

Effects of COVID-19 on hotel industry: a case study of Delhi, India

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Abstract | Different industries throughout the world face a tough time confronting the pandemic of novel coronavirus (COVID-19), so does the hotel industry. Hence, this research attempts to determine the impact of the COVID-19 crisis on the hotel industry in terms of guest retention. The crisis which started in Wuhan, China (December 2019) has spread to the whole world and continues to spread. Although in newspapers, journals, and online media there are few published articles, they are mostly based on secondary data. This study is an attempt to examine the perceptions of hotel employees regarding the effect of COVID-19 on the hotel industry through qualitative analysis. Further, the study attempts to evaluate the crisis preparedness and steps taken to combat COVID-19, and eventually determine the positive outcome of the crisis. This paper presents an overview of the advent of COVID-19 in New Delhi, India, and more importantly, reports on the approaches that hotels employ to sustain during this difficult time. Through the in-depth interviews with senior employees in six hotels in the national capital city New Delhi, India (four interviews before the lockdown and two interviews during the lockdown). Empirical findings showed that at various phases of the crisis, hotels were taking different approaches to survive. The hotels were introducing strategies for guest retention to create stronger guest relationships. This paper presents the impact of this crisis on hotel employees and how the hotels are reacting to this crisis. The practical and theoretical implications of the study are discussed.

Keywords | Coronavirus, guest relationship, guest retention, COVID-19, hotels, India

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1. Introduction

As of July 23, 2021, confirmed cases of coronavirus infection stood at 192 284 207 and the reported death through the disease are 4 136 518 (WHO, 2020a). Coronaviruses (CoV) cause illnesses ranging from the common cold to more severe diseases such as the Middle East respiratory syndrome (MERS-CoV), it was discovered in Saudi Arabia 2012, and severe acute respiratory syndrome (SARS-CoV), discovered in China 2003. It is a large family of viruses, COVID-19 is a new strain that was discovered in December 2019 and has not been before distinguished in people. The transmission of this virus is from animals to humans. The regular indicators of the disease are difficulty in breathing, fever, cough, and the brevity of breath. In serious cases, it further leads to pneumonia, extreme intense respiratory disorder, kidney failure, and eventually death (WHO, 2020a).

The name corona comes from the Latin language, which means a crown since the protein spikes on coronavirus looks like a crown. The coronaviruses spread from various ranges of animals to humans, and this is termed as spillover. The MERS-CoV spread from camel and SARS-CoV spread from civet cats. The source of the novel coronavirus is not confirmed yet (WHO, 2020a). The first COVID-19 case in India was found in Kerala, a southwestern coastal state on January 20, 2020. As of July 23, 2021, the total active COVID-19 cases across India are 31,293,062, and a total of 419,470 deaths have been reported (MoHFW).

The tourism industry globally is very susceptible to crisis and tragedy (Kuo et al., 2008; Gössling et al., 2020). The international monetary fund has forecasted global economic growth to fall to 2.4% for the whole year, compared to 2.9 % in 2019. There will be job losses throughout the world because of cease in supply and demand (Fernandes, 2020). One in five new jobs were created by Travel & Tourism over the last five years in India (WTTC

2020). The theme of the conference conducted by WTTC in November 2019 was the crisis readiness management, where they educated and increased preparedness for any kind of civil unrest, terrorism, epidemics, and natural disaster (WTTC, 2019). This COVID-19 virus has affected the tourism industry drastically not only in India but globally (Guevara, 2020). On March 19, 2020, the ministry of health and family welfare of India issued a travel advisory which suggests from March 22, 2020, no international commercial passenger aircraft shall take off from any foreign airport for any airport in India (MoHFW, 2020a). These restrictions have shown significant improvement in decreasing the number of cases (Nicola et al., 2020). World health organization in an advisory to tourists suggests that the travelers who are sick should avoid travel to affected regions. Because temperature check alone on the airports is not an effective solution, travelers are also advised to follow proper hygiene practices as described by the World health organization (WHO, 2020b). Henderson (2007) finds that after the Tsunami of 2004 in the Indian Ocean, the arrival of international tourists in Phuket, Thailand dropped drastically by more than 60% and almost 3000 employees and around 500 tourism ventures were affected. A crisis is an incident that disrupts the operation of an entity (or destination) and that can be avoided or minimized by human actions to a large degree by its consequences (Hao et al., 2020). On the other hand, a “disaster” was used to refer to the situation where a destination faces sudden drastic change that it does not influence (Faulkner, 2001). As per the description given by Faulkner the COVID-19 disease can be classified as a crisis. Avian Flu and pandemic influenza resulted in an approximately 1.8 % decrease in Vietnam’s GDP, it was also seen that there was a 5% decline in the arrival of tourists (Kuo et al., 2008). Freund (2020) argues that the most recent figures from the world travel and tourism council estimate that around 50 million jobs will be affected by COVID-19, the develo-

ping countries primarily depend upon tourism. The tourism sector is at a halt. Just as governments around the world are finding ways to reduce the economic effects of the COVID-19 (coronavirus) pandemic, recovery cannot start before the health emergency is under control and travel restrictions can be safely lifted (Jiang & Wen, 2020). Diseases like SARS, MERS, Avian Flu, Malaria, and other diseases that can quickly spread by foreign travel are a result of globalization's unavoidable consequences (Richter, 2003).

