



Going beyond the curve: Strategic measures to recover hotel activity in times of COVID-19

Aurora Garrido-Moreno^{a,*}, Víctor J. García-Morales^b, Rodrigo Martín-Rojas^b

^a Faculty of Social Studies and Social Work, University of Malaga, Campus Teatinos (Ampliación), 29071 Málaga, Spain

^b Faculty of Economics and Business, University of Granada, Campus Universitario de Cartuja, 18071 Granada, Spain

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ABSTRACT

Hospitality firms are facing unprecedented challenges on a global scale. The catastrophic effects of the COVID-19 pandemic and its multiple devastating global consequences have initiated a profoundly disruptive transformation in the hospitality sector, as firms attempt to adapt their activity to the current uncertain scenario. This study draws on the crisis management literature to identify the key drivers of hotel recovery in the event of a disaster or an external crisis, like current pandemic. A sample of 237 Spanish hotel managers evaluated and ranked the strategic measures. Based on this evidence, measures were statistically examined to identify which ranked as most significant in helping hospitality managers. The results yield valuable theoretical and practical insights to guide hospitality managers towards business adaptation and recovery by highlighting key strategic measures for implementation in the short term.

1. Introduction

Already one of the most devastating events of this century (Zenker and Kock, 2020), the coronavirus (COVID-19) pandemic has completely transformed personal and social life and radically altered the global scenario. Within weeks, COVID-19 spread across the globe, threatening the health of millions of people, especially in East Asia, Europe, and North America (Baum and Hai, 2020). The rapid international spread of the virus forced political, economic, and social changes, affecting all aspects of life on a scale unprecedented in modern times. Although the first cases were detected in Wuhan, China at the end of 2019 (Huang et al., 2020), confirmed cases worldwide doubled in less than three months. Rapid propagation of the virus posed a major threat to governments and society. With neither a preventive vaccine nor effective medical treatment, most countries responded by implementing various non-pharmaceutical interventions (Gössling et al., 2021), including lockdown (home isolation), social distancing, closure non-essential businesses, and restrictions on public gatherings and mobility. The effects of these restrictions rippled through all sectors of the economy but had especially severe consequences for the hospitality sector (Sigala, 2020; Zenker and Kock, 2020).

Although it is still difficult to estimate the economic impact of this crisis on the global hospitality sector, specialized consultants estimate

that over 100 million hospitality jobs are at immediate risk internationally and that the industry could lose over 2.7 trillion US\$ in turnover (WTTC, 2020). According to a report from the United Nations World Tourism Organization (UNWTO, 2021), international tourist arrivals at a global level declined by 74% during 2020, which involved an unprecedented impact on tourism revenues. The hospitality industry is between the hardest hit, and the massive disruption of the pandemic impacted hotel revenues severely worldwide (Herédia-Colaço and Rodrigues, 2021).

The pandemic strikes at the very DNA of hospitality (Rivera, 2020). “Social distancing,” which recently entered the common lexicon, is the antithesis of what we expect from hospitality and tourism (Baum and Hai, 2020). The essence of hospitality service is to create unique experiences, often based on closeness with customers and personalized interactions with staff and facilities. The new scenario places hotels in unknown territory, requiring them to adapt their entire value creation process to meet new health standards. In the current uncertain scenario, hotels must re-engineer operations to become contact-free or contactless, rapidly adapting their entire service process (Sigala, 2020).

Global hospitality has weathered disruptive events and diverse crises in the recent past (Gössling et al., 2021), but the effects of this pandemic are unique. Recovery from the unprecedented impact of COVID-19 will require equally unprecedented measures. This situation demands

* Corresponding author.

E-mail addresses: agarridom@uma.es (A. Garrido-Moreno), victorj@ugr.es (V.J. García-Morales), rodrigomr@ugr.es (R. Martín-Rojas).

research on crisis management and planning, particularly in a hospitality context (Rivera, 2020). Helping hotels face this uncertainty urgently requires study to answer new questions generated by the complex situation and resulting changes throughout the hospitality industry. How, at micro-level, can hotels design new ways to operate under social distancing rules (Zenker and Kock, 2020)? How can accommodations firms adapt quickly to new safety requirements (Gössling et al., 2021) or act strategically to recover business? What key organizational factors will enable recovery from the crisis, and what role do collaborations with other agents play in this process (Rivera, 2020)? Business models, especially in hotels (Romao, 2020), must be resilient (Neumeier and Santos, 2018) to adapt and survive the current disruption.

