemic has spread widely as mentioned above. As a result, Phitsanulok has to act in accordance with the requirements issued under Section 9 of the Emergency Decree on Public Administration B.E. continuously to order the closure of places in areas that are at risk of contracting the disease temporarily (Bangkok, 2020). In Phitsanulok Province assigning a knowledgeable and competent department to operate and coordinating with many sectors, including officials (Environment and Sanitation Department Cleanliness and Parks Department Municipal Affairs Department Community Development and Social Welfare Department and administrative), military, police, officers, The Public Health Service Center under the supervision of Phitsanulok Province and and manage areas at risk of spreading disease As a result, communities in Phitsanulok province had to temporarily suspend their operations, affecting the way of life and main income of the people. very much in the area. The short run and long impact of covid-19, even after the Thai and foreign authorities began to relax the measures to control international travel. Foreign tourists began to gradually return to Thailand, but still a small proportion. This accounted for only about 5% of the pre-Covid-19 period, partly due to the disappearance of Chinese tourists. In 2019, the number 1 Chinese tourists came to Thailand, accounting for more than a quarter of the total number of foreign

tourists. But due to the Chinese government's strict Zero-COVID policy, there is no sign of when Chinese tourists will return. In addition, the COVID-19 outbreak has also led to the adoption of more communication technology. This makes business tourists who used to be in the form of MICE (Meetings, Incentive Travel, Conventions, Exhibitions) change as well. From the past, having to travel to meet and build networks There is a high cost per trip. Switch to online meetings that don't require bookings, auditoriums, or vehicles when the number of international visitors isn't quite coming back.

Research Methodology

Data and Measurement

Business organisations must manage risks by looking from the external environment to the inside to manage risks and adjust business use field data through in-depth interviews with hotel and restaurant operations. During Aug-Sept 2020 in the provinces that are the most controlled areas are Bangkok and Chiangmai, the qualitative data were analyzed using Grounded Theory by symbolic interaction (Symbolic Interactionism: SI), which is used to study social processes interacting with each other by coding (Coding) the text of the interview. The data is then categorized to find duplicate meanings between main attributes and sub-dimensions. Then bring it to the conclusion of the main category (Core Category) of the phenomenon to be studied. Covid-19 crisis this is due to the phenomenon that happened suddenly and unpredictability makes it difficult to defend and manage risk. This caused the hotel and restaurant sectors to be directly affected more than any other business. The results showed that: (1) Operators of both hotels and restaurants³ Concerned about COVID-19: Small hotels were the most concerned (60.6%), followed by large hotels (51.5%) and medium-sized hotels (40.2%).

The hotel business is affected by 3 dimensions: 69.2% business dimension, 27% tourist and macroeconomic dimension, and 3.8% travel dimension. The restaurant business was also affected in a similar way. in business dimensions The decline in sales of more than 80%, with customers fearing the epidemic, they did not dare to come to use the service. Employees worried the restaurant would be closed due to government measures. If there is another outbreak, it was found that small hotel businesses will face more severe problems than large and medium-sized hotels. According Basnyat S and Sharma S, (2021) small hotel businesses face more severe problems than large and medium-sized hotels. (2) Business resilience: Hotel businesses of all sizes have difficulty adjusting. Large hotels adapted by reducing their workforce (51.2%), resulting in a large number of workers returning to rural areas. Meanwhile, restaurant businesses cut costs by reducing staff hours to retain employees. Businesses are able to adapt because restaurants have fewer employees than hotels. Covid-19 outbreak affecting business concerns about the epidemic and health (45.0%) as well as business (41.3%), with most entrepreneurs concerned about the health and safety of employees' lives that will affect their families. They service customers and the image of customers' confidence in cleanliness and safety.

Countermeasures: Risk Management Build Immunity Ready to Receive Tourism Back

Hotel and restaurant businesses manage risks and prepare for the return of tourism as follows: (1) Cost and finance management The restaurant business will prepare a reserve and cut down on unnecessary expenses. While the hotel business chooses to reduce the number of employees. The main cost is the salary of employees. (2) Products and sales channels. Hotel businesses

have increasingly adapted to personal service (93.3%) and the restaurant business adjusted its strategy to increase online sales channels (80.3%) and (3) in terms of readiness for crisis situations. The hotel business will focus on acknowledging information and government policies to communicate within the organisation in order to adapt to keep up with the times. Government administration to resolve problems was delayed (69.5%), ineffective communication of both the issue of the allocation of the COVID-19 vaccine and measures to help unemployed employees (45.0%). As a result, businesses have to make major adjustments.

