EXIT STRATEGY

Preparing to restart Travel and Tourism
This paper has been prepared by the European Tourism Manifesto alliance, which gathers more than 60 European public and private organisations, covering the whole tourism value chain and beyond. The alliance calls on the European Union for action on key policy priorities for the tourism sector. For more information, please visit tourismmanifesto.eu.

The Secretariat and Chairmanship of the alliance are currently held by the European Travel Commission (ETC). For any enquiries, please contact us via tourismmanifesto.eu/contact/.

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Introduction

COVID-19 incidence remains high in European countries, although the overall situation is slowly improving\(^1\). A further threat is posed by the appearance and the spread of virus variants\(^2\). We understand that important health measures must be implemented at national level and note the latest Council Recommendation “strongly discouraging” or “discouraging” non-essential travel to and from dark-red and red regions\(^3\) within the EU.

However, the vaccination campaigns are increasingly providing protection to the most vulnerable population groups and our health systems will come under less pressure in the coming weeks and months. In addition, the spring and summer will probably lead to less virus transmissions, as was the case in 2020. Against this backdrop, we need to collectively prepare for a coordinated and smooth reopening of travel and tourism, in time for the critical 2021 summer season.

The European Tourism Manifesto alliance calls for the development of a concrete EU roadmap to restart travel and tourism. Such a roadmap should be developed by the EU in close cooperation with industry and social partners, primarily via a newly created Commission Task Force for the Restoration of the Free Movement of People. This Task Force should base itself on risk-based and data-driven assessments to identify the conditions and prospective scenarios under which current restrictions to international travel could be reconsidered and ultimately lifted in a coordinated manner across the EU and beyond. In particular, it would track the progress and impact of ongoing vaccination campaigns as well as mitigation measures such as health safety measures, testing and quarantines on risk levels involved with intra-EU and international travel. This roadmap will need to be agile and updated on a regular basis.

This paper details some recommendations that could be integrated in such a roadmap, supported by travel and tourism stakeholders.

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2 The United Kingdom identified a variant called B.1.1.7, in South Africa another variant called B.1.351, in Brazil, a variant called P.1
Recommendations for an EU roadmap to restart travel and tourism

1) Coordination of travel restrictions

- An improved and effective European coordination of travel restrictions and requirements is urgently needed, to facilitate the restart of travel and tourism – representing 9.5% of EU GDP – and offer predictability to travellers as well as to travel and tourism businesses and their workers. We support the various initiatives launched by the European Commission over the last few months and call on Member States to better align their measures.

- Once the epidemiological situation allows, efforts must be aimed at removing restrictions in a coordinated way, in time for the critical 2021 summer season. The necessary preparations must start now. This should also create more stability and predictability, as one of the key elements affecting consumer and business confidence in travelling is the high variability of rules over the last few months and the introduction of new restrictions at short notice.

- Blanket travel bans or blanket negative travel advisories should be avoided. Travel restrictions and advisories from the origin country/region should be tailored to the actual situation in the destination region.
  - For intra-EU travel, all Member States should follow the same approach and make the same assessment – the definition of a colour zone by ECDC should trigger the same consequences for (lifting) travel restrictions. The weekly ECDC map set up back in October 2020 and updated in February 2021 is not sufficiently detailed: this could be refined on a regional basis (including on a per-island basis in the case of touristic archipelagos such as the Greek islands, Balearics or Canary Islands, Madeira and Azores).
  - For international travel, travel restrictions and advisories should also be tailored to the epidemiological situation in the destination rather than imposing blanket travel bans.

- The alliance also calls on ECDC – together with national authorities – to regularly update the underlying criteria to the evolving situation as vaccination programmes are rolled out throughout the EU, moving toward a more risk-based approach. Similarly, once a certain percentage of sterilising immunity has been achieved and the vulnerable population is vaccinated, travel restrictions should be lifted, as the risk of spreading the COVID-19 disease will become very low. This would allow governments to ensure that their health care systems can cope with COVID-19 cases.

- The restoration of international travel – from outside Europe to the Schengen area and vice-versa, should remain a priority and travel restrictions should be lifted in a coordinated manner. The role of the European Commission in regularly updating the so-called “EU White List” will be key.