Academic research on the topic has recently increased to explore these issues. A systematic review of the published hospitality literature on the COVID-19 pandemic shows an emerging line of research that analyzes prospects and measures for recovering hotel activity (Davahli et al., 2020). The field needs empirical studies, however, to establish specific strategies that can respond effectively to the pandemic and prepare hotels for the upturn (Herédia-Colaço and Rodrigues, 2021; Lai and Wong, 2020). Given the economic significance of the sector, we urgently need specific strategies to mitigate the negative impact of the pandemic and help hotels to recover their activity (Rodríguez-Antón and Alonso-Almeida, 2020).

This study aims to advance knowledge of this topic by proposing and empirically validating a battery of strategic measures to guide hotels in recovering business activity in the COVID-19 scenario. To this end, we conducted a cross-sectional study of a sample of 237 hotel managers in Spain. The empirical evidence obtained enabled us to identify the strategic measures essential to facilitating business recovery.

Given the urgent need for recovery strategies to help the hospitality industry survive the pandemic's uncertainty, our study contributes important implications for theory and practice. It advances the crisis management literature on hospitality by developing and testing a battery of strategic measures proven effective in facing uncertainty and helping hotels to recover business activity. From a practical viewpoint, it organizes the final measures proposed into categories, providing a valuable roadmap to guide managers in implementing recovery strategies, as well as useful examples for benchmarking.

The remainder of the paper was organized as follows. The next section describes the literature review and hypothesis development. We then explain the methodology and data analysis, and discuss the results. Finally, we present significant theoretical and practical implications, as well as the main limitations of the study.

2. Literature review

2.1. Crisis management in a hospitality context

The hospitality industry is highly sensitive to negative environmental factors, such as economic crises, natural disasters, wars, and terrorism. Such catastrophes have intensely negative effects on segments of the hospitality sector (airlines, restaurants, accommodations firms) (Kim et al., 2005). In the last twenty years, a wide range of crises have impacted global tourism directly: The September 11th terrorist attacks (2001), the 2003 Severe Acute Respiratory Syndrome (SARS) outbreak, the global economic and financial crisis that began in 2009, and the 2015 outbreak of Middle East Respiratory Syndrome (MERS) (Gössling et al., 2021). Yet none of these disruptive events compares in scale to the impact of COVID-19. In fact, the pandemic's global scale and unprecedented circumstances are signs not only that this crisis is different but that it can inspire long-term transformational changes in hospitality as socio-economic activity (Sigala, 2020).

Hospitality is inherently vulnerable to disaster and external crises, from natural to humanly influenced incidents (Ritchie, 2004). In our interconnected global society, mobility and travel have increased exponentially in recent decades. Millions of international tourists travel

freely to places with varied risks, adding new unpredictable vulnerabilities to hospitality activity (Brown et al., 2018). Given this industry's great sensitivity to environmental, political, and socio-economic risks, the traditional lack of research on crisis or disaster phenomena in tourism is surprising. Despite some recent studies of crisis management in tourism, the field lacks research on both the impact of such events on specific organizations and responses to such events (Faulkner, 2001; Ritchie, 2004). This section reviews existing literature on crisis management in hospitality, first defining the main concepts and then summarizing relevant studies of crisis management and recovery plans in the hospitality sector.

The literature has described and conceptualized crisis and disaster extensively, especially in hospitality contexts (Brown et al., 2018; Faulkner, 2001; Lo et al., 2006; Ritchie, 2004). Faulkner (2001) conceptualizes disasters as unpredictable catastrophic changes that originate outside the organization and over which organizations have very little control. As Kim et al. (2005) highlight, a disaster involves unexpected changes to which one can normally respond only after the event happens, by implementing contingency plans or responding reactively. Crisis is defined as any action or failure to act that interferes with an organization's ongoing functions, achievement of objectives, viability, or survival; or that has a detrimental personal effect on its main stakeholders (Ritchie, 2004). According to the literature, crises arise due to lack of planning and proper management and could thus have been anticipated, whereas one can only respond to a disaster after the fact (Kim et al., 2005). The main factor distinguishing 'crisis' from 'disaster' is thus whether one attributes the situation to the organization itself or to causes outside the organization (Ritchie, 2004).

Following these definitions, we classify the COVID-19 outbreak as a disaster for the global hospitality industry, as this industry had little control over the rapid spread of the virus and its effects. Because the COVID-19 pandemic is unique in nature, scale, and complexity, however, the pandemic combines natural disaster with socio-political, economic, and hospitality demand crises (Zenker and Kock, 2020). To address this complex situation properly, hospitality research must help managers implement crisis recovery and response strategies, and advance valuable knowledge to inform and foster crisis-enabled transformations in the industry (Romao, 2020; Sigala, 2020).

