# Expectations of Indian guests from Hotel Preparedness in COVID-19

Journal of Tourism, Hospitality & Culinary Arts (JTHCA) 2020, Vol. 12 (3) pp 31-51 © The Author(s) 2020 Reprints and permission: UITM Press Submit date: 03<sup>th</sup> August 2020 Accept date: 19<sup>th</sup> November 2020 Publish date: 28<sup>th</sup> December 2020

Sarah Hussain Firdous Ahmad Shah Saima Kareem Jamia Millia Islamia, New Delhi shussain10@jmi.ac.in

# **Proposed citation:**

Hussain, S., Shah, F.A. & Kareem, S. (2020). Expectations of Indian guests from Hotel Preparedness in COVID-19. *Journal of Tourism, Hospitality & Culinary Arts, 12*(3), 31-51

## Abstract

Covid-19 brought the entire world and economies to a sudden halt. To contain the spread of Covid-19, implementation of lockdown and travel restrictions have adversely affected the tourism and hospitality sector. Unless the guest expectations during this contagion are not gauged and reported swiftly, the hotels will not attract the business back timely. This study aims to evaluate the factors that influence the expectations of Indian guests regarding safety measures in hotels as a consequence of the COVID-19 pandemic. The data was collected using a structured questionnaire with many open-ended questions to draw meaningful responses. The findings revealed that Indians would consider using hotels for their accommodation purpose during travel, but they have a few expectations and suggestions concerning their stay at the hotels. The study has revealed preferences for hotel categories for stay considering COVID-19 preparedness. The guests expect the hotels to follow stringent safety measures from different departments of hotels elaborated in this paper. The study proposes several practical implications for managers to acclimate for the COVID-19 recovery.

## **Keywords:**

COVID-19; expectations; hotels; preparedness; safety measures

## 1 Introduction

The global pandemic of COVID-19 has brought the economies of almost all countries of the world to a standstill. COVID-19, also known as the Novel Corona Virus, originated from within China in December 2019 and within months spread across the globe due to its high spread potential and contagious nature. The only means to protect it from spreading includes the practice of specific guidelines like social distancing, isolating oneself at home, closure of all public facilities like gyms, health clubs, shopping malls, Cineplex's, closure of schools and all educational institutions, restrictions in movement across borders and within the state and finally lockdown of the entire nation.

India received its first COVID-19 case on January 30, 2020 (WHO-India Situation Report, 2020). Almost every sector, business, and industry have been affected by this global epidemic; tourism and the hospitality sector are the worst hit. Restrictions in air travel across the world have led to numerous cancellations across hotels in India, thereby bringing about considerable losses to the hotel sector. According to Khanna (2020), hotels across India will have to bear a drop-down in the occupancy rate by a percentage of 18 to 20%, with the average daily room rates plunging by 12 to 14%. Though the hotels may have to bear significant losses at the moment, the future may not be so obscure. It may take a while for the hotel industry to recuperate. Still, the sector will salvage over time because of its zestful character and the ability to make timely policies and schemes.

The lockdown started in India on March 25, 2020, and the lifting of the lockdown began on May 31, 2020. The domestic flight services resumed from May 25, 2020, and the hotel, malls, and restaurants were allowed to reopen from June 8, 2020, which marked the phase from where revival would take place tourism and hospitality industry. This leads to finding out what are the guest expectations concerning travel. It is essential to know the sentiments during a pandemic to be better prepared to host them. Hence, the study aims to determine guest expectations from hotels in following safety measures post lifting of COVID 19 lockdowns in India.

#### 2 Literature Review

#### 2.1 Hotel Industry in India

The lodging industry in India comprises hotels, motels, and resorts. Further, the hotels have two segments – the first category being the star hotels and the second, the heritage hotels. The star hotels are also categorised into 5 Star Deluxe, 5 Star with Alcohol Service, 5 Star without Alcohol Service, 4 Star with Alcohol Service, 3 Star, 2 Star, and 1 Star. The Heritage category hotels comprise - the Heritage Grand, Heritage Classic with Alcohol Service, Heritage Classic without Alcohol Service, and Heritage Basic. Before Covid-19, India's overall hotel industry was expected to reach over Rs 1,200 billion by the year 2023. The last few years have witnessed the occupancy rates double and the hotel industry growing at 7 per cent per year. The leading hotel companies in India are - The Hyatt Hotels Corporation, Marriot

International India Pvt Ltd., Radisson Blu Hotels, Taj Hotels, Resorts & Palaces (IHCL), The Oberoi Group, The Park Hotels, ITC Group, Lalit Hotels, The Leela Palace, and Shangri-La Hotels & Resorts (NEWSHOUR, 2019). The total number of branded hotel rooms grew by 5.4% in 2019 compared to 2018 to 133,359 rooms. The trend predicted for India in 2019 was traveling for business and leisure (bleisure) (Khanna and Tyagi, 2019). Table 1 reflects the occupancy percentage. An approximate split of branded hotel rooms in India in 2020 is depicted in Table 2 as Khanna, A. (2020, July 31) informed. Personal Interview. STR reported a drop in hotel occupancy to 11 % at the end of March 2020. On March 28, 2020, ADR was INR 4,924.18, and RevPAR was as low as INR 537.54 on March 22, 2020 (STR, 2020).

Hotel Category	Occupancy %	ARR* (INR-₹)	RevPAR* (INR-₹)
Five-star Deluxe	67.4	10,656	7,180
Five-star	66.0	6,271	4,140
Four-star	67.5	4,743	3,203
Three-star	67.4	3,362	2,267
Two-star	62.8	2,497	1,567

Table 1: Occupancy % as per Hotel Classification in India in 2018-19.

Data Source: Khanna and Tyagi (2019).

\*ARR: Average Room Rate

\*RevPAR: Revenue per available rooms

Hotel type	Number of Rooms*	%	
Luxury	14,000	10	
Upper upscale	17,000	12.14	
Upscale	29,000	20.71	
Upper Mid-Scale	32,000	22.86	
Mid-scale	27,000	19.29	
Budget/ Economy	21,000	15	
Total	140,000	100	

Table 2: An approximate split of branded hotel rooms in India in 2020

Source: Khanna, A. (2020, July 31). Personal Interview.

\*These are rounded off numbers. The actual and accurate count changes weekly as new hotels open.