Management By Governance And Local To Risk Management

Thailand must meet health and safety standards as follows: (1) Developing effective communication skills within the organisation. To reduce the anxiety of employees who have to work under pressure from uncertain situations. (2) Risk management and problem solving skills. which requires many skills such as creativity, anxiety control and the creation of emotional well-being and (3) greater adoption of technology, such as hotels and restaurants, to use technology to help reduce contact with customers, such as the use of QR codes for payment. including reaching more customers, etc.

Discussion and Conclusion

Thai Hotels Association over the past two years, it was found that the key features that will help tourism businesses adapt to the new normal are as follows:

1. Finding opportunities to increase income to catch up with new trends and adapt quickly (Donthu, N., & Gustafsson, A., 2020) because doing business based on the behaviour of tourists in the past may not be as effective as before. In addition, entrepreneurs must be ready to adapt all the time to meet the ever-changing demands of tourists at the beginning of the opening of the country. Most of the tourists who come to Thailand are from Europe.
2. The ability to manage costs, Another important factor that helps most businesses adapt to unexpected situations is cost management by appropriately adapting past experience (Wachira, B. W., & Mwai, M., (2021), such as (1) increasing efficiency and adjusting the number of workers to suit the situation; including employing skilled employees in the use of technology and (2) a reduction in management costs such as partial opening or temporary closure of the business; and (3) the application of technology in business, such as expanding booking channels through various platforms. This reduces costs and access restrictions especially in SMEs.
3. Rapid recovery under difficult circumstances (Resilience) in the next phase with high uncertainty. Some businesses therefore choose to wait and see the situation and have not returned to service (Prime, H., Wade, M., & Browne, D. T., (2020). Therefore, it is possible that In the future, there may be limitations of service providers in the tourism sector but if the epidemic situation. The number of tourists may return more than expected. The next normal of the Thai tourism sector after the opening of the country may return to the same or new form can step into the new normal with pride no matter what form it is changed to. According to Killgoreo, W. D., Taylor, E. C., Cloonan, S. A., & Dailey, N. S. (2020) to the main finding, hygiene and safety are the most important priorities for tourists when they can travel again so the use of hygiene and safety protocols along with the collaboration with the public sector, and the support

from the government. Also, crisis management strategies and risk management departments are vital for tourism travel to deal with challenges after the crisis.

References

- Akef, E., Eslahtalab, A., Dehghani, N., & Mardani, E. (2021). A Reflection on the Situation of Coronavirus Vaccination in Iran and Turkey. *Medical Education Bulletin*, 2(2), 207-210.
- Basnyat S and Sharma S. (2021), Effects of COVID-19 Crisis on Small and Medium-sized Hotel Operators: insights from Nepal. *Anatolia*, 32(1), 106–120.
- Ciotti, M., Ciccozzi, M., Terrinoni, A., Jiang, W. C., Wang, C. B., & Bernardini, S. (2020). The COVID-19 pandemic. *Critical reviews in clinical laboratory sciences*, 57(6), 365-388.
- Department of disease control. (2021). The number of infected people continues to increase. Department of Disease Control.(2020). Coronavirus disease 2019 (COVID-19). Accessed from:https://ddc.moph.go.th/viralpneumonia/faq_more.php. (Research date: 13 August 2021).
- Diloktaweewattana, W., & Nanthachai, S. (2021). The Information and Communication Technology Administration Factors Affecting Online Learning during the COVID-19 Pandemic of Schools under Secondary Educational Service Area Office Bangkok 2 (Doctoral dissertation, Kasetsart University).
- Donthu, N., & Gustafsson, A. (2020). Effects of COVID-19 on business and research. *Journal of business research*, 117, 284-289.
- Griffiths, J. (2020, 5 April). Taiwan's coronavirus response is among the best globally.CNN.<https://www.google.com.tw/amp/s/amp.cnn.com/cnn/2020/04/04/asia/taiwan-coronavirus-response-who-intl-hnk/index.html>.
- Hinjoy, S., Tsukayama, R., Chuxnum, T., Masunglong, W., Sidet, C., Kleeblumjeak, P., ... & Iamsirithaworn, S. (2020). Self-assessment of the Thai Department of Disease Control's communication for international response to COVID-19 in the early phase. *International Journal of Infectious Diseases*, 96, 205-210.
- Hoffmann, M., Kleine-Weber, H., Schroeder, S., Krüger, N., Herrler, T., Erichsen, S., ... & Pöhlmann, S. (2020). SARS-CoV-2 cell entry depends on ACE2 and TMPRSS2 and is blocked by a clinically proven protease inhibitor. *cell*, 181(2), 271-280.
- Jankhonkhan, J., & Sawangtong, W. (2021). Model predictive control of COVID-19 pandemic with social isolation and vaccination policies in Thailand. *Axioms*, 10(4), 274.
- khan, a.b., kongnun, t., & rattanapong, s., (2021). Covid-19 pandemic consequences on consumers panic buying: the role of the fear and uncertainty. 10th International Conference on Asian Economic Development, 20th July 2022.
- Killgore, W. D., Taylor, E. C., Cloonan, S. A., & Dailey, N. S. (2020). Psychological resilience during the COVID-19 lockdown. *Psychiatry research*, 291, 113216.
- Koolsriroj, U., Diteeyont, W., & Sutthinarakorn, W. (2021). Transforming Learning Activities at the Faculty of Education during the COVID-19 Situation. *AsTEN Journal of Teacher Education*, 4.
- Lian, J. W., & Yen, D. C. (2014). Online shopping drivers and barriers for older adults: Age and gender differences. *Computers in human behavior*, 37, 133-143.
- Li, R., Pei, S., Chen, B., Song, Y., Zhang, T., Yang, W., & Shaman, J. (2020). Substantial undocumented infection facilitates the rapid dissemination of novel coronavirus (SARS-CoV-2). *Science*, 368(6490), 489-493.

