The tourism inconvenience of the Ebola epidemic: lessons for the South African tourism sector

Dr Ntandazo Sifolo
Independent Researcher
Member of South African Association of Political Studies (SAAPS)

&

*Pearl Portia Siyanda Sifolo*
Tshwane University of Technology,
Tel: 012 3824157/ Ext.5561 Fax: 012 3824661, sifolops@tut.ac.za

Corresponding author*

Abstract

This paper explores certain aspects within the tourism sector, a sector that is highlighted in the South African National Development Plan as one of the key contributors to the success of vision 2030. A particular emphasis is laid on the envisaged role of tourism as one of the key drivers of economic growth. The argument put forward is that there is a need to ensure that when a sector is identified as critical in the growth of the economy, such identification should take due cognisance of the inherent risks involved. Following the identification of risks, it is prudent to proffer a multi-sectoral approach as a possible solution towards the mitigation of possible risks. This viewpoint is ostensibly put forth in light of the recent Ebola virus disease outbreaks that potentially threatened the tourism sector in South Africa.

Key words: Ebola epidemic, South African Tourism Industry, disease, National Development Plan, Risks and Mitigation, tourism economics.


Introduction

In May 2010, the South African President, Jacob Zuma, commissioned the drafting of the National Development Plan (NDP) vision 2030. This work was entrusted in the hands of the National Planning Commission (NPC) chaired by former minister of Finance, Trevor Manuel and deputised by Cyril Ramaphosa, now the Deputy President of South Africa. The Plan was endorsed in September 2012 by Cabinet after a series of consultation with various stakeholders, amongst others, political parties, civil society organisations, national departments, unions, academics, industry bodies, non-profit organisations, religious associations and the general public. This endorsement meant that the NDP henceforth will be deemed as a blueprint for eliminating poverty and reducing inequality in South Africa by 2030.

According to Chairperson of the National Planning Commission, NDP’s task is believed to be possible through “uniting South Africans, unleashing the energies of its citizens, growing an inclusive economy, building capabilities, enhancing the capability of the state and leaders working together to solve complex problems” (NDP, 2012: 1). The plan has six interlinked priorities, namely:

- Uniting all South Africans around a common programme to achieve prosperity and equity.
- Promoting active citizenry to strengthen development, democracy and accountability.
- Bringing about faster economic growth, higher investment and greater labour absorption.
- Focusing on key capabilities of people and the state.
- Building a capable and developmental state.
- Encouraging strong leadership throughout society to work together to solve problems.

Key factors of NDP regarding tourism’s contribution to the economic growth

The plan explicitly commits that its implementation will result in the activation of rural economies through improved infrastructure and service delivery, a review of land tenure, service to small and microfarmers, a review of mining industry commitments to social investment, and tourism investments (NDP, 2012: 65). The plan puts across the following key policy areas for tourism (NDP, 2012: 153)

- Emphasis will be placed on increasing the total number of tourists entering the country, and the average amount of money spent by each tourist.
- Ease of doing business, as well as availability of appropriate levels of tourism infrastructure (particularly transport, tourism offerings/products and accommodation), will play an important role in attracting different types of tourists.
- Foreign business tourists arriving by air generate the most significant multipliers. South Africa will be positioned as the business and shopping centre for the region.
- South Africa can do more to develop the region as an international tourist destination by emphasising the broader biodiversity, cultural diversity, scenic beauty and range of tourism products, and making it easier for tourists to travel between countries in the region. A Schengen-type visa for the region will be considered.

The plan sees the tourism sector as a comparative advantage for South Africa (NDP, 2012: 39). It is however, critical to note that the NDP is by no means unaware of potential challenges that could stall progress towards the envisaged 2030 future. In this regards, the Plan conceives that there are systemic crises that could deal a severe blow to the plan (NDP, 2012: 79). These include cyber-attacks that...
could cripple financial markets, electricity supplies, transportation networks, and supply chains; and the outbreak of an epidemic that could disrupt travel, tourism, trade, financial markets, and domestic and regional order. It is particularly intriguing that the NDP is farsighted enough to point out that an outbreak of a pandemic could disrupt travel and tourism. Nevertheless, there is no clear approach or proposal on what measures should be in place to alleviate the challenge should it occur. Therefore, this uncertainty could destabilise the potential of the sector should the identified risk occur.