#### 2.2 Chronology of COVID-19 in India

The Coronavirus disease (COVID-19), a severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2), is a pandemic that has caused a global health crisis (WHO, 2020) and is the most damaging challenge we have faced since World War Two. Ever since its appearance in Asia towards the end of 2019, the virus has swept across every continent, saving Antarctica. The cases are mounting all across the world, including in the Indian sub-continent (UNDP, 2020). At the New Year of 2020, India was hopeful of development and advancement through the news of a particularly deadly virus threat originated from central China's Hubei province in Wuhan city in December 2019 had just

started appearing in towards the second half of January 2020. On January 30, 2020, a laboratory-confirmed the case of 2019-nCoV in Kerala. The concerned patient was a student who had returned from Wuhan and was isolated and under supervision. MoHFW (Ministry of Health and Family Welfare) and the Ministry of Civil Aviation started screening for fever and cough symptoms of people coming from China at 21 Indian airports. A travel advisory was also issued by MoHFW, asking Indians to avoid non-essential travel to China (WHO-India, 2020). Altogether there are 39 reports published so far by World Health Organisation – India, 1st being published on January 31, 2020, and the 20th on June 14, 2020.

Report No.	Date	COVID +ve cases / Deaths	Remarks
1	31 January 2020	01	Nomenclature: Novel Coronavirus (2019- nCoV)
2	6 February 2020	03	
3	February 13 2020	03	Nomenclature changed to Coronavirus Disease (COVID-19)
4	February 21 2020	03	
5	28 February 2020	03	
6	March 9 2020	44	
7	14 March 2020	84/2	
8	March 22 2020	360/ 7	Prime Minister called for a public curfew on March 22 from 7 AM-9 PM. Flights cancelled from 22 to March 29.
9	March 28 2020	909/ 19	"National Lockdown Phase 1" for 21 days with effect from March 25 2020. All incoming international flights suspended till April 14 2020. Indian Railways ordered that period from March 22 to April 14 will be considered under "Force Majeure".
10	April 5 2020	3 577/ 83	Launch of ArogyaSetu, a mobile app (April 2) through a public-private partnership to enable people to assess their risk of COVID infection.
11	April 12 2020	8 447/ 273	Sanction of INR 15,000 crores COVID-19 Emergency Response and Health System Preparedness Package by PMO.
12	April 19 2020	16 116/ 519	"National Lockdown Phase 2" extended till May 3.
13	April 26 2020	26917/ 826	Launch of "COVID India Seva" an interactive platform and direct channel of communication by MoHFW.

Table 3: India Situation Report

14	May 3 2020	40 263/ 1306	"National Lockdown Phase 3" announced for two weeks w.e.f. from May 4. Special trains operated to ferry migrant workers & others stranded to their home towns
15	10 May 2020	62 939/ 2109	
16	17 May 2020	90 927/ 2872	"National Lockdown Phase 4" announced from 18 – 31 May
17	24 May 2020	131,868/ 3,867	
18	May 31 2020	182,143/ 5,164	"Unlock 1" phased reopening announced of areas outside the Containment Zones from June 1 to June 30.
19	June 7, 2020	235,657/ 6,642	MoHFW issued guidelines for the operation of offices, religious places, restaurants, shopping malls, hotels, and other public places
20	June 14, 2020	308,993/ 8,884	States were recommended to ensure focus on essential health services and to utilise the network of more than 3,775 centres Ayushman Bharat- Health and Wellness Centres

Data source: WHO-India Situation Report (2020)

#### 2.3 Effect of COVID 19 on Tourism and Hospitality

India is an enormous country for travel and tourism activities, offering various tourism products, namely cruise-liners, adventure-tourism, medical-tourism, wellnesstourism, sports tourism, and MICE ecotourism, film-tourism, rural-tourism, and religious-tourism. India also enjoys the identity of a spiritual-tourism destination for both domestic travellers and international tourists (Hussain and Khanna, 2016). All kinds of tourism that India benefited from came to a halt because of lockdowns imposed in India. The lockdowns were authorised to curb the spread of the pandemic from March 25 by cutting off citizens' movement. This had a devastating effect on the economy, and the worst-hit industries were tourism and hospitality (Jain, 2020). The COVID-19 could cause a 12-14% reduction in jobs tourism and travel sector with an international travel loss of 25%. From March to June 2020, the aggregate loss for hotels in India is Rs. 4,810 crores (Horwath, 2020). RevPAR (Revenue per available room) for India's hospitality sector declined abruptly through the first three quarters of 2020. It is predicted that the overall occupancy in the branded hotels will decrease by 16.7-20.5% in 2020 compared to 2019 (Mishra, 2020). Overall, the revenue loss for the period of March to June for hotels in India is enormous Rs. Eight thousand crores (Horwath, 2020). Many hotels have considerably downsized their operations, whereas some have ephemerally closed down. This industry is highly perishable as the room nights lost due to non-occupancy are lost forever. The loss would take almost a year to recover once the outbreak was

over (Mallapur, 2020). For the hotel and tourism sector, the COVID-19 crisis is the worst global crisis (Horwath, 2020).

#### 2.4 Hotel Guest Expectations

Ariffin and Maghzi (2012) explain that hoteliers must know about their guest expectations and the influences that create them. This helps in marketing since guests always make comparisons of these expectations with the quality of service received. Therefore, in these peculiar pandemic times, it is imperative to re-evaluate guest expectations and start from zilch in building guest satisfaction. It was pointed out by O'Neil et al. (1994) that the requirement for products and services has to be generated as it does not occur on its own. Hence, the hotels have to re-create awareness as per the current situation and create a need to avail hotel facilities in the COVID-19 times. While aiming to generate that demand, businesses tend to lose half of their customers every five years. Hence Mack et al. (2000) suggest finding out from customers what they expect and strive towards fulfilling their expectations to succeed. Guest expectations work as a benchmark in delivering quality service against which the actual performance is measured (Zeithaml et al., 2006).

Not only is it essential to be aware of expectations, but it is equally important to gauge guest perception post-consumption of services. According to Hussain and Khanna (2019), having an accurate idea of guest perception concerning service quality leads to guest satisfaction, and this is the objective the hotels strive to achieve. Hence, hoteliers have to understand guest perception and respond with a pro-active approach. A survey conducted by "livemint," an electronic news portal, reported that several people are surfing the web for short trips with well-established hotels which promise safe stay with no compromise on health measures. Hotels must be technologically advanced with a doctor on call facility and hospital nearby. It was also found that more than 80 per cent of the respondents were willing to travel by air (livemint.com, 2020). Hussain (2017) reported, "Cleanliness, Furnishing, and Comfort of the Room" factors that hotel guests consider the most while selecting a hotel. Therefore, during such a contagion, the importance of 'cleanliness' would be more than ever.