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4 The sector also provides jobs to 22.6 million people; WTTC, EU 2020 Annual Research: Key Highlights (2019 data) - https://wttc.org/Research/Economic-Impact
5 “By restricting international movement of people, travel bans have a broader impact than their direct effect on tourism and also increase the delivery cost in all services. OECD estimates suggest that closing borders to passenger travel could increase trade costs by an average of 12% in the medium term across services sectors and countries”; OECD, 22nd January 2021 - https://read.oecd-ilibrary.org/aggregate-report/9f313d0e5e6a459695d54f4780b67f79
6 ‘Sterilising immunity’ means that the immune system is able to completely prevent a virus from replicating in your body. Thus the vaccine would not only prevent a person from being infected by the disease, but it would also stop that person from transmitting the disease. See for instance WHO Health Bulletin: https://www.who.int/bulletin/volumes/86/2/07-040089/en/
• When Member States decide to impose additional travel restrictions or alter the current rules, they should notify the European Commission and other Member States prior (for instance 5 days in advance) to imposing these new or adapted restrictions and procedures. This is important for other Member States to anticipate and safeguard travel flows (both passengers and goods) as much as possible. It is also essential that travellers, as well as travel and tourism stakeholders are informed in advance of their travel conditions, in a more transparent and clear approach.

• The Re-open EU platform\(^7\) should be kept updated by the Commission and Member States with the aim to provide trustworthy and timely information for consumers, as well as travel and tourism stakeholders.

2) Testing

• The effective tools to success in the global fight against COVID-19 are a combination of the implementation of sectoral health protocols\(^8\), timely communication with passengers and travellers, online and standardised passenger locator forms, interoperable systems or platforms to aggregate data and information as well as certificates for testing, vaccination and immunity, reliable and affordable testing programmes and effective contact tracing.

• We encourage national authorities to engage in strong communication campaigns towards travellers, to ensure adherence to the rules not only whilst travelling but also at their destination. National campaigns should be supported by clear and harmonised messages (from the European Commission). We will do our part in disseminating these messages, as this is key to ensuring safe travel and tourism activities in the coming months.

• We also call for a harmonised EU framework for travel-related testing, which should encompass the following:
  - Members States to ensure affordable testing and sufficient capacity
  - mutual recognition of tests between Member States and continuous work at international level for the mutual recognition of tests
  - validate the use of antigen and other rapid tests for travel and tourism purposes\(^9\), and regular assessment of the accepted tests as test efficacy improves (LAMP\(^10\) for instance)
  - standardisation of test certificates to facilitate digitisation of the verification process and avoid frauds. The verification of test certificates shall remain the responsibility of national authorities.
  - clear rules for short-duration travel (under 72h)
  - clear rules on consequences negative test results (either passenger to avoid quarantine, or reduce its duration)

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\(^7\) https://reopen.europa.eu/en


\(^10\) Loop-mediated isothermal amplification test, LAMP
• In their Council Conclusions of 11th December 2020\textsuperscript{11}, EU leaders have tasked the European Commission to propose a Recommendation on the use of antigen testing and mutual recognition of test results. We call on both institutions to urgently expand on the use of antigen tests in the context of travel, which was not included in the Council Recommendation of 20th January 2021\textsuperscript{12}.

• Testing should not be viewed as a permanent travel requirement and should be removed once assessments of risk have determined it is safe to do so.

3) E-Health certificates

• **EU coordination of national initiatives is urgently needed**, as we want to avoid a situation where we have 27 different certificates covering testing, vaccination and/or immunity. We call on DG SANTE to take the lead and work with DG MOVE and DG GROW on an interoperable European system that would enable a fast and digital verification of the vaccination and/or testing status of the traveller. Some Member States have already announced their own initiative – they need to be involved from the start to avoid repeating the fragmentation of the Passenger Locator Form (PLF).

• The European Tourism Manifesto alliance calls for the rapid establishment of a digital EU verification system for test and vaccination. This should also be aligned with international standards: e.g. WHO, WEF (Common Pass) and IATA (Travel Pass) are already working on this.
  o A common set of international standards will help governments assess that a particular person has an approved test or vaccine or immunity certificate and meets the entry requirement from a particular country.
  o Priority should be given to remote verification, so that customers can ensure they are compliant with travel requirements before leaving home, thus reducing waiting time and queues (e.g. in airport terminals).
  o A first step would be to propose a European standard for test certificates, including a specific minimum data set and a standardized format in which to display this data.
  o In addition, the Commission should also consider work being done by IATA, ICAO, OECD and other organisations and countries so that as much standardisation and interoperability as possible can be achieved.
  o This solution should be user-friendly, GDPR-compliant and facilitate travel. Whilst these solutions are still being developed, existing tools (such as national official coronavirus apps or the existing WHO yellow card) should be used as a verification method in the meantime.

• **Vaccination, or vaccination certificates, should not be compulsory for travelling (once it is widely available), but vaccinated travellers or those with proved immunity should be exempted from entry bans, testing and quarantine** – in accordance with the latest scientific insights on the reduced ability of those vaccinated to still spread the virus\textsuperscript{13}.