The Chinese health ministry announced the unexplained outbreak of atypical pneumonia in southern China's Guangdong province in February 2003. News of this "mysterious" disease has spread exponentially. It is suspected that a Chinese physician who had treated patients in Guangdong brought the disease (SARS) to Hong Kong in February. The doctor started showing symptoms and was treated in a hospital where he had died. The doctor infected approximately 10 people at the hotel where he was staying (Moloo, 2018). The SARS disease caused more than 8000 infections with 774 deaths, and it spread through 27 countries (WHO, 2004). Another coronavirus outbreak was Middle Eastern respiratory syndrome (MERS), it was first seen in 2012 in Saudi Arabia. It is an illness caused through the coronaviruses family and is associated with viral respiratory illness. The MERS outbreak reached 27 countries, but 80% of the cases were from Saudi Arabia. MERS reported the highest mortality rate of around 35% among all coronaviruses (WHO, 2019). The accommodation sector saw a sharp decline after the MERS outbreak, and the same could be seen in the food and beverage sector (Joo et al., 2019). Department of health, Australia publishes that the demand for hotel rooms has declined drastically throughout the world and the supply remains high. This is impacting the performance with Rev PAR down or slows in Asia with -3.3%. Indian Ocean markets have started showing a decline in accommodation between January 21, 2020, and March 5, 2020,

but it is less affected as compared to China and Europe (DoH-Australian Government, 2020).

Gandhi (2020, a) in his report states that the rising effect of the coronavirus pandemic (COVID-19) will cost the misfortunes of the Indian hospitality industry to the tune of 6.20 billion INR. The hotel chain network and the independent division of hotels are looking at misfortunes over 1.3 billion-1.55 billion INR, while the alternative accommodation segment is likely to cause misfortunes over 4.20- 4.70 billion INR. Cutbacks of 'casual staff' or 'contracted staff' are likely, an examination recommended (Jung et al., 2021). As stated in the study, the current 'situation' of infections is just being seen crushing for the next few months, we estimate that the weighted impact of this circumstance is likely to disintegrate the mixed occupancy across the nation by about 18-20 percent in the year 2020, while the combined nation Average Daily Rate (ADR) is likely to see a fall of 12-14 percent this year. It has also been said that the Indian travel industry contributes to about 10 percent of GDP (around US\$ 275 billion). It might not be an exaggeration to say that, if COVID-19 does not stop this year, basically the whole of this income will decrease to an agonizingly unimportant amount (Kaushal & Srivastava, 2021).

The current study through a qualitative method attempts

- a. to explore the perceptions of hotel employees regarding the effect of COVID-19 on the hotel industry.
- b. to evaluate the crisis preparedness and steps taken to combat COVID-19.
- c. to determine the positive outcome of the crisis.

2. Literature Review

Different researchers are with the view that disaster and crisis have two unique implications. The crisis begins when we do not control the circumstance because various sorts of misfortunes happen (Miller & Ritchie, 2003). Disaster has an alternate perspective it comes out of nowhere and gives almost no opportunity to do anything (Faulkner, 2001). The SARS outbreak which occurred in Hong Kong in 2003 was a crisis. However, the way the government had dealt with the circumstance it turned into a disaster for the hotel industry and the entire world (Lo et al., 2006). Miller and Ritchie (2003) found that foot and mouth disease had four phases and the manner in which various stakeholders dealt with these phases of foot and mouth disease in the United Kingdom, the crisis of this disease at last turned into a disaster for the hotel industry in the UK (James & Rushton, 2002). The same occurred in Hong Kong where SARS began as a crisis at first. But since the government did not take any essential steps, one visitor who had visited a Hong Kong hotel from China with SARS disease infected 6 other visitors, and suddenly the SARS crisis became an epidemic (Siu & Wong, 2004). Since the government ceased all airports, cancelled all foreign trips, and brought lockdown into effect, this exceptional crisis made the travel industry perform adversely (Pine & McKercher, 2004). The manner, in which the Chinese government handled SARS, shows that there was a lack of knowledge in dealing with this kind of large-scale crisis, which at last influenced the hotel industry in China as well as the entire world (Lo et al., 2006). Guest protection from any danger is most critical in the hospitality industry, so planning for a potential crisis has become relevant (Enz & Taylor 2002). For the hotel industry, large-scale post-crisis research has become very critical so that the belief of the guest can be restored (Jauhari et al., 2009; Gursoy & Chi, 2020). The above authors also suggest that the hotel managers must know

about crisis management and hotel should have plans in place for future crises so that they can recover fast.