- Monahan, C., Macdonald, J., Lytle, A., Apriceno, M., & Levy, S. R. (2020). COVID-19 and ageism: How positive and negative responses impact older adults and society. *American Psychologist*, 75(7), 887.
- Mullins, E., Hudak, M. L., Banerjee, J., Getzlaff, T., Townson, J., Barnette, K., ... & Hughes, R. (2021). Pregnancy and neonatal outcomes of COVID-19: coreporting of common outcomes from PAN-COVID and AAP-SONPM registries. *Ultrasound in Obstetrics & Gynecology*, 57(4), 573-581.
- Prachachat Business, (2021). Electrical appliances break the year's plan '65, the camp is raising "health-smart" instead of price competition. Retrieved December 17, 2021, from <https://www.prachachat.net/marketing/news-830383>.
- Prime, H., Wade, M., & Browne, D. T. (2020). Risk and resilience in family well-being during the COVID-19 pandemic. *American Psychologist*, 75(5), 631.
- Riyapan, P., Shuaib, S. E., & Intarasit, A. (2021). A mathematical model of COVID-19 pandemic: a case study of Bangkok, Thailand. *Computational and Mathematical Methods in Medicine*, 2021.
- Sanrach, R. (2021). FACTORS AFFECTING CASHLESS PAYMENT OF GOODS AND SERVICES. *Academy of Accounting and Financial Studies Journal*, 25, 1-6.
- Seifert, A., Cotten, S. R., & Xie, B. (2021). A double burden of exclusion? Digital and social exclusion of older adults in times of COVID-19. *The Journals of Gerontology: Series B*, 76(3), e99-e103.
- Srichannil, C. (2020). The COVID-19 pandemic and Thailand: A psychologist's viewpoint. *Psychological Trauma: Theory, Research, Practice, and Policy*, 12(5), 485.
- Suriyankietkaew, S., & Nimsai, S. (2021). COVID-19 impacts and sustainability strategies for regional recovery in southeast Asia: challenges and opportunities. *Sustainability*, 13(16), 8907.
- Wachira, B. W., & Mwai, M. (2021). A baseline review of the ability of hospitals in Kenya to provide emergency and critical care services for COVID-19 patients. *African Journal of Emergency Medicine*, 11(2), 213-217.
- Wang, C., Horby, P. W., Hayden, F. G., & Gao, G. F. (2020). A novel coronavirus outbreak of global health concern. *The lancet*, 395(10223), 470-473.
- Yeh, S. S. (2021). Tourism recovery strategy against COVID-19 pandemic. *Tourism Recreation Research*, 46(2), 188-194.