\textsuperscript{11} https://www.consilium.europa.eu/media/47296/1011-12-20-euco-conclusions-en.pdf
4) Coordinated reopening of tourism activities

Once the health situation allows it, it is crucial to restart tourism and leisure activities alongside re-establishing freedom of movement. Governments should implement protocols for health and safety that seek to protect all tourists and workers, allowing for a restart of tourism activities using a risk-based approach.

A harmonised approach is necessary, for instance based on the EU Guidance for the progressive resumption of tourism services issued on 13th May 2020\(^4\). We urge the European Commission to develop this further with Member States and consider all subsectors of tourism. The alliance stands ready to work with the European Commission and Member States to achieve this.

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ANNEX – Operational recommendations

1. Towards a harmonised EU Testing Protocol

Based on the colour-coded map updated on a weekly basis by ECDC, the quarantine and testing requirements should be the same for all travellers who are travelling to and from a specific risk-area. The European Tourism Manifesto alliance believes that travel reopening would be further supported by a harmonised EU Testing Protocol.

Due to low-risk exposure, transport workers should be exempted from quarantine and testing obligations\textsuperscript{15}. Travellers who stay less than 48h in a country could also benefit from a softer regime.

In addition, all travellers from all risk areas should fill in a digital Passenger Locator Form (PLF), which allows Member States to proceed with contact tracing. We recommend Member States to harmonise and digitalise their PLF as swiftly as possible.

2. Considerations for developing e-health certificates

The European Tourism Manifesto alliance is detailing here a series of recommendations for policy makers to take into consideration in setting up e-health certificates covering testing and vaccination status. Overall, the EU should develop a long-term strategy, with a perspective to cover similar diseases or threats in the future.

An e-health certificate constitutes a digital certificate or credential provided by a certified issuer, proving the holder’s health status. This certificate may be required to perform certain activity (travelling) or to grant access to a certain area or zone (crossing a border or entering a building).

This certificate may include:

- Passenger’s health declaration
- The result of a temperature check
- The result of a COVID-19 test (PCR, antigen, antibody or other)
- A COVID-19 vaccination proof (if available)
- Ready-to travel or Not-ready-to-travel status
- Other relevant information (vaccine exemption, immunity etc)
- Validity of test (depending on the above, for example 48 or 72 hours for a negative PCR test) and/or validity of vaccination

Such a credential should be linked to the holder via an official ID including a series of information, notably:

\textsuperscript{15} As per the Council Recommendation from 1\textsuperscript{st} February 2021, point 6: By way of derogation, transport workers and transport service providers should in principle not be required to undergo a test for COVID-19 infection - https://www.consilium.europa.eu/media/48152/st_5712_2021_rev_2_en.pdf
• Family name
• First name
• Birth date
• Passport or ID number
• Nationality
• Address and contact details

This information should allow the verifier to authenticate the credential and match it with the holder (as it is currently done with electronic passports and boarding passes).

The checks of health certificates may be performed in multiple potential points of testing and checks before and during the passenger journey:

• Before entering the terminal
• At check-in
• At security check
• At border control
• At the boarding gate
• On arrival

Requirements for the generalised use of e-health certificates for travel

Availability. The use of existing industry platforms will minimise complexity and costs, maximise investments and enable a safe and seamless journey.

Accessibility. Some travellers are not equipped with digitally enabled devices and they should not be left aside. Thus, it should be possible to deliver a paper health certificate, or to allow passengers to print it. As boarding passes, health certificates should be available in multiple formats (PDF, email, SMS or printed on paper).

Speed. The verifier should be able to quickly check the authenticity of a health certificate. This means that the health certificate must be machine readable (e.g. with a barcode scanner device) and its checking should be available in the device used for the verification (or the computer linked to it).

Automation. In addition to the verification of the integrity of the health certificate, the verification process should also automatically and seamlessly check that the issuer is legitimate and accredited.

Trustworthiness. It should be secured and be able to detect counterfeits.

Interoperability. As each Member State or Third country may decide on a given solution, it is essential to guarantee the verification of different formats and issuers.

Verifiability. This should be possible to be done off-line in case the computer systems or the internet are down for some time. The off-line verification is important in order not to stop or delay the verification process in case of connection problems.
**Compliance with GDPR.** Health certificates need to comply with all the GDPR requirements and those of third countries. Checks must be done without the need to access the issuer’s database or the holder’s health file. This means that the issuance and the verification processes must be totally independent. This is a very important aspect for security and privacy reasons.

**Decentralisation.** The emission and the verification should be done in a fully decentralised way, without the need for interconnections between the different stakeholders.

**Scalability.** The scalability of different solutions will need to be carefully assessed due to the high number of certificates to be issued and verified.

**Recognition.** Ideally, e-health certificates should be accepted and recognised first at European level and then internationally.