## 2.5 Hotels' Preparedness for Pandemic

During this pandemic, the hotels could learn about health and safety precautions from health care services. The investors must envision their organisations primarily as safety providers and after that, as hospitality establishments. The hotels must first take care of their staff's well-being, followed by a fair incident command process. This should be followed by training in handling items most cautiously to curb the contagion. Hotels could initiate cleaning using antiviral cleaners on hard surfaces or UV light; PPE for housekeeping attendants; sanitiser dispensers within and outside guest-rooms; cleaning supplies in the guestroom to allow guests to clean the frequently touched surfaces themselves; details of cleaning procedure undertaken at the hotel should be kept at a visible place in the guest room; updating frequency and method of cleaning on a mobile app or hotel website. The hotels should also aspire to go as contactless as possible (allowing mobile check-ins and check-outs). The other consideration would be ensuring rigorous physical distancing wherein the number of people in any area in the hotel should be monitored and checked. Hotels must find a usable substitute for unfavourable air pressure rooms of hospitals. There should be more research towards knowing which guest or employee is safe through some form of certification (Klasko, 2020).

The Federation of Hotel & Restaurant Associations of India (FHRAI), in alliance with the Food Safety and Standards Authority of India (FSSAI), has announced the "COVID-19 Awareness Training Programme" for hospitality employees of India, which will ensure the safe experience of guests and employees (Chaturvedi, 2020). The Ministry of Health and Family Welfare India (2020) provided Standard Operating Procedures (SOP) on preventive measures in hotels and other hospitality units to contain the spread of COVID-19 on June 5, 2020. These SOPs, if followed strictly, would be able to prevent the spread of COVID-19 through hospitality establishments like hotels, restaurants, and shopping malls were approved to resume their operations from June 8, 2020, onwards. Therefore, it is safe to believe that, slowly and gradually, business for the hospitality sector would build-up with the opening of lockdown. The public's sentiments have been gauged with the current study to understand the guest's expectations concerning travel further.

In 2003, when many South Asian countries were severely affected by the Severe Acute Respiratory Syndrome (SARS) crisis, the Indian hotel segment performed well. This was because the business from other Asian countries shifted to India (Goyal, 2003). India had only three reported SARS cases from November 2002 to July 2003 (Kamps& Hoffmann, 2003). The Swine Flu did give some set back to the hospitality industry in 2009 when it was just reeling from the 2008 Mumbai terrorist attack at hotels. More than 450 died of Swine flu, and more than 13,000 were infected. There was a decline of around 10 per cent for the hotel industry (Pathak & Thakur, 2009). Therefore, India is dealing with a pandemic affecting its hotel and tourism industry to such a scale without having any previous experience. Therefore, discussions on guest expectations during these peculiar times are significant and will provide valuable insights to industry practitioners.

# 3 Methodology

The study was conducted using a structured questionnaire with many open-ended questions to draw meaningful responses. Hagström (2015), Rivano and Hagström (2017) have informed that "Qualitative questionnaires generate a rich material, useful for researchers from many disciplines. The material provided by the respondents is highly informative of various aspects of everyday life, past and present, and merits more attention from scholars". Hence, open-ended questions function quite similarly to interviews. Open-ended questions also provide respondents with flexibility in responding to their experiences and perceptions (Maguth & Yamaguch, 2019). Respondents were able to explain their perspective and responses well because of open-ended questions.

On the other hand, the author received feedback from two respondents that they found answering in an open-ended format lengthy because of lack of time. The data was collected with prior consent, and respondents agreed to answer the questions they were asked to fill the response against. Expert opinion from field researchers was considered, and suggestions were also drawn from the scholars to frame the questions, to make it valid and credible.

Since these are unique circumstances and the researches being done are rather formative, it is vital to understand the guests' perspective without prompting options to select from. Therefore, the questionnaire consisted of 25 questions, out of which ten were open-ended and took about fifteen to twenty minutes to complete. Judgment sampling was used to send a questionnaire through emails in the last week of May 2020 to people who take up travel and stay at hotels for business or leisure or both. The cover letter explained the criteria for filling the questionnaire, having stayed at hotels for business or leisure. Seventy-seven usable responses were received within ten days. Since the questions are qualitative and no new information was being identified, the authors concluded the sample size to 77 as according to Austin and Sutton (2014), "practitioners do not seek to generalise their findings to a wider population. Rather, they attempt to find examples of behaviour, to clarify the thoughts and feelings of study participants, and to interpret participants' experiences of the phenomena of interest, to find explanations for human behaviour in a given context".

The questionnaire had three parts. In the first part, the respondents answered eight objective questions related to the frequency of hotel stay, cancellations due to COVID, next travel intention, preference for hotel category for next travel, and the preferred mode of transport for an upcoming trip, level of trust for the choice of hotel for Covid-19 preparedness. The second section comprises four questions for qualitative responses related to their expectations from reception, housekeeping, food & beverage service areas, and public areas. The third section asked five qualitative questions and three objective type questions. The qualitative questions were - safety guidelines for guests that should be incorporated by the hotels; opinion regarding the use of new technological ways of service; reaction towards temperature checking and masks and gloves by employees; expected safety measures from kitchens to ensure food safety; measures that the hotels incorporate to enhance the mental and physical well-being of guests. This section's objective type questions were details of the information that hotels should provide; where would respondents like to have their meals; where should the hotels display the hygienic/safety guidelines and checks followed by them. The fourth section comprises five objective questions related to the guests' demographic details – gender, age group, marital status, profession, and children.

Content analysis was used to draw out themes from the qualitative data. The authors used colour-coding to identify various themes emerging. After that, responses were quantified using the frequency and percentage method. Since the research is qualitative and did not mean to test any kind of a theory instead build one. The hypothesis is developed to test the theory or reject the theory, and qualitative research is instead theory building, not theory testing. Riazi-Farza (2012) says that a hypothesis

is simply an unvalidated assumption and validated through quantifiable measures. That is only possible when we have to deal with the research in measurable steps.

