Tourism: Greece’s position on a common approach and principles

The worldwide outbreak of COVID-19 has radically impacted the lives of Europeans and tourism has been the worst affected of all major economic sectors. The EU tourism market accounts for 40% of the global industry and contributes roughly 10% of EU GDP and 12% of EU jobs, without taking into account indirect value added and employment.

Uncertainty is the major factor that makes tourism vulnerable. Our response should include concrete steps on how to restart the tourism sector, in a coordinated manner. Up-to-date, reliable information and efficient communication strategy are more important than ever, both for tourists and for the tourism industry. Whilst containing the pandemic remains the priority, health measures should be implemented in a way that minimize unnecessary impact on cross-border travel.

This non-paper details common approaches and principles towards ensuring an effective restart of the tourism industry. They are subject to a continuation of current decreasing trends of the virus in the EU, are conditional on a sustainable downward path and should be regularly reviewed against the background of the evolving pandemic situation.

1. The Single Market remains the foundation of our Union. Without free movement of goods, services, people and capital, the European Union cannot survive. We need to recognize and protect the integrity and indivisibility of the four freedoms, which are equally important.

2. The groundwork for achieving the rebooting of tourism needs to be put in place immediately. Our objective is to work toward re-opening travel between EU countries by 15 June, where possible. These flows need to restart in a manner that ensures fair treatment of all MS, with a consistent commitment towards preventing any nationality bias in travel protocols. We cannot allow the fragmentation of the Single Market in the case of the tourism services.

3. There can be no discrimination or differentiation by means of travel. Means of transport by road, air, train or sea re-open at the same time and with proportionate protocols. We cannot allow more remote MS of our Union to be left behind. All citizens of the European Union should have the same rights and access to travel, irrespective of their geographical origin or destination.

4. The EU guidelines for travel should aim at protecting public health, whilst not discouraging tourism. The following could be foreseen:

   - Before travelling to a destination MS.

     - At an initial stage, a common understanding should ideally be reached at EU level for pre-travel preparations, including the requirement of a valid PCR or antibody test at most 72 hours before travel. More generally, testing capacities and procedures should be further enhanced in all MS with the support of EU funding.

     - Alternatively, no PCR or antibody tests would be required for travel between regions / MS which have demonstrated clear and persistent evidence that the Covid-19 situation is under control.

     - A list of accredited tests is agreed upon by the European Center for Disease Prevention and Control (ECDC) and provided to national authorities. Tests results should be registered in the form of a paper or digital certificate with a harmonized content that would be immediately recognized by the authorities of all MS. A common communication strategy is important to inform potential tourists of where and under which conditions these tests can be taken.
- Flexibility should be provided to potential travellers concerning booking of travel and accommodation. Compensation/refund policy for those unable to travel due to a last-minute change in circumstances in the MS of origin or destination or because they have tested positive to the coronavirus would also need to be discussed and agreed.

- To prevent overcrowding and risk of contamination, there should, in any case, be no requirement of tests at airports.

- The country of destination uses all means available to inform in advance potential tourists of the protocols it has put in place as well as for laboratory investigation and potential follow-up of results in collaboration with public health authorities.

- **On board aircraft:**

  - All seats of an aircraft can be filled with passengers, if hygienic measures can be applied including universal masking. There will be no mandatory requirement for keeping the middle seat empty as this would make flights uneconomical with questionable health benefits.

  - There is no inflight serving of food or drinks, and no inflight magazines.

  - The use of masks by passengers and flight staff is mandatory.

  - Airlines must comply with the baseline common protocol established by the European Aviation Safety Agency, taking also into account the recommendations of the European Center for Disease Prevention and Control (ECDC).

- **Upon arrival at the host MS:**

  Travellers are reminded of the domestic protocols they must adhere to through several means of communication. The host MS provides clear and exhaustive instructions on what to do and who to contact if the traveller develops suspicious symptoms, including a strict recommendation toward the traveller to follow particular domestic protocols.

  Moreover, each MS develops domestic protocols, consistent with EU guidelines, to ensure:

  - Contact tracing, testing and quarantine procedures in the event of a SARS-2-CoV positive patient or during an ongoing outbreak. The host MS offers accommodation and appropriate medical treatment, where needed, for EU travellers. The traveller is obliged to remain in the host MS and follow instructions until health officials allow return travel. The host MS can impose localised travel restrictions, where appropriate.

  - Appropriate and sufficient health hygiene and sanitation rules and advice for accommodation, hotels, restaurants, bars, beaches, sports, domestic transport, rental cars, activities, museums, culture and all other aspects of the tourist experience. The host MS develops sufficient monitoring and enforcing rules.

  - Assurance of appropriate local testing and health provision surge capacity in remote areas.

  - In the event of a large outbreak, availability, at short notice, of EU assistance for the repatriation of EU-nationals from the host country.
Return to the origin MS:

Origin and destination MS adopt should adopt common and reciprocal guidelines for treatment of travellers, meaning that there are no quarantine or other disproportionate or inhibiting requirements upon return to the origin MS.

5. For its part, the European Union should provide for the development of a common toolbox for interoperable voluntary tracing apps that can be used across EU Member-States, with strong adherence to privacy and safe storage of information, in accordance with the GDPR regulation. More generally, testing capacities and procedures should be further enhanced in all MS with the support of EU funding. Furthermore, user friendly EU-level information platforms to inform potential tourists, where each MS will register its national procedures and requirements, should be put in place.

6. If a MS determines a community transmission of infections, it should immediately inform other MS concerning the details of the outbreak and the measures implemented. On this basis other MS can temporarily suspend travel to and from specific MS, or specific regions of MS, or impose additional restrictions or rules, if there is demonstrable evidence of a significant outbreak of new cases of Covid-19, based on ECDC updates and risk assessment (where these are available). This flexibility should be based on mutual transparency and solidarity, without abuses or discriminatory treatment between MS.

7. The above framework to restore intra-EU travel will also serve as an adequate basis for the restoration of travel between EU and non-EU countries. The EU should engage as soon as possible in discussions with third-country partners. The entry of tourists from non-EU countries could be the subject of bilateral or multilateral agreements, ideally between the broad framework agreed by the EU27 based on European Commission recommendations and information provided by the diplomatic missions of the EU and the Member-States in third countries.

8. Conclusion – way forward

We cannot afford to delay putting in place the groundwork for the restoration of connectivity and free movement within and between MS in a harmonized manner that will also conform to the current epidemiological situation and contribute to the prevention of any wide-spread recurrence of the virus within the EU.

The European Commission should immediately start working with the MS to implement the above overarching framework.

This would also mean disbursing the necessary funds, mobilizing industrial production of the necessary testing equipment, increasing national healthcare systems’ capacities and staff and reaching a rapid understanding on harmonized protocols and procedures for all modes of travel without discrimination.