Development and implementation of crisis guidelines are essential to facilitate tourism's recovery from negative events by protecting or rebuilding attractive area image, reassuring potential visitors of the area's safety, and aiding local hospitality firms during their economic recovery (Kim et al., 2005). Crisis management aims to help hospitality organizations, including hotels, combat sudden threats and survive in the long term (Leung and Lam, 2004). Contingency plans with post-crisis mitigation measures are especially important for hotel firms, because the immediate steps a hotel takes after a catastrophe can reassure guests and other stakeholders that the company is working aggressively to return to normal operation (Lo et al., 2006). Because the COVID-19-induced economic and tourist crisis shares some similarities with prior crises and disasters (Zenker and Kock, 2020), studies of crisis management in prior events that disrupted hospitality (SARS, Ebola, financial crisis, terrorism) provide valuable ideas on how to respond to the current situation. We focus here on studies of crisis management in hospitality as a source of measures to manage activity restart strategically.

Table 1 summarizes the main results of studies on crisis management in the major hospitality and tourism journals (ordered chronologically), and recent studies of crisis management in a COVID-19 scenario.

As we can observe, analysis of the literature shows that most hotels lacked contingency plans for the crises studied and thus initially responded reactively, implementing a wide variety of strategic responses. Among the most frequent responses were implementation of new technologies to minimize personal contact, collaboration with other agents, cost-saving initiatives, specific staff training and enhanced internal communication, continued marketing efforts, new offers and

Table 1
Studies examining crisis management and strategic measures to overcome crisis.

Authors	Topic	Country examined	Method	Main findings
Chien and Law (2003)	Impact of SARS outbreak on hotels	Hong Kong	Theoretical paper	SARS outbreak affected the hospitality industry in Hong Kong badly. To cope with the situation, hotels had to develop contingency plans to restore guest confidence. Among main measures highlighted: regular staff meetings, enforcing environmental hygiene and cleaning policies, media handling, and special attractive packages.
Israeli and Reichel (2003)	Hotel management of crisis from intensification of terrorism	Israel	Quantitative analysis of sample of 116 Israeli hotel managers	Develops a questionnaire to evaluate importance of four categories of practice for crisis management: marketing, human resources, hotel maintenance, and government. Some valuable measures involved cost savings, focusing marketing efforts on domestic tourism, and developing special offers.
Leung and Lam (2004)	Impact of SARS outbreak on hotels and human resources strategies to tackle crisis	Hong Kong	Qualitative methodology (case study)	Most hotels lacked contingency plans to deal with crisis. Some faced crisis by focusing on human resources: layoffs and unpaid leave (to reduce costs), enhanced communication with employees (regular meetings), and specific employee training.
Kim et al. (2005)	Impact of SARS on Korean hotels and proposal of measures to overcome crisis	Korea	Qualitative methodology (case study of six five-star hotels)	Highlights importance of crisis management systems and action plan to react quickly. Korean hotels tried to minimize operating costs, offered employees specific training programs, and developed intensive marketing campaigns in collaboration with other agents in the sector.
Lo et al. (2006)	Practices employed by hotels to survive during SARS disaster	Hong Kong	Qualitative case study of multiple cases (6 hotels)	Explains main strategic measures that hotels developed to survive difficult times: enhance internal communication to maintain employee morale, intensify communication with customers and promotions, and collaborate with other hospitality agents and public institutions.
Tew et al. (2008)	Strategic tips for limiting the negative impacts of SARS epidemic	Canada	Qualitative and quantitative analysis in the Niagara region of Canada (96 hotels)	Provides information on how the hospitality industry can prepare itself for a crisis or disaster and describes how all stakeholders must work together to cope better with the effects of a crisis.
Kimes (2009)	Practices to manage hotel rates during economic downturn (global financial crisis)	International sample	Quantitative analysis of global sample (Europe, Asia-Pacific, Africa, America) of 291 hotel managers	Hotels can respond to economic crisis with various non-price-related competitive methods: competing based on quality, creating strategic partnerships with distribution channels, focusing on loyalty program members, and developing additional revenue sources or market segments (local customers).
Brown et al. (2018)	Literature review on crisis and disaster resilience in hotel sector	Theoretical study	Literature review and synthesis	Although literature on disaster management has recently expanded, most hotels are not actually prepared and have not implemented specific plans.
Novelli et al. (2018)	Effect of Ebola outbreak on tourism	Gambia	Rapid Situation Analysis research methodology combining interviews, direct observation, and informal discussion	Highlights importance of proactively formulating strategies to facilitate rapid response to crisis. Strategic measures developed: cost-cutting strategies, control of communications and media, flexibility polices to stop cancellations, incentives and discounts, and joint marketing with other agents.
Kimes (2020)	How hotels are responding to COVID-19 outbreak	International sample	Quantitative analysis of global sample (Europe, Asia, America, Africa) of 893 hotels	Examines different measures in the following categories: marketing, operations, cost-cutting, customer refund polices. Strategies that worked best according to respondents: targeting new segments, increasing flexibility, and enhancing communication with customers.
Sigala (2020)	Impacts and implications of COVID-19 for hospitality firms	Theoretical study	Literature review and direct observation	Describes types of measures hospitality firms are implementing: redesign of experiences, adoption of new standards and cleaning procedures, implementation of mobile apps (for check-in, room-keys), in-room technologies, robots (to minimize personal contact).
Hao et al. (2020)	Impact of COVID-19 on hospitality industry and post-pandemic agenda	China	Literature review and direct observation in China.	Exploratory review of overall impacts of COVID-19 pandemic on China's hotel industry. Proposes COVID-19 management framework to address anti-pandemic phases, principles, and strategies.
Herédia-Colaço and Rodrigues (2021)	Analysis of hotel managers' perceptions and strategies to recover from the COVID-19 pandemic	International sample	Quantitative analysis of a global sample of 144 hotel managers from different countries	Most hotels analyzed had implemented extraordinary recovery measures to face the current situation. The most significant strategic measures included special health and safety protocols, and marketing initiatives such as long-term vouchers to increase sales.