De Sausmarez (2004) found that the tourism industry should have effective crisis management and post-crisis marketing strategy to recover from a crisis. There are various stages in every disease, researchers say we should treat these stages differently and our crisis management should have a flexible approach (Alan et al., 2006). Managers have a very important role to play in hotels because if they give their juniors overwork, this may lead to unethical behavior (Hao et al., 2020). For example, if the chef becomes overworked in the preparation of food, they will not be able to concentrate on cleaning that eventually causes a disease that could turn into a crisis (Racherla & Hu, 2009). After the 9/11 disaster, hotels in the United States had seen an unprecedented decline in overall tourist arrival. People were so scared that they cancelled their holidays, the terrorist attack took over 3000 lives and around 6000 casualties were reported (Jordan et al., 2011). After this disaster, managers of the hotels took two main approaches to recover from the crisis. The first one was revenue-enhancing and the second was cost constraining. The main focus of hotels after the crisis is increasing the occupancy percentage, to do so they adopt one of the approaches as revenue-enhancing technique and cost-cutting technique (Lo et al., 2006).

In order to preserve their existence in a crisis such as the 9/11 attack, large hotels concentrate on the cost-cut approach they avoid using the hotel section so that they do not have to manage that area. They also avoid the recruiting and promotion of employees so that they can survive (Israeli et al., 2011). The above authors also note that small hotels start cutting their room rates to increase the number of guests, but big hotel chains focus on the local market and give competition to small-scale hotels. The hotel industry also works closely with the government to restore the normal situa-

tion and they also pressurize the government for a recovery package (Stafford et al., 2002). This is a different approach in which hotels promote particular tourist destinations with government support. Different stakeholder also works together with the government on crisis management so that the crisis could not become a disaster (Rittichai-nuwat, 2013; Gursoy & Chi, 2020). Campiranon and Scott (2014) found in their research the importance of continuity programs so that organizations can survive, retain customers, and recover from disasters. At the time of crisis, it becomes important to work together with other industries so that the hospitality industry can increase its revenue (Papatheodorou et al., 2010; Sharma et al., 2021). Badr, Zakareya, and Saleh (2009) revealed that the financial crisis has a huge impact on tourism rather than any other crisis. At the time of crisis strong brand, high quality, and customer loyalty help hotels to be on the positive side according to Del Mar Alonso-Almeida et al. (2013). They also found that the hotels that have high quality with competitive rates have a chance to get maximum revenue during the crisis. The role of traveling in the spread of infectious diseases is very high because when people travel, the infection travels with them and infects people who come in contact with an infected person (Monterrubio, 2010). Influenza (H1N1) disease that spread throughout the world could withstand both hot and cold climatic conditions, the disease had six stages and in the sixth stage it is called a pandemic, when it starts spreading among the community (WHO, 2009).

Grais et al. (2004) examined the role of foreign travel in the dissemination of H1N1 worldwide. Disease such as H1N1 triggers short panic that affects people's travel habits and eventually damages the tourism industry (Michelle Driedger, Maier, & Jardine, 2018). In their research Rassy and Smith (2013) reveals that Mexico's overall tourism growth saw a fall since the 2009 H1N1 pandemic. Tourist typically avoids places that suffer from any disease because people normally fly for their lei-

sure and do not want disruptions in that (Rittichai-nuwat and Chakraborty, 2009). The above authors also noticed that tourists helped in spreading the disease across countries. The same can be observed with SARS, that one infected tourist who visited a Hong Kong hotel, spread this disease to the world. The total number of deaths reported until 2004 due to SARS was 774 and 8096 people were infected (WHO, 2004).

During SARS infection people were told to stay in their homes and also tourists who were coming from infected countries needed to stay in quarantine for 14 days. Hong Kong Hotels were also responded to this by limiting their operation and closing unnecessary operations in their hotels, they started disinfecting their propriety. The government also directed hotels to follow the measures to stop spreading the disease (Hanna and Huang, 2004). The Middle East respiratory syndrome (MERS) that affected South Korea in 2015 shows that this form of the disease can create a very big problem even for developed countries despite all of the high-quality medical facilities (Joo et al., 2019). A total of 38 deaths had been confirmed, and 16,000 people were quarantined in South Korea (WHO) during the MERS outbreak. Pine and Mc Kercher (2004) revealed that the major impacts that the hotel industry faced because of SARS in Hong Kong were the cost-cutting by asking the employees to go on unpaid leave, by closing some hotel floors, and also by stopping various advertisement campaigns. Owing to the SARS crisis, several hotels were sold. Hotels asked the government for waiver packages and banks to reduce or waive interest to survive. The problem for luxury hotels was more serious that they were in business troubles even after the second half of the year. However, there is a lack of literature on hotels of New Delhi and their response to these types of diseases, and how they survived in an epidemic like SARS. Ruiz Estrada, Park, and Lee (2020) found that tourism and air travel are affected significantly by COVID-19 in China. While tourism

is a growing industry that contributes to international, regional, and local economic development, such development is also disrupted and constrained by crisis and disaster. Crisis and disaster not only affect the tourism industry but also have significant consequences for tourism behavior and spending patterns (Senbeto & Hon, 2020).