## 3.1 Validity and Reliability

Validity and Reliability criteria are essential for quality; in qualitative paradigms, the terms Credibility, Neutrality or Confirmability, Consistency or Dependability, and Transferability are crucial criteria for quality (Lincoln & Guba, 1985). Reliability and validity are conceptualised as trustworthiness, rigour, and quality in the qualitative paradigm (Golafshani, 2003). Maxwell (1992) observes that the degree to which an account is believed to be generalisable is a factor that clearly distinguishes quantitative and qualitative research approaches. The qualitative data collected and processed to generate the themes and conclusions show that they can be generalised. Since many scholars suggest not to go for triangulation, which involves the mix of the qualitative and quantitative aspects only to check or test the theories, which is not the primary concern of the qualitative data. The credibility, neutrality, consistency of the data defines its validity. The information was collected with prior consent, and respondents agreed to answer the questions they were asked to fill the response against. Expert opinion from field researchers was considered, and suggestions were also drawn from the scholars to frame the questions, to make it valid and credible research.

# 4 Findings

Majority of the respondents are males (77.9%), within the forties age group (63.6%) and married (81/8%). Most of the work as professionals (57.1%) and have children (80.5%).

Table 4: Demographic details of respondents		
Gender	(F)	(%)
Male	60	77.9
Female	15	19.5
The other gender	0	0
Prefer not to say	2	2.6
Age Group	(F)	(%)
Teenager	4	5.2
The Twenties	7	9.1
The Thirties	2	2.6
The Forties	49	63.6
The Fifties	5	6.5
The Sixties	9	11.7
The Seventies	1	1.3
Eighty and above	0	0
Marital Status	(F)	(%)
Married	63	81.8
Unmarried	12	15.6

Table 4: Demographic details of respondents

Separated	0	0	
Prefer not to disclose	2	2.6	
Profession	(F)	(%)	
Self-employed	23	29.9	
Professional	44	57.1	
Student	6	7.8	
Homemaker	2	2.6	
Retired	1	1.3	
Children	(F)	(%)	
Have children	62	80.5	
Do not have children	15	19.5	

In the current crisis, which has shaken the tourism and hospitality industry, it is essential to revive. To achieve this, it is necessary to determine guest expectations from hotels in following safety measures post lifting of COVID 19 lockdowns in India. This would help gauge the guests' sentiments and prepare hotel management to provide guest satisfaction.

Table 5: Cancellation of a trip during COVID-19 lockdown

Cancellation of a trip during COVID-19 lockdown	(F)	(%)
Yes	32	41.6
No	45	58.4
Travel Intention	(F)	(%)
Within the next 3 months	13	13
Within the next 6 months	12	15.6
In 6 -12 months	9	11.7
Next year	10	12
Not decided	30	39
Once Covid-19 vanishes	6	7.8

It was found that 58.4% of respondents had to cancel their travel plans because of COVID 19, and 39% would take up travel in the next 12 months, while 39% had not decided about their trip yet.

Table 6: Preference of accommodation category for the up	pcoming travel	
Accommodation category	(F)	(%)
5 Star	35	45.5
4 Star	23	29.9
3 Star	5	6.5
Budget	4	5.2
Boutique	2	2.6
Others		
Personal guest house	3	3.9
Could be any, hygiene is more important	2	2.6
Home, as stranded away from home	1	1.3
	-	1.0

Table 6: Preference of accommodation category for the upcoming travel

1	1.3
1	1.3
(F)	(%)
24	31.2
41	53.2
3	3.9
2	2.6
2	2.6
2	2.6
1	1.3
1	1.3
1	1.3
(F)	(%)
44	57.1
28	36.4
5	6.5
	1 (F) 24 41 3 2 2 2 2 1 1 1 1 1 (F) 44 28

Based on Table 6, 45.5% would prefer to stay at 5 Star property, while 29.9% would prefer 4 Star property for their next travel. This signifies that guests prefer higher category hotels post-COVID 19 accommodation choice. Star rating can be considered a form of explicit service promise, and according to Zeithaml et al. (2006), explicit service promises are one of the factors that influence service expectations. Guests may infer that a hotel with a higher star rating will provide higher levels of hospitality. The majority of guests prefer a city hotel and a big hotel to medium and small size hotels. This desire is to maintain distances in larger properties with more open spaces.

Table 7: Preference for transport for upcoming travel
Transport

Transport	(F)	(%)
Flight	60	77.9
Personal Vehicle	13	18.18
Taxi	1	1.3
Depends on destination	2	2.6

The current study found the travellers' first choice of the transportation means to be an aeroplane, which is contradictory to Junxiong (2020) findings, who revealed that the people would prefer to travel by personal cars as their interest use public means of transport would be reduced. However, they added, "Even though this remains to be confirmed by further research on actual behaviours."

Table 8: Customer Expectation		
Expectation from Reception Services	(F)	(%)
Social distancing, strict sanitation, masks, gloves	40	51.9