Outbreak of Ebola epidemic in West Africa and the possible impact on tourism

On the 23rd of March 2014, the World Health Organisation (WHO) publicly announced the outbreak of Ebola virus disease (EVD) in its website. The number of official cases at the time was 49 while 39 deaths were reported. It should be noted that Ebola was first identified in the Democratic Republic of Congo (DRC) and Sudan in 1976. The Ebola disease is known to be a haemorrhagic disease that occurs when an Ebola virus is transmitted to humans via an infected animal host (Idow et al, 2014: 1). Ebola was named after the Ebola River in Congo (Idow et al, 2014: 1 see also Schmid and Malcom, 2014: 3). It is further believed that human to human transmission occurs via direct contact with blood or bodily fluids from an infected person. The disease is believed to have one of the highest fatality rates, killing between 50 to 90 per cent of its victims (Idow et al, 2014: 1). According to the Global Alert and Response (GAR) the 2014 outbreak of the Ebola virus disease could be traced back to 26 December 2013 in Melianou village of Guinea, with an infection of an 18 months old boy after playing in an area that was heavily infested with bats (thought to be the virus’ natural reservoir) (GAR, 2014: 1-3). The boy died after two days of illness which was characterised by fever (WHO – GAR, 2014: 1-3). The incident caused a ripple effect as similar infections multiplied from relatives of the boy to other members of the community and they all died (GAR, 2014: 2-3). Unfortunately, there was no early detection of the virus and by the 23rd of March 2014, it is believed that the Ebola virus had been imported from Guinea into Liberia and Sierra Leone (GAR, 2014: 1-9).

The outbreak of the virus triggered panic around the world considering that there was no hope of containing it and that there were numerous reports that even the caregivers from all various countries perished. According to the Africa research Bulletin (2014: 20336) by October 2014 there was a total of about 10,141 of confirmed, probable, and or suspected cases of EVD in six countries, namely; Guinea, Liberia, Sierra Leone, Mali, Spain and the United states of America. The world reacted in various ways, for instance, China expressed its worries about the outbreak and pledged to start a joint research with France so as to combat the epidemic (IMF, 2014). European Union ministers met to strategize on ways of combatting EVD including releasing funds towards the course of fighting the disease. The United Nations (UN) equally made a call to the world to unite and fight the disease (Africa Research Bulletin, 2014: 20336). The International Monetary Fund (IMF) recommended the Executive Board to release about US$ 127 million to assist the three affected countries (IMF, 2014). However, some countries, such as Nigeria and Senegal are said to have managed to contain the spread of the EVD. The WHO attributed the containment to strong political leadership, early detection and response, public awareness campaigns as well as strong support from partner organisations (Africa Research Bulletin, 2014: 20372).

The health issues of the EVD are beyond the scope of this paper. As noted earlier, the focus of the paper is on the possible impact of EVD on tourism. It is worth noting that in December 2014, the World Bank issued an updated report on the economic impact of the 2014 Ebola epidemic on the three most affected
countries (Liberia, Sierra Leone and Guinea). The report indicates that the epidemic has crippled the economies of these countries resulting in negative income growth while at the same time creating fiscal needs in the affected countries (World Bank, 2014: 2). It is stated that all three countries had been growing rapidly in recent years, and into the first half of 2014, but have declined since the outbreak of the epidemic. Projected growth in Liberia in December 2014 was 2.2 percent (versus 5.9 percent before the crisis and 2.5 percent in October 2014). In Sierra Leone it was 4.0 percent (versus 11.3 percent before the crisis and 8.0 percent in October 2014). Lastly, the picture in Guinea was no different as the December projections pointed to 0.5 percent (versus 4.5 percent before the crisis and 2.4 percent in October 2014). A comparison of the projected growth picture compiled from the World Bank data can be presented in the graph below.