In the past, the Indian government had not faced such a pandemic, though India during the virus attack of P-09-H1N1 in the year 2009, made plans to tackle it. The airports filtered out the international passengers, in total, 19947 people were found to have been infected with P-09-H1N1 and 627 died, with a mortality rate of 3.14 percent (John & Moorthy, 2010). At the time of P-09-H1N1, the lack of hospitals, intensive care units, and personal protective equipment was seen, which raises a question of the good healthcare facility in hospitals (John & Mulyil, 2009). The government of India tried their level best to educate people on using the best sanitizing procedures like covering mouths while sneezing and washing hands regularly. However, there was a lack of communication channels (organized) by the ministry of health and family welfare in India (John & Moorthy, 2010).

2.1. Coronavirus (COVID-19) effects in India

India Brand Equity Foundation (IBEF, 2019) in their report on Indian tourism and hospitality explains foreign tourist arrivals in Indian were 10.55 million (2018) that is a growth rate of 5.20% year on year. The Indian government has set a target of 20 million foreign tourist arrivals in 2020 and doubles the foreign exchange earnings. This can be seen achievable from the fact that India has seen 96, 69, 633 foreign tourist arrivals from January 2019 to November 2019 with a growth of 3.2%. At the same time, foreign exchange earnings were US\$ 26.95 billion with a growth of 7.4% from the previous year. The hotel industry has set new plans for the year 2020 for example Hilton plans to add

18 hotels pan India by 2021, Radisson hotel group expected to double its portfolio by 2022, Louvre hotels group plans to increase its business in India to 10-15% by 2021. The federation of association in Indian tourism and hospitality (FAITH) predicts that "about 70 percent of an expected total workforce of 50.5 million (direct and indirect) could become unemployed (30.8 million) due to COVID-19 crisis. The impact of job losses and layoffs has already started across the country. A large percentage of India's total tourism sector, estimated at \$28 billion-plus in forex and above 2 lakh Crores in domestic tourism, would face economic losses throughout the year (Hotelierindia.com, 2020).

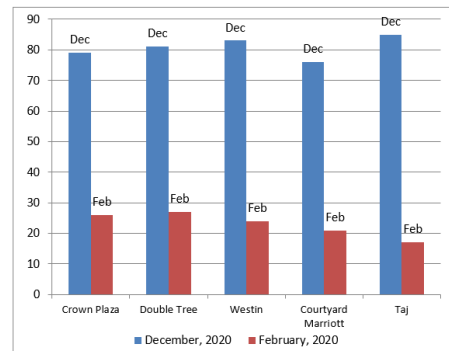


Figure 1 | A comparison chart of hotel occupancy (December 2019 and February 2020) in New Delhi

Source: One of the respondents

3. Research Methodology

The coronavirus crisis is new, and it is unfolding new situations every day, for such kind of study qualitative studies suits best (Strauss & Corbin, 1998), where a case study method has been adopted. Six hotels have been selected for the study. The hotels are five-star hotels since five-star hotels keep records of all the guests and attract the most international clientele. The five-star hotels are selected from 172 hotels of New Delhi which are there on the list of the federation of hotel and restaurant association of India (FHRAI, 2020).

New Delhi is selected as the area of study because it is the national capital of India and attracts maximum international clientele for business as well as tourism. The foreign tourist arrival stood highest in New Delhi at 2845076 (28.35%) in 2017, which is the highest in India (tourism.gov.in, 2018b).

3.1. Participants

Since the sample size was unknown a non-probability judgemental sampling was adopted (Kaushal & Srivastava, 2021). Personal interviews of senior management employees were conducted of the selected five-star hotels in February 2020 and March 2020. Four interviews were conducted before the lockdown (MoHFW, 2020, b) imposed by the government of India, and two interviews were conducted amid the lockdown. Respondents included sales executive, human resource manager, food and beverage manager, training manager, executive chef, and executive housekeeper. The intention to have diverse departments in consideration is to get well-spread information. The selection criteria required participants to have a minimum of 10 years of experience in their respective departments. Of the 10 participants who volunteered for the interview 6 were selected and four were excluded on the above ground. All the participants were male with different ages: interviewee 1 (32 years), interviewee 2 (36 years), interviewee 3 (44 years), interviewee 4 (35 years), interviewee 5 (39 years), and interviewee 6 (40 years).

3.2. Data collection

An in-depth interview approach was suitable for the current study as these interviews can provide detailed information. The follow-up questions were asked to get a clear picture of the scenario of the hotel industry (Lo et al., 2006). To bring consistency in the interview approach a semi-structured

discussion guide was prepared that helped the researchers to ask uniform questions. The interviewees were briefed about the discussion and the purpose of the study, only after their approval the interviews were conducted. The respondents were assured that the confidentiality of their information will be maintained, and they were not given any incentives for participation as the participation was voluntary. Due to the lockdown and unsafe travel conditions during the study because of the COVID-19 pandemic, telephonic interviews were conducted. Permissions for recording telephonic interviews were sought beforehand. The questions for the interviews were adopted from the studies of Chien and Law (2003) and Lo et al. (2006). The interviews were conducted in English and all the interviewees allowed the interview to be recorded.