Contactless check-in, check-out/ digitized payments Well informed/ polite/ welcoming personnel with humility/ promptness Safety awareness/adherence to SOP/ Employees in PPE kit & mask Guests providing updated certificates Glass separation between employees and guests Expectation from Housekeeping Services Regular cleaning/ fumigation/sanitisation of rooms, hygienic cleaning including	12 12 8 6 5	15.6 15.6 10.4 7.8
Safety awareness/adherence to SOP/ Employees in PPE kit & mask Guests providing updated certificates Glass separation between employees and guests Expectation from Housekeeping Services	8 6 5	10.4
Employees in PPE kit & mask Guests providing updated certificates Glass separation between employees and guests Expectation from Housekeeping Services	6 5	
Guests providing updated certificates Glass separation between employees and guests Expectation from Housekeeping Services	5	7.8
Glass separation between employees and guests Expectation from Housekeeping Services		-
Expectation from Housekeeping Services		6.5
	5	6.5
Regular cleaning/fumigation/sanitisation of rooms, hygienic cleaning including	(F)	(%)
	52	67.5
touchpoints wearing gloves & masks/ social distancing		
Strict adherence to SOPs/ WHO guidelines	12	15.6
Availability of sanitisers, masks, and gloves in rooms for guests	6	7.8
Daily change of bedsheets and towels	8	10.8
Unique Comments		
"Single housekeeping staff to be assigned to every room"	1	1.3
"Prefer Self Service"	1	1.3
"A note stating everything has been disinfected"	1	1.3
Room to be cleaned in my presence, ample soap, towels, &sanitiser in the	1	1.3
room. Clean sheets. No turndown or room cleaning during the stay.		
Preferably split units & no central AC"		
"Would like to know if the room was sanitised and was not occupied for at	1	1.3
least 2-3 days"		
Expectation from Food and Beverages Service	(F)	(%)
Cleanliness, hygiene, sanitisation, precautions	23	29.9
Use of masks, gloves by servers/ social distancing	19	24.7
Follow COVID SOP	7	9.1
Disinfect cutlery & crockery	6	7.8
No buffet, seating in either open space with distance or in room	6	7.8
Distance between tables to be increased	5	6.5
Food should be covered/ drinks could be served in packaged bottles	5	6.5
Fumigation and disinfection	4	5.2
Tasty food	3	3.9
Caring and empathetic staff	3	3.9
Use of technology for ordering and payments	2	2.6
Cooked food rather than raw	2	2.6
Unique Comments		
"PPE to be worn by staff"	1	1.3
"Fully packaged meals to begin with and bars etc should serve drinks from	1	1.3
mini disposable bottles"		
"Provide low-calorie food"	1	1.3
Expectation from Public Areas	(F)	(%)
Social distancing, crowd management, monitored capacity	26	33.7
Regular cleaning, sanitation, disinfection, fumigation (multiple times)	24	31.2
Pools should be closed till COVID persist	16	20.1
Strictly follow COVID protocols	5	6.5
Masks, gloves/ personal protective gear	4	5.2
	•	
Unique comments		

"Open gym and lawn yoga sessions must be encouraged all closed space	1	1.3
activities needs caution or best avoided"		
"Availability of touchless dispensers"	1	1.3
"In the lobby, the seats should be at a safe distance from each other, in the gym, it should be mandatory for guests to sanitise their hands before and after using any of the machines and/or weights"	1	1.3
"Demonstrations of preventive sanitisation of public areas of property"	1	1.3
Expectations regarding the safety guidelines for in-house guests	(F)	(%)
Cleanliness, hygiene, sanitisation, precautions	23	29.9
Use of masks, gloves, sanitisers	17	22.1
Maintain Social Distancing	17	22.1
Follow COVID protocols/ WHO	10	13
Temperature checks / Strict screening	10	13
Display of protocols	2	2.6
Unique Comments		
"Usage of Arogya Setu App (COVID-19 app, referred by Govt. of India)"	1	1.3
"Automated hand sanitisers should be available through-out"	1	1.3
Presence of: Resident doctor, isolation room/ wing, an ambulance	1	1.3
"Avoid closed area activities, social meetings to be avoided at rooms	1	1.3
preferably done outdoors. Adopt a cashless mode of payment"	-	1.5
"Pamphlets & literature to be provided for guests on safety & health	1	1.3
measures and precautions. reassurance from hotel management"	T	1.5
"Training of staff, display of protocols and strict safety audit checks"	1	1.3
"They should certify with a medical certificate before check-in"	1	1.3
"No touch with a lot of precautions during housekeeping. Follow highest	1	1.3
standards as per industry practice"	т	1.5
Expectations from hotel in ensuring the mental and physical well-being of	(F)	(%)
guests	(' )	(70)
Clear Communication/ information and proactive approach / action	20	26
Maintaining cleanliness, hygiene, sanitation	16	20.8
Follow COVID protocol/ SOP/ Arogya Setu app	13	20.8 16.9
Outdoor Yoga & Meditation sessions in small groups	10	13
Less staff/ human touch (more technology)	6	7.8
	6	7.8
As mentioned in previous sections/ all previous suggestions Unique Comments	0	7.0
•	1	1 2
"Immunity increasing booster drinks to be provided to guests"	1	1.3
"Actions taken by the hotel against the spread of Corona be displayed at the	1	1.3
reception. Do's and don'ts to be adhered to by guests should also be		
displayed at recess and also be given in the form of leaflets. Guests may be		
asked to share details of "AarogyaSetu" app and also self-declaration of		
maintaining COVID protocols may be taken"		4.2
"Provide hot herbal tea at arrival, let them before arrival the steps you are	1	1.3
taking to ensure their safety, communicate often"		
"Ensure sanitisation of touch points at regular intervals "	1	1.3

Respondents are ready to trust higher categories and more prominent brands with COVID 19 preparedness. However, those people have not decided yet and would prefer to wait and watch and read reviews before taking up travel. From the hotel reception, housekeeping, food, and beverage service, kitchen, public areas, guests expect the hotels to ensure regular cleaning, sanitation, disinfection, fumigation (multiple times), social distancing, usage of masks, and gloves. Some respondents' suggestions are not feasible, for example, a comment "Single housekeeping staff to be assigned to every room".

Similarly, the current study reveals that clear and transparent communication would help resolve many issues in COVID-19 times at the hotels, especially in leading guests to remain calm and stress-free. Outdoor Yoga and meditation in small groups with social distancing would be calming as well. Apart from preparing food cleanly and hygienically, the guests expect the kitchen to avoid service raw food and ensure the procurement of raw materials is done from approved sources. The display of COVID 19 guidelines, protocols, and hotel efforts should be placed at reception, inside and outside guest rooms, and at different places throughout the property. All these findings lead us to believe that people want to take up travel and stay at hotels that will take appropriate measures and ensure guests' safety and security.

Table 9: Customer Opinion		
Opinion on the use of new technological ways of service	(F)	(%)
Should be incorporated/need of the hour/ Very beneficial	55	71.4
Do not support it/ hospitality needs human touch/ confusing	7	9.1
Unique Comments		
"Technical machines need more sanitisation"	1	1.3
"Hospitality means human touch and no technology can replace that"	1	1.3
"There are many ways to avoid human touch to avoid COVID spread such as	1	1.3
paddle touch in the lifts (elevators) instead of buttons, sensor-based solutions		
to avoid human touch and AI-based solutions"		
"Selectively yes, but it may simultaneously cause unemployment and lack	1	1.3
human touch"		
"This is easier said than done. Will take a lot of time for awareness and	1	1.3
deployment"		
"It should be implemented but with proper public education"	1	1.3

Guests would like the hotels to use technology to provide contactless service throughout the guest cycle from pre-arrival, arrival, stay, and departure, which resonates with thoughts of Sigala (2020), who expresses, "Technology is at the core of solutions for combating the COVID-19 and reopening tourism and the economy (e.g., mobility tracing apps, robotised-AI touchless service delivery, digital health passports, and identity controls, social distancing and crowding control technologies, big data for fast real-time decision-making, humanoid robots delivering materials, disinfecting and sterilising public spaces, detecting or measuring body temperature, providing safety or security), while technology is seen as a panacea to our COVID-19 driven-needs to normalise surveillance, to ensure health and safety, to collect and analyse personal data for fast decision-making."