According to Schmid and Malcom (2014: 2) the projected picture could be worse in some vulnerable economies like tourist dependent countries of the Caribbean (Bahamas, Barbados and Jamaica). They further argue that even if these economies manage to remain without any case of the disease or manage to contain it, they would still be vulnerable due to the notion that tourism makes countries vulnerable to pandemics. This is particularly due to the drastic fall in the number of tourist arrivals owing to fears of pandemic. The World Bank Group Report (2014: 9) concurs with the view point of the impact of Ebola on tourism. The report states that “hotel occupancy rates, airline traffic and airport activity provide metrics for the transportation and tourism sector, as do the closure of borders and reductions in recorded cross-border trade”. Schmid and Malcom (2014: 4) believe that perception of risk of pandemic alone could discourage tourists from visiting a country. This drop in the number of tourists visiting the country could deal a severe blow to the much needed tourists revenue. Indeed, this factor of tourism being the largest single foreign exchange earner in some countries is confirmed by the World Bank Group Report (2014: 30).

Although the three most affected African countries are not as tourism reliant like the Caribbean countries, the economic impact was still felt. Agriculture, mining and manufacturing sectors in these countries were severely affected by the outbreak of EVD (World Bank 2014: 3-10). Nonetheless, it appears that the impact of EVD was felt by the tourism sector of other African countries mainly due to perception and lack of knowledge about the disease, particularly from international travellers outside the African continent. Diblasio (2014) states that “travellers fearful of Ebola are avoiding Africa or cancelling long-planned safaris, creating dire consequences for the economy in Africa”. South African Ambassador,
Ebrahim Rasool was also quoted saying that cancellation of vacations has far reaching implications for jobs in the country. He stated that every tourist who visits South Africa generates income for eight jobs in industries such as hospitality, agriculture and transportation (Dibsalio, 2014). The sentiment of EVD’s impact on the tourism sector in Africa is shared by Asente (2014: 1) in his observation that the “tourism sector …..is reeling from the epidemic with hotels and tour operating companies across the whole of Africa reporting cancellation of bookings”. Moreover, Asante states that the Ghana Hotels Association reported that the presence of EVD in West Africa is collapsing the tourism business in the country. According to Langfield (2014: 10) the United Nations World Tourism Organisation (UNWTO) acknowledged that the Ebola outbreak could affect tourism particularly due to misperception about the transmission of the virus. Langfield (2014: 10) also indicates that despite the WHO’s call against any ban on international travel, “several international airlines – including Emirates, Korean Air, Kenyan Airways and British Airways – cancelled flights to affected West African countries and some neighbouring countries closed their borders”.

Vogt (2014) agrees with the notion of EVD impacting on tourism in Africa. She maintains that Kenya has equally suffered from the outbreak of the disease. Apparently the virus has rattled the world in such a way that the tourists have gone to an extent whereby several bookings were cancelled especially in Tanzania, Kenya and South Africa (Vogt, August 2014 see also Cronje, October 2014: 1). The manager of the One and Only Cape Town, Clive Bennet, is said to have lamented that they have received a number of cancellation which are directly related to fears of Ebola. His main concern was the unknown number of potential travellers who were considering Southern Africa but got dissuaded by Ebola and opted for alternative destinations (Cronje, October 2014:1).

Paris (2014) contends that tourism is a major source of revenue for many African countries especially Kenya and South Africa. Thus, if one juxtaposes the recent cancellation, due to Ebola, to the estimated spending by tourists of about 14.3 billion rand in 2013 (as stated by Cronje), it becomes evident that Ebola fears could cost the industry a lot. Tanzania is said to have recorded about 1.5 billion euros from tourism in 2013. Therefore, according to the Managing Director of the Hotel Association of Tanzania, Lathifa Skyes, Ebola has hugely affected the tourism sector of Tanzania. Of course the above illumination of some figures that were generated in the tourism sector in 2013 serves to illustrate a point and highlight the possible losses that could be incurred by the tourism sector as a results of pandemics. Perhaps a deeper inquiry into the actual statistical comparison of the mentioned countries could be of huge benefit to the academic studies of tourism. What becomes clear is that pandemics could seriously disturb the tourism sector and by extension hamper the sector’s contribution to economic growth. Against this backdrop, it would be prudent for countries or tourism departments to have strategic plans that consider the possible impact of pandemics to the tourism.