3.3. Data analysis

The interview recordings were examined by manual thematic analysis. Participants were given pseudonyms to maintain anonymity through the analysis process and when presenting the data. The analysis of the collected information was done in five steps which includes 1) processing of data through content analysis, 2) searching for themes and sub-themes through the interview transcripts (Braun & Clarke, 2017), 3) Systematic analysis, coding and categorization 4) as suggested by Morse et al. (2002) the themes and sub-themes go for a verification process 5) the categories were classified into sub-themes. In the current study, five major themes were identified (Table 1). The secondary data collected from newspapers, internet websites, and magazines were also utilized to gather useful information (Phi, 2020). In addition, Creswell (2017) suggests maintaining the reliability and confidentiality of the data obtained, the results of the interactions were triangulated by comparing with the information gathered from the secondary sources. As some of the details shared during the

interview were confidential, this study did not disclose the hotel and informants.

The following questions were asked during the interview

- How is this crisis affecting the hotel industry economically?
- What other impacts of the crisis do you see on the hotel industry?
- What is the perception of hotel employees towards this crisis?
- What is your hotel doing to combat this crisis?
- Is there any positive outcome of this crisis?
- What are the measures adopted by your hotel to combat this crisis?

Table 1 | Themes and sub-themes

Themes	Sub-Themes
Economic impacts	Occupancy Average room rate (ARR)
Effect on hotel employees	Future prospects Survival in crisis Mind-set
Preparedness	Existing protocols Cost-effective measures
Measures to counter	Strategies to fight the slowdown Building guest relationship
Positive outcomes	Hygiene and sanitization Better relationships

Source: Authors compilation

4. Findings

4.1. COVID-19 impact on the hotel industry of New Delhi

Because COVID-19 is a new form of disease its impact is enormous and is extremely hitting the hotel industry of New Delhi. This disease is

impacting all the segments of New Delhi's hotel industry and showing a greater impact than the terrorist attack of 26/11, Mumbai which only affected the leisure travelers for a shorter time. The Government of India has restricted travel (domestic and international) from the 18th of March to 15th April 2020, which is a temporary measure because of COVID -19 (MoHFW, 2020c). The New Delhi hotel industry is largely dependent on international tourists, as the Indian government is not providing any visas as a precautionary measure. The arrival of tourists dropped significantly after the government's ban (MOT Government of India 2020). Since then, occupancy in the New Delhi hotels dropped drastically, some hotels have reported as low as 5% occupancy in March.

The business in my hotel depends on international guests and because of the COVID-19 crisis we are not getting international clientele. Economically it is affecting badly.

Interviewee 1

Usually in March New Delhi hotels do well as far as business is concerned. However, after COVID-19 break out in China in December 2019, the number of visitors started to decline in New Delhi.

The season for the hotel industry in New Delhi starts from September till April and this crisis affecting the business badly.

Interviewee 2

If we compare the hotel occupancy rate from December 2019 it was 80% but in March 2020 it is only 3% to 5% in five-star hotels (MOT Government of India 2020). Five Star category hotels are not able to sell their rooms, right now they are closed, and this is unprecedented, usually, hotels are never closed. Different hotels of the New Delhi have reported diverse occupancy rates like crown plaza has 26% occupancy in February as

compared to 79% in December, the doubletree has 27% occupancy in February as compared to 81% in December, and courtyard Marriott has 24% occupancy as compared to 76% in the month of December (Figure 1). These data clearly show that traveling was not affected by COVID-19 in the month of December (Jung et al., 2021), additionally, the effect of this crisis on the hotel industry is greater than 9/11. However, as soon as World Health Organization declared COVID-19 as a pandemic, people across boundaries stop traveling so as it has affected New Delhi's hotels also. Generally, December to March is called peak season for the New Delhi hotel industry and average room occupancy is about 80 to 90% (MOT Government of India 2020). The average room rate (ARR) for ro-seate hotel New Delhi has come down drastically by 15 to 20 % as compared to last year. The Le Meridien hotel (New Delhi) room rates are down from Rs. 12000 to Rs. 8000 (Chaturvedi, 2020a). Lamba, Dutta, and Mohan (2020) in their analysis reveal that the ADRs for 2020 are to be declined by 7-8 percentage for 2020 as compared to 2019 and as a result, RevPAR will also be affected by 31 to 36.2 percentage. This may result in huge economic losses as overall revenue is expected to decline by US\$ 8.85 billion to US\$ 10 billion that is a loss of 39 to 45 percent.

We live in a globalized world where every nation is linked, and if anything happens in any part of the world that affects every nation. In the case of COVID-19, the same is true. This disease started in China from where it has spread in other countries as of now over 197 countries & territories are affected (WHO 2020). It has, thus, severely affected the global economy. Business in India also senses the impact of slowing down. The interview findings also show that New Delhi hotels are closed and only entertaining guests who are already inside the hotel.

There are approximately 17-18 rooms. 3-4 are international and the rest are In-

dian. The guests are here for around 4-6 months working on their projects.