Table 10: Preference for the location of meal consumption at a hotel			
Location	(F)	(%)	
In the guest room	33	42.9	
At the open space of the restaurant	33	42.9	
Inside restaurant	6	7.8	
Would prefer not to have hotel meals	5	6.5	

Most of the guests would prefer to have meals either in the room or in the restaurant's open spaces (outdoor). This preference for open spaces has also been endorsed by Honey-Roses et al. (2020), who informs, "Service industries and restaurants might need to reorganise themselves to accommodate for more outdoor spaces where the risk of transmission is lower, or locate fewer tables located further apart." Guests would not mind if the temperature checks were being conducted upon entry at the hotels or resorts. Obiora & Kpakol (2015) described for Ebola crisis that substantial tasks could be performed successfully through effectual and prompt communication.

#### 5 Study Implications

Similar to the expectations of Gössling et al. (2020) and Haywood (2020), even in India, domestic tourism has started with the ease of lockdown. To restart the business, the restrictions on inter-district, inter-state and international travel has been uplifted by many states like Uttarakhand, along with the hotels and homestays permitted to open outside the containment zone(Handu, 2020). According to a report by Anarock, the Indian hotel industry is showing early signs of recovery, with the occupancy in the Indian hotels as 26 per cent in September 2020, an improvement from 10 per cent in April 2020 (Anarock, 2020). It is also evident from the data collected in this study that guests would take up travel when the restrictions are lifted. After the unlock, the hospitality industry has witnessed a slight recovery, mainly due to domestic leisure travellers (Network, 2020). This means that India's travel and tourism industry will pick up its momentum from 3 to 12 months window. With this knowledge, this study has practical implications for hotel employees and hotel managers. This is the ideal time to market to the consumers. Therefore, hotels should focus on target marketing. The hotels should communicate their efforts in maintaining the COVID-19 protocols to gain the confidence of guests.

The Situational Crisis Communication Theory (SCCT) was created to analyse which crisis response strategy would work best for managers in a situation of crisis to reestablish an organisation's reputation in the most suitable way (Coombs, 2007). Every individual property should develop the need to build the best communication and marketing strategy with optimum coverage amongst stakeholders. Transparency in communication is essential as guests want the hotels to provide information on daily occupancy, guests with Covid-19, hygiene, and disinfection practices. Hotel managers and employees need to focus on the guests individually by attending to their unique requirements considering the COVID-19 situation and striving to meet or even exceed their expectations.

To maintain social distancing, the hotels' employees must work only in staggered shifts in this recovery period. There should be strict monitoring of the COVID SOPs and protocols. A doctor in the hotel or on-call would help reduce the guests' anxiety, which arises because of the nature of the pandemic. The restaurant managers must ensure that tables and chairs are spaced out, and if there is space outside the restaurants, that too should be used for dining service and fulfilling other guest expectations. In-room dining options should be increased, and service should be re-engineered as 42.9 % of guests prefer to have meals inside the safety of their rooms. The time taken for in-room dining could be reduced by having more servers assigned who safely and securely carry food.

Further, the service should be as contactless as possible by incorporating sealed food in a trolley outside the guestroom door after informing the guest. Efforts and investment should be considered to upgrade technology for social distancing, ease in operations, better coordination, and communication. Highly sophisticated mobile apps and chatbots would help in better service quality and guest satisfaction. The hotel managers should measure guest satisfaction regularly in the post COVID period. Pizam (1997) has also pointed out that guest satisfaction questionnaires should be examined weekly. The management would be able to make apt strategies based on feedback. Hotels should also consider mind and body health management by tying up with Yoga practitioners. India is the land of spiritualism, Yoga, and Ayurveda. These components should be included in guests' stays in meditation, yoga practice, and immunity-boosting drinks, herbs, and food items.

Outdoor Yoga and meditation in small groups with social distancing would be calming as well. Apart from preparing food cleanly and hygienically, the guests expect the kitchen to avoid service raw food and ensure the procurement of raw materials is done from approved sources. The display of COVID guidelines, protocols, and hotel efforts should be placed at reception, inside and outside guest rooms, and at different places throughout the property. All these findings lead us to believe that people want to take up travel and stay at hotels that will take appropriate measures and ensure guests' safety and security. Quality circles should increase their vigilance in both fronts of the house and back of the house areas. The hotel employees should also undergo certification for COVID-19 preparedness apart from regular training being conducted across the departments. This will help gain the customers' trust and loyalty and support, adjusting and adapting the hotel's functioning by transformation and up-grading in the new normal. It can also stimulate the hotel industry worldwide to understand health crisis requirements, formulate anti-pandemic strategies, and aspire to bounce back effectively. Thus, it will allow the hotels to survive the crisis and mitigate the impact of such events in the future by reaching a new equilibrium.

#### 5.1 Limitations of the Study

This study is neither conclusive nor a concluding effort merely because of its lesser sample size and the subjective nature of responses. Because of the non-random nature of the sampling technique, findings could be incomplete and may not be generalised. But because of the current pandemic's changing dynamics, the study will provide a benchmark to the hotel management. It would give a clearer picture of the general expectations of guests for current and near-future travel plans. This makes the findings rather crucial as there is a shortage of good research and actual data to learn from in the current predicament. Future research could focus on the quantitative aspect of the study, and hypotheses could be formulated. Since this kind is limited in this area concerning the COVID-19, researchers could use the information to generalise the findings further.

#### 6 Conclusion

COVID-19 has disturbed the demand-supply equilibrium, and with this disruption, it can be seen that the tourism, hospitality, and aviation sectors are among the worst affected industries that are facing the maximum impact of the current crisis (Gössling, 2020). With most of the restaurants struggling and some of them shutting down entirely all across the world, and a belief that social distancing will have to continue to be a crucial tactic to face COVID-19 in most nations for many months, it could be assumed that restaurants will experience difficulties recuperating, significantly as they typically have restricted cash flow and little net earnings. Those restaurants that are allowed to operate as takeaways and need lesser staff offer some respite (Gössling, 2020). According to Haywood (2020), when the solutions to going back to having high demand scenarios like the pre-COVID era are not conceivable, all businesses that serve travelers understand that they have to adjust according to social distancing norms, the business models will have to realign. In such times, domestic tourism will be the only hope where the travellers will mostly be locals, with rationed trips.