**Ebola epidemic and lessons for South Africa’s approach**

The Public Sector Risk Management Framework defines risk as an unwanted outcome, actual or potential to the institution’s service delivery and other performance objectives, caused by the presence of risk factor (s) (National Treasury, 2010:15). If one follows this definition, one can deduce that the outbreak of a pandemic such as Ebola is indeed a risk factor that could present the tourism sector with an unwanted outcome which could potentially disturb the sector’s ability to contribute to the economic growth as envisaged in the NDP. According to the World Bank Group Report (2014: 63) a drop of the tourism
activity in South Africa could have significant implications for economic growth. This paper also adopts the definition of the Public Sector Risk Management Framework which defines risk management as a systematic and formalised process to identify, assess, manage and monitor risks (National Treasury, 2010: 16). As noted earlier on, the outbreak of a pandemic could disrupt travel, tourism, trade, financial markets, and domestic and regional order (NDP, 2012: 79). Moreover, the ninth edition of the 2014 Global Risk report places pandemic outbreak in the second place of societal risks. However, this risk is not among the top ten global risks of highest concern in 2014 (Global Risks, 2014: 12-13). This risk is also not listed among the top 5 global risks in terms of likelihood or in terms of impact respectively. It goes without saying that the report was released before the noticed outbreak of the pandemic. It should be recalled that the World Economic Forum normally holds sessions during the last week of January. As noted in the preceding sections, the outbreak of pandemic was only confirmed in March 2014 almost two months after the release of the report.

Conversely, the 10th edition of the Global Risks 2015 which was presented to the World Economic Forum annual meeting of 2015 puts the spread of infectious diseases at the second place of top ten risks in terms of impact, as indicated in table 1 and appendix 1 (Global Risks, 2015: 9). Moreover, the Global Economic Prospects (GEP) report of January 2015 clearly puts Ebola as one of the idiosyncratic risks that affected the Sub-Saharan Africa during the reviewed period (GEP: 2015, 104).

The GEP report further elaborates that if the epidemic could hit the transportation hubs of countries (e.g. Ghana and Senegal) it would cause disruptions to cross-border trade and supply chains of an entire region. The report adds that heightened Ebola fears would further undermine confidence, investments and travel. According to the Global Risks 2015 report, Sub-Saharan Africa is considered the least prepared continent for infectious diseases and unemployment (Global Risks, 2015: 23).

This assertion clearly challenges the notion of risk management in various sectors within the African continent, especially the tourism industry. Again, the risk management study of the continent is a broader topic that is beyond the scope of this paper.
A mere glance at the Strategic Plan and Annual Performance Plan 2014/15 – 2018/19 of the Department of Tourism of South Africa reveals that the department has identified international tourism management as a programme. The sole purpose of this programme, according to the plan, is to provide political and policy direction for the development of South Africa’s tourism potential throughout various regions of the world. The strategic objective of this programme is to provide international tourism market analysis to inform strategic interventions. It is also to reduce barriers to tourism growth to enhance tourism competitiveness. The ultimate outcome will be the contribution of the tourism sector to the economic growth and job creation (Department of Tourism, 2014: 25-26). Indeed, this plan is in line with the commitment of the NDP of utilising tourism as a contributor to the growth of the economy. The only difference is that NDP acknowledges the risk of pandemics that could potentially hamper the contribution of the sector to the growth of the economy, whereas the Strategic Plan of the department does not. Instead, the department describes non implementation and monitoring of international agreements as well as inadequate strategic participation in multilateral organisations as two risks that could impact on its programme of international tourism (Department of Tourism, 2014: 25-26). The conviction is that essentially, the link between NDP and the strategic plan of tourism should extend beyond strategic objectives to include the identified risks of pandemics. This will enable the department to properly align its risk register to mitigate the challenges that are viewed as obstructive to the 2030 vision of the tourism sector contribution to the economic growth of the country.

A recommended approach

The paper tried to illuminate a picture of interdependence between the health sector and the tourism sector. This has been done by looking at Ebola’s possible impact on the tourism sector. The paper viewed the tourism sector through the focal lenses of what the NDP envisages it to achieve. It is in this context that one believes in the importance of a multi-sectoral approach that may even result in serendipity towards the proper implementation of the prescripts of the
NDP. Expecting the health department to tackle the Ebola virus without considering the implications of the outbreak to other sectors (e.g. travel, tourism, trade, and financial markets) could be catastrophic to the plan of the country. Although such approach could be tantamount to benign neglect, as other sectors respect the mandate of the health sector, it would still be a costly exercise for any country.