Interviewee 2

We have around 20 foreign guests and as you know flights, buses, train all are cancelled they are stuck. All the guests are international.

Interviewee 4

Hotels are not sure about when the business will become normal. Thus, hotels are reviewing their corporate contracts since corporate are the main customer for Business hotels. The impacts of this crisis are not limited to hotels only but other services to which the hotel is associated are also affected.

There are so many vendors attached with the hotel, like car service, that is outsourced, food vendors are also affected.

Interviewee 6

4.2 COVID-19 Effects on Hotel Employees

The hospitality sector is entirely dependent on travel, trade, and tourism for its sustenance. The massive spate of cancellations in recent weeks has largely eroded the ability of hotels across India to operate without piling up worrisome losses. Unfortunately, business for the second half of March seems to have dropped off a cliff, pretty much across the board. The absence of new business on books is only adding to the grim story ahead. Talking about hotel employees across the various branded hotel chains in New Delhi most of them are either contracted or casual staff. An estimated 70 percent of the 5.5 crore people employed in the tourism business (hotels, tourism companies, middlemen) could lose their jobs (Hotelierindia.com, 2020). During the interview one of the participants says

The employees are de-motivated right now.

Interviewee 5

The effect of job losses and layoffs has already begun throughout the country.

As of now, the hotel is not operational all the employees are at their homes. They are waiting to get everything normal, and their salaries are on hold.

Interviewee 3

Till this time, employees are afraid about their pay, and they are not confident about their job as far as the contractual employee is concerned. Five-star hotel employees have high morale, and they believe that this situation will change shortly, and they can work again (Jung et al., 2021). During the interview analysis, we also found that some of the five-star hotels in New Delhi terminated their contractual employees.

The hotel has not sacked anyone everybody has a job. There could be leave without pay; the hotel might be cutting 10 -15-day salary.

Interviewee 1

Also, the regular employees have been sent on leave, they are being paid till the time they exhaust leaves of this year. However, the employees are not certain about the steps to be taken by the management after the leaves get over. This decision is creating a negative impact on the mind-set of the employees (Hao et al., 2020). Employees also reported that they are concerned about COVID-19, and they all are doing whatever it takes to counter this crisis. As of now, employees are clear that they will not get any increment and promotion. Since they can also feel the impact of this crisis on the hotel industry. In one of the follow-up questions, it was revealed that students who are in their final

year of hotel management course, are more concerned about this crisis as hotels are planning not to hire any employee for at least six months. COVID-19 is creating unemployment because there is no demand. Above all it is also seen that the mind-set of hotel employees is very much positive during this crisis, all the participants agree that the hotel employees are tough, they are ready to serve in any condition.

Currently, three kinds of forces are working one is hospitals, police, army, and hotel industry.

Interviewee 2

4.3 Preparedness for the Crisis

For hotels, the various situations require specific crisis management strategies to address them properly (Alan et al., 2006).

We have been given training about fire-fighting, food safety, lost & found, and situation handling. But not virus spread.

Interviewee 6

It is observed that Star category hotels in New Delhi had a crisis management plan. However, they are specifically designed for bomb threats, theft, fire, and natural disasters. Most hotels specify that they have a crisis management team to handle the situation. In the team, executives have the main role at the time of crisis. The senior-level staff has all the necessary information which may be required in case of an emergency. Meanwhile, in emergencies, executives of the hotels need to do their role which is assigned to them in the case of emergency. Furthermore, it is also found that hotels in New Delhi have crisis management funds.

The recent situation is unpredictable, and we could have not provided training for

such a crisis. As we have seen the situation, we might plan to fight it.

Interviewee 2

The Delhi tourism industry has never seen a crisis like COVID-19 (Sharma et al., 2021). Therefore, hotels in New Delhi didn't have any crisis management plan specifically designed for this disease. Thus, they have created a special team with people from different departments like the front office, kitchen, food and beverage staff, security persons, and finance and sales executives to handle the situation. Interviews with different hotel staff also revealed that hotels are very thoughtful about this crisis, and they have created standard operating processors specifically design for COVID-19. Hotels Crisis management plans have cost-effective measures, but only cost-effective measures cannot help (Pottorff and Neal, 1994; Nicola et al., 2020). With these measures in place hotels in New Delhi are also keeping good relationships with corporate clients so that businesses can survive in this crisis.

Rooms are being offered to the government and four Floors of the hotel have been closed. All the water bodies have been shut down; all the systems should be shut down before leaving the hotel otherwise there will be a fine of 1000 rupees. The food options have been reduced.

Interviewee 2

Hotels have marketing strategies to deal with the crisis, for example, hotels are ready to offer their rooms at a low rate for the companies and governments so that they can use them to match their needs (Le & Phi, 2021). Hotels are learning from their past experiences that in crisis time or after crisis people avoid leisure travel. Therefore, hotels have created their strategies to sell their room in crisis times. For example, in 2003 at the time of

the SARS outbreak Hong Kong hotels gave their rooms to the government so that the government can use them as quarantine facilities (Lo et al., 2006). The same method of offering rooms for a set price for quarantine is followed in hotels of New Delhi.