This study's importance and originality are that it offers preliminary insights into the expectation of guests in the hotel industry during and after the COVID-19 pandemic. Considering the crisis's unpredictability, further studies can be carried out to understand better guests' willingness to stay in the hotel after the pandemic. It will help practitioners and academicians to predict future health crisis mitigation strategies. To evaluate the performance, a longitudinal study can be conducted to see the hotel industry's adaptive capacity. For deeper comprehension, future studies can investigate using quantitative techniques, which will further enrich the literature. As propounded by Rivera et al. (2016), expansion of tourism and contentment are directly proportional. Tourism activities should be resumed to bring back normalcy in society. In previous occurrences, tourism is like before in a rough time frame of one to two years once the COVID-19 pandemic is over. Excess globalisation has brought in vulnerability to our systems, leading to different disasters. Therefore, this is an apt time to practice localisation (Everingham & Chassagne, 2020; Higgins-Desbiolles, 2020).

The times are significantly different from previous wars, calamities, and pandemics, but with such a disruptive phenomenon, there is always an opportunity for course correction Sigala, (2020). This calls for innovation, inclusiveness, minimalism, and cautiousness to make tourism sustainable. This study is significant because it has gauged guest expectations from hotel stays post lifting of COVID-19 lockdowns, foreseeing the preparations regarding guest stays, presenting the practices that guests expect, which would be highly informative for the stakeholders. The findings have revealed that Indians are ready to travel, and they trust profitable brands to take care of their accommodation well. Those who adapt and change according to the need of the hour will survive; after all, it is always about survival of the fittest. People will travel and require an accommodation, but they will choose places that align with their needs. There is still light behind the clouds!

## 7 About the author

Dr Sarah Hussain is the Head and Associate Professor, Department of Tourism and Hospitality Management, Jamia Millia Islamia (A Central University) at New Delhi, India. She holds a PhD degree in hospitality. Previously, she served as the Principal of Banarsidas Chandiwala Institute of Hotel Management & Catering Technology, New Delhi. She has Chaired India International Hotel, Travel & Tourism Conference (2019) and Co-chaired International Conference on Transformational Tourism (2020). She brings immense experience in imparting Hospitality Education is considered an authority in Hospitality Management (Rooms Division Management, Revenue Management, Research Methodology, Hospitality Marketing & Sales, and Business Communication).

Firdous Ahmad Shah is a Research Scholar in the Department of Tourism and Hospitality Management, Jamia Millia Islamia (A Central University) at New Delhi. He is working on Tourism Crises.

Saima Kareem is a Research Scholar in the Department of Tourism and Hospitality Management, Jamia Millia Islamia (A Central University) at New Delhi. She is working on Tourism Resilience.

## 8 References

- Anarock, (2020). RevPAR Change in Key Markets Key Highlights connect with us (Issue October). https://api.anarock.com/uploads/research/HVS ANAROCK\_H2O\_Oct 2020 Edition.pdf
- Ariffin, A. A. M., &Maghzi, A. (2012). A preliminary study on customer expectations of hotel hospitality: Influences of personal and hotel factors. *International Journal of Hospitality Management*, *31*(1), 191-198.
- Austin, Z., & Sutton, J. (2014). Qualitative research: Getting started. *The Canadian journal of hospital pharmacy*, 67(6), 436.
- Chaturvedi, A. (2020, May 7). FHRAI initiates nationwide training programme on COVID-19 preparedness & guest safety. Retrieved from https://economictimes.indiatimes.com/: https://economictimes.indiatimes.com/industry/services/hotels-/-restaurants/fhrai-

initiates-nationwide-training-programme-on-covid-19-preparedness-guestsafety/articleshow/75607953.cms?from=mdr

- Coombs, W. T. (2007). Protecting organisation reputations during a crisis: The development and application of situational crisis communication theory. *Corporate reputation review*, *10*(3), 163-176.
- Everingham, P., & Chassagne, N. (2020). Post COVID-19 ecological and social reset: moving away from capitalist growth models towards tourism as BuenVivir. *Tourism Geographies*, 1-12.
- Golafshani, N. (2003). Understanding Reliability and Validity in Qualitative Research. 8(4), 597–606.

Gössling, S., Scott, D., & Hall, C. M. (2020). Pandemics, tourism and global change: a rapid assessment of COVID-19. *Journal of Sustainable Tourism*, 1-20. https://doi.org/10.1080/09669582.2020.1758708

Goyal, M. (2003, July 21). SARS epidemic disrupts China's economy, windfall for Indian businesses. Retrieved from https://www.indiatoday.in: https://www.indiatoday.in/magazine/economy/story/20030721-sars-epidemic-disruptschinas-economy-windfall-for-indian-businesses-792228-2003-07-21

Hagström, C. (2015). Questions and answers in the archives: knowledge production through open-ended questionnaires. In 12th SIEF congress, Zagreb, Croatia.

Handu, A. (2020, August 10). States in India are trying to change the way tourists travel. *Outlook Traveller*.

https://www.outlookindia.com/outlooktraveller/explore/story/70753/indias-next-steps-in-travel-and-tourism-in-the-future-2020

Haywood, K. M. (2020). A post-COVID future: tourism community re-imagined and enabled. *Tourism Geographies*, 1-11. https://doi.org/10.1080/14616688.2020.1762120

Higgins-Desbiolles, F. (2020). Socialising tourism for social and ecological justice after COVID-19. Tourism Geographies, 1-14. https://doi.org/10.1080/14616688.2020.1757748

Hussain, S., and Khanna, K. (2016). A Study on Recent Trends for Guest Satisfaction in Selected Hotels of Delhi. *Prabandhan: Indian Journal of Management*, 9(8), 48 – 58.

Hussain, S. (2017). Guest Satisfaction in the Five Star Deluxe hotel of Delhi Determinants and Challenges. (Doctoral Thesis). Retrieved from http://hdl.handle.net/10603/189029

Hussain, S., and Khanna, K. (2019). Guest Satisfaction: A Comparative Study of Hotel Employees' and Guests' Perceptions. *International Journal of Hospitality & Tourism Systems, 12* (1), 83-93.