According to Binagwaho (2014)

“one of the greatest challenges to progress in global health is the narrow view that investing solely in health systems is a panacea for managing health threats. Rather, it is necessary to strengthen all the sectors that affect social determinants of health and governance – including finance, transportation, security and communication – to ensure a collaborative and effective response to such threats”

One tends to subscribe to Binagwaho’s notion particularly in respect of Ebola and tourism. It is argued that a collaborative approach by relevant sectors (health, tourism, transport, home affairs, communication, security as well as international relations) will alleviate the challenge and lesson the burden. Binagwaho (2014) gives an example of how these sectors could work stating that funds would be needed to prevent the outbreak of Ebola virus thus making the health sector to work with the finance sector. Given the potential of the transmission of the virus from people entering the country the transportation and immigration (or home affairs) sectors would work together to implement relevant policies. The security sector would also be required to implement the emergency procedures aimed at containing the virus. It could also be added in this analogy, that the international relations sector would need to implement the much needed diplomacy to allay the fears of the world (including investors, travellers, traders etc.) by sending positive messages about the country’s containment strategy. The communication sector would also be key in ensuring that the general public is properly informed about government’s tackling of the virus.

Although South Africa did not really experience a reported case of Ebola during the recent outbreak, one remains convinced that a holistic and multi-sectoral approach will go a long way in alleviating the challenge of the virus to the tourism sector as such. In this regard, it would be critical that the tourism department heeds the call of the 2015 risk report and note that an outbreak of infectious diseases may have a big impact to the economic growth of a country. The department should also note and act on the observation of the NDP on the pandemics that could disturb the sector. It should be borne in mind that the ultimate contribution of tourism to economic growth rests on ensuring that the sector is not negatively affected by barriers (such as pandemics) to its growth.

Conclusion

The outbreak of Ebola epidemic shook the health sector and threatened the economic growth of the continent. Slow pace of containment would have had negative consequences for many countries, including South Africa. Such effect would have delayed the implementation of the NDP. In this regard, it remains critical that planning should be accompanied by a relevant risk register that makes proposals on the mitigation measures of risks that could potentially hamper implementation. The Ebola epidemic presents a risk to the tourism sector. If a department that is in charge of this sector fails to recognise the Ebola epidemic as a risk it could find it difficult to respond to a potential outbreak.

A predictable holistic approach that involves a synergy of all stakeholders and entities (health, tourism, transport, home affairs, international relations, security etc.) could offer an added impetus to respond to the Ebola epidemic or similar future outbreaks of any epidemic. A clear lesson to the government of South Africa and the country at large is that the
implementation of the NDP requires constant probing on various risks that could delay the envisaged development in 2030.

References


Appendix follows on next page...
Appendix 1: The Global Risks Landscape 2015

Figure 1: The Global Risks Landscape 2015

Top 10 risks in terms of Likelihood
1. Interstate conflict
2. Extreme weather events
3. Failure of national governance
4. State collapse or crisis
5. Unemployment or underemployment
6. Natural catastrophes
7. Failure of climate-change adaptation
8. Water crises
9. Data fraud or theft
10. Cyber attacks

Top 10 risks in terms of Impact
1. Water crises
2. Spread of infectious diseases
3. Weapons of mass destruction
4. Interstate conflict
5. Failure of climate-change adaptation
6. Energy price shock
7. Critical infrastructure breakdown
8. Fiscal crises
9. Unemployment or underemployment
10. Biodiversity loss and ecosystem collapse

Categories:
- Economic
- Environmental
- Geopolitical
- Societal
- Technological


Note: Survey respondents were asked to assess the likelihood and impact of the individual risks on a scale of 1 to 7, 1 representing a risk that is not likely to happen or have impact, and 7 a risk very likely to occur with massive and devastating impacts. See Appendix B for more details. To ensure legibility, the names of the global risks are abbreviated. Also see Appendix A for the full name and description.