4.4 Measures adopted to counter the COVID-19

While the COVID-19 pandemic has caused a distressing impact on the hotel industry in New Delhi, hotels are working together. As we know New Delhi hotels have no experience in dealing with COVID-19 crises.

We started hygiene practices as given by the health ministry of India. Gloves, safety masks, and protective uniforms have been made compulsory while talking to the guest or while serving them. We have given more focus on training of employees on sanitizing. In the restaurant, the buffet has been closed and only pre-plated service of food is being done from ala carte.

Interviewee 5

Hotels handle this crisis through the guidance issued by the Indian Government and have begun their precautionary measures by monitoring the guest's body temperature. They also put more focus on daily washing and sanitizing. Furthermore, employees are also told to wear a mask and use gloves. As well as Hotels initiated training in their organization especially focused on COVID-19. Employees are also told to maintain a certain distance while working to avoid the spread of COVID-19. Hotels in New Delhi initiated lockdown after COVID-19 cases started to rise so that they can avoid the spread of disease in their hotels. They are now starting to send workers on holidays,

and managers are being asked to work from home. However, many guests do stay in the hotels. Thus, for the safety of the guest and employees' hotels in New Delhi have distributed sanitizers to their employees and trained them to wash their hands frequently. Hotels are also cleaning public areas with a diluted bleach solution and hand sanitizers are placed in a public area for the guest and the employees (Jiang & Wen, 2020). If an employee is sick, they are not allowed to work, and likewise, they are not allowed to touch each other. Hotels are not serving buffets as precautionary measures. Therefore, the guest is served through room service and menus are limited. They have also closed some floors of the hotel and restaurants are closed right now. In some interviews, it also came to light that hotels are not allowing their employees to go outside of the hotel. So those employees are working and staying in the hotel itself. However, if the employees are allowed to go home, they are being provided with a pickup and drop facility. Hotels are providing individual room to their employees so that they can reduce the risk of spreading COVID-19.

In view of the uncertainty, hotels are also closing their floors to reduce their room inventories (Kaushal & Srivastava, 2021). Furthermore, hotels have put off their renovation and expansion plans. Some hotels are also dropping their contractual employees. So that they can reduce their operating cost to survive in this crisis (Israeli et al., 2011). In addition, hotels are now planning not to hire any new employees in the months ahead. These measures are important for the hotels to remain in business, but employees are certainly not happy with the decision. These steps create a negative image of the hotel and also demotivate the employees (Lo et al., 2006).

We classify our guests as Category A, category B, and category C. the responsible persons for such guests were asked to keep in touch with the guest and make

concern calls.

Interviewee 6

In addition, hotels are focusing on building a better relationship with the guests so that when things become normal, they have a business ready. Designated hotel employees are in continuous touch with the guest through concern calls. The bookings which were cancelled in February and March are being looked again and if the guest is asking for a refund that is provided. However, the hotels are offering a similar booking any time in the future for the same amount. In some cases, vouchers are being issued that can be availed in the next two years. This time of slowdown is being used as developing a better relationship with the guests.

4.5. The positive outcome of the COVID-19 crisis

As far as the hotel is a concern nevertheless employees are getting time to stay with their family. Han et al. (2020) in their study found that this crisis has a good impact on the environment.

Now the hotel is more serious about hygiene and sanitization.

Interviewee 6

Today hotels are more focused on sensitization, and they are also focusing on having more time for food handling and grooming instruction (Jiang & Wen, 2020). The one good thing about this crisis is that hotels are now able to cope with this sort of crisis, as they are witnessing it. Similarly, Employees understand how important cleaning and sensitization are. The government is also taking serious steps towards cleaning, and they are also making different policies to counter this type of crisis. Now companies are creating a special fund for COVID-19. Likewise, People are coming together

to fight this crisis on every level. Overall, every crisis teaches us something, and COVID-19 gives us an important lesson about cleaning and sanitization. When hotels came to know this disease spread through coughing and sneezing, they initiated their best cleaning practices. However, hotels are mostly running on low occupancy thus their housekeeping staff has increased the frequency of cleaning. Hotels are giving more time to cleaning public areas like elevators, lobbies, and restaurants. Hotels have now become more concerned about their employees' health as well as guest health (Sharma et al., 2021).

Our hotel has hired a hygiene manager and he is responsible to provide a solution to guests and staff.

Interviewee 4

Therefore, they are putting more money on cleaning and staff health. Now cleaning and sensitization are a top priority for hotels. As well as hotel staff is told to check their body temperature at regular intervals, they are also guided to wear a mask and wash their hand frequently (Sharma et al., 2021). Hotels are not worried about their image they are keeping hygiene first. Because of that, they are closely monitoring guest health so that people around them could not affect. On every step of the food, the handling staff is strictly following the guidelines. On receiving area vegetables are washed and sanitized properly, non-vegetarian items are received at the right temperature to avoid any particular disease. All food items are firmly stored according to the HACCP plan. Now chefs are more focused on hygiene than ever before and they are serving at the right temperature, staffs are more conscious about this. They also need to keep a thermometer with them to check the temperature of the food.