Honey-Roses, J., Anguelovski, I., Bohigas, J., Chireh, V., Daher, C., Konijnendijk, C., ...
 Nieuwenhuijsen, M. (2020, April 21). The Impact of COVID-19 on Public Space: A Review of the Emerging Questions. https://doi.org/10.31219/osf.io/rf7xa

Jain, V. a. (2020, April 25). Impact of Covid-19 on Independent/Budget Hotel Industry in India. Retrieved from http://bwhotelier.businessworld.in/:

http://bwhotelier.businessworld.in/article/Impact-of-Covid-19-on-Independent-Budget-Hotel-Industry-in-India/25-04-2020-190282/

Junxiong Li, Thi Hong Hai Nguyen and J. Andres Coca-Stefaniak, Annals of Tourism Research, https://doi.org/10.1016/j.annals.2020.102964

Kamps, B. S., & Hoffmann, K. (2003). SARS reference—07/2003.

Khanna, A., & Tyagi, G. (2019). 2019 Indian Hospitality Trends & Opportunities. Gurugram: Hotelivate.

Khanna, A. (2020). COVID-19 & Its Impact On The Indian Hotel Industry. New Delhi: Hotelivate.

Klasko, S. G. (2020, May 4). What hotels must learn from hospitals for the new reality of tourism. Retrieved from https://www.weforum.org/: https://www.weforum.org/agenda/2020/05/lessons-from-hospitals-to-the-hospitalitysector-covid-19/

livemint.com. (2020, May 6). *Covid-19: What will it take for a revival of the hospitality industry*. Retrieved from https://www.livemint.com/: https://www.livemint.com/companies/news/covid-19-what-will-it-take-for-a-revival-of-

the-hospitality-industry-11588748217033.html

Mack, R., Mueller, R., Crotts, J. and Broderick, A. (2000). Perceptions, corrections, and defections: implications for service recovery in the restaurant industry. *Managing Service Quality*, 10 (6), 339-46.

Maxwell, J. A. (1992). *Understanding and Validity in Qualitative Research*. Harvard Educational Review; Fall 1992; 62, 3; Research Library Core pg. 279

Mallapur, C. (2020, June 4). Job Loss Looms Over Millions As COVID-19 Brings Tourism To A Standstill. Retrieved from https://www.indiaspend.com/:

https://www.indiaspend.com/job-loss-looms-over-millions-as-covid-19-brings-tourism-to-a-standstill/

Ministry of Health and Family Welfare, Government of India. (2020, June 5). *Ministry of Health and Family Welfare, UPDATES ON COVID-19, SOPs for operation of public and semi-public environments to resume social and economic activity released.* Retrieved from https://www.mohfw.gov.in/:https://www.mohfw.gov.in/pdf/5SoPstobefollowedinHotelsa ndotherunits.pdf

Mishra, R. R. (2020). Indian Tourism: The Great Patient of COVID-19 Pandemic. *The Corporate International [ISSN: 2581-6438 (Online)]*, 4(1), 26–35.

Network, T. N. (2020, November). Hotel Occupancy In India Improved From 10% In April To Almost 26% In Sept 2020: HVS Anarock. *Travel Trends Today*.

NEWSHOUR. (2019). *The hospitality Industry in India: An overview*. Retrieved from https://www.newshour.press/: https://www.newshour.press/hospitality-industry-in-india-an-overview/

O'Neil, M., Watson, H. and McKenna, M. (1994). Service quality in the Northern Ireland hospitality industry. *Managing Service Quality*, 4 (3), 36-40.

Obiora, J. N., & Kpakol, A. G. (2015). Ebola response strategies and employee trust: A survey of selected hotels in Rivers State. *European Journal of Business and Management*, 7(5), 33-40.

Pathak, K., & Thakur, N. (2009, June 22). Swine flu worries hotel, tourism players. Retrieved from https://www.business-standard.com/: https://www.businessstandard.com/article/companies/swine-flu-worries-hotel-tourism-players-109062200057\_1.html

Pizam, A. (1997). Customer satisfaction and its measurement in hospitality enterprises: a revisit and update. International Journal of Contemporary Hospitality Management, 28 (1), 2 – 35. https://doi.org/10.1108/IJCHM-04-2015-0167

Riazi-Farzad, Bijan. (2012). Re: Hypothesis in Qualitative Research. Retrieved from:

https://www.researchgate.net/post/Hypothesis\_in\_Qualitative\_Research/50c4c0c4e24a4639 3000073/citation/download.

Rivano, J., & Hagström, C (2017). Qualitative questionnaires as a method for information studies research. *Information Research*, 22(1), CoLIS paper 1639. Retrieved from http://InformationR.net/ir/22-1/colis/colis1639.html

- Rivera, M., Croes, R., & Lee, S. H. (2016). Tourism development and happiness: A residents' perspective. *Journal of Destination Marketing & Management*, 5(1), 5-15. https://doi.org/10.1016/j.jdmm.2015.04.002
- Sigala, M. (2020). Tourism and COVID-19: impacts and implications for advancing and resetting industry and research. *Journal of Business Research*, Vol 117, 312–321. https://doi.org/10.1016/j.jbusres.2020.06.015
- STR: India daily hotel occupancy drops to 11%. (2020, April 3). Retrieved from https://str.com/: https://str.com/press-release/str-india-daily-hotel-occupancy-drops-11
- UNDP. (2020, May 28). Coronavirus disease COVID 19 pandemic. Retrieved from https://www.undp.org/: https://www.undp.org/content/undp/en/home/coronavirus.html
- WHO. (2020, May 28). Naming the coronavirus disease (COVID-19) and the virus that causes it. Retrieved from https://www.who.int/: https://www.who.int/emergencies/diseases/novelcoronavirus-2019/technical-guidance/naming-the-coronavirus-disease-(covid-2019)-andthe-virus-that-causes-it
- WHO-India. (2020, January 31). India Situation Report 1. Retrieved from https://www.who.int/: https://www.who.int/docs/default-source/wrindia/india-situationreport-1.pdf?sfvrsn=5ca2a672\_0
- Zeithaml, V.A., Bitner, M.J., Gremler, D.D., 2006. Services Marketing. Integrating Customer Focus Across the Firm, 4th ed. McGraw-Hill, New York.