Since the staff is free for time being, they are getting emotionally strong, and they are being provided training in their

respective departments so that when everything is normal, we can bounce back with full force.

Interviewee 2

Since there is a lockdown now in India staff have time to work on their skills. The department heads of various departments are asked to take training sessions of their employees through online platforms to sharpen their skills. This is the time when the management can focus more on identifying their strength and weakness and work upon them (Brower and Chalk, 2003). However, at the same time, the staff is very much vulnerable in terms of their psychological state, as they are free and there is job insecurity (Kaushal & Srivastava, 2020).

This crisis is also helping to build a good employee and management relationship that would be visible in business in the coming years. We have found a few more cost-effective ways to implement.

Interviewee 1

The management is in continuous touch with the employees assuring them of their job security and any other assistance that they require. Extra care is taken in a case where an employee is staying alone away from home. These steps are helping the management to develop cordial relationships with the employees. This crisis has also helped the management to identify the new business segment that can be targeted once the crisis is over.

We have come to know about certain sectors which we can target. For example, pharmaceutical companies are the most active now. For now, movie production is shut down, we can in future target this segment because there are lots of projects in the pipeline.

Interviewee 5

Star category hotels doing their best to prevent COVID-19. Since this disease spread very fast and if any case arose in any hotel government will take over and start quarantine that will affect the hotel image. This will also create panic among guests and staff. Meanwhile, the front office staff is told to make distance while dealing with guests. They also need to check guest travel history to avoid the spreading of COVID-19 in their hotel.

5. Conclusion

This study is focused on the effect of COVID-19 on New Delhi hotels. As the COVID-19 pandemic is not finished yet the final effect of these diseases cannot be concluded. As this disease is new for everyone, limited data is available, and more studies need to be done. This study provides useful information like the hotels are using different crisis managing plans and following the government guidelines. The hotels are reducing their cost either by closing some of the floors or by sending their employees on leaves. Various measures are being taken to counter the crisis, for example, strict hygiene practices, temperature check on the guest as well as employee arrival, sanitizing the premises, and building a guest relationship. However, the steps are not much effective since the lockdown is in place throughout India. Still, hotels are getting themselves prepared to offer rooms for quarantine, some hotels even started to give their rooms for quarantine facilities at a set rate by the government. This crisis can be turned into an advantage only by predicting the current situation and executing predetermined measures to avoid the crisis. This paper suggests that we should learn from past epidemics like SARS to sustain. Hotels need to reduce their operating cost drastically and they also must work with the government to promote tourism. Furthermore, in this crisis when hotels do not have the experience to handle COVID-19,

Staff also needs to work hand in hand with the hotel. Similarly, hotels should create a contingency plan for handling such a type of crisis. At last, hotels first need to help the government to come out of this crisis so that tourism could survive in New Delhi. As the crisis continues and the findings of previous crises may not be useful in this crisis, more research is required to be done on various aspects of the hospitality industry.

6. Implications

Theoretically, the current study suggests important themes and sub-themes (Table 1) that can be studied in the future. The current study proposes that the hotels should have a strict contingency plan to counter the crisis like coronavirus COVID-19. This is the first study assessing the impact of COVID-19 on the hotel industry. The interview analysis of six senior employees of five-star hotels in New Delhi provides useful information. It is found that the hotels are facing huge economic losses (Alarcon, 2020). The hotel occupancy is down up to 5% and the room rates are slashed heavily and to sustain they are employing various strategies like cost-cutting (Lo et al., 2006) and reducing the staff. But then there are positive outcomes also as the hotels are following strict hygiene and sanitizing practices (Pine & McKercher, 2004). The managers of the hotels can utilize the findings of this study to practice the best hygiene procedure in their organization. Further, the organization heads should focus on cost-cutting strategies to survive in this critical time of crisis. They should work on providing salaries to their employees during the crisis so that their morale remains high. The manager should build guest relations in this period to get continuous business when the crisis escalates. They can further work on various marketing and advertising strategies to scale their business. A comprehensive action plan should be developed to

fight against such crisis. Since it was already not there, managers can chalk out a plan from learning of this crisis, which will help them in the future. In addition to this, a crisis management fund can be made that will help during the crisis.

Limitations and future recommendations

The current study is qualitative in nature and interviews of only six employees could be conducted. In the future, researchers can do a similar kind of study through a survey that may cover a wider number of respondents or could improve the findings by including a large sample size. The time of the study is a limitation because it was difficult to approach hotel staff in lockdown. The researchers can conduct the same study once the crisis is over to access the aftereffects of the crisis. As the study did not cover all New Delhi hotels, it is not the intention of the authors to generalize the results to hotels in general. This is an analysis of hotel reactions to a single incident; no attention was given to other disasters such as fire, bomb attack, earthquake, tsunami, and other life-threatening incidents. Further studies are required to generalize the findings of the study. Because the interviews were conducted in Hindi and English, and the results of the analysis were translated back into English for Hindi interviews, the meaning of the two different languages may vary.

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