Source: Developed by the authors.

extension of activity to new segments, special health and safety protocols, and increased flexibility to avoid cancellations. Drawing on this evidence, we included all of these measures, grouped in different factors, in the proposed theoretical framework.

2.2. Hypotheses development

As mentioned above, the massive disruption of the COVID-19 pandemic has impacted hotel operations and revenues, causing intense contraction in hospitality demand and activity. To mitigate this negative effect, hotel managers must quickly implement strategic measures to recover their business. Drawing on our analysis of the literature, we now discuss in detail the main categories of strategic measures identified. From these, we propose the hypotheses that compose the study’s theoretical framework (see Fig. 1).

2.2.1. Technology and collaboration related strategic measures

One of hotels’ substantial response strategies to the COVID-19 crisis has been to intensify digitalization and various other technological solutions (Rodríguez-Anton and Alonso-Almeida, 2020). To ensure customer and employee safety, hotels are re-engineering their operations, incorporating specific technologies for contact-free service (Sigala, 2020). The following are among the main tools implemented: mobile apps (for check-in and check-out and to replace room keys), chatbots (for communication with customers), self-service kiosks, in-room technologies (for entertainment), digital payment systems, and even robots (for reception and room services) (Hao et al., 2020; Sigala, 2020).

In this vein, Hao et al. (2020) report that Chinese hotels minimized human contact and avoided COVID-19 propagation by increasing implementation of digital contactless services, self-check-in and check-out via machines, face-scanning, robots, and voice control for room service. Jiang and Wen (2020) highlight the growing adoption of robotics and artificial intelligence applications in hospitality response to and recovery from the COVID-19 pandemic.

Technological applications are also fundamental to developing inter-organizational collaboration strategies that are essential for business recovery. Among the main recovery strategies for the hospitality industry, Fu (2020) includes development of strategic alliances and partnerships to enhance a hotel’s existing capabilities. In past healthcare crises, collaboration with other agents from the sector (such as tour operators, airlines, or local agencies) to develop joint marketing initiatives and share information proved to be effective in recovering activity (Kim et al., 2005; Novelli et al., 2018). As technology is a significant factor in reinventing hospitality service by digitalizing processes and

designing smart customer experiences and consequently, we assume that:

H1: *Technology and collaboration related strategic measures (digitalization, joint offers or campaigns) will be essential to recover hotel activity in a COVID-19 scenario.*

2.2.2. Organizational and human resources related strategic measures

To address a highly disruptive event such the COVID-19 pandemic properly, businesses should establish and implement specific contingency plans with protocols for the whole organization. Such measures have proven useful to hotels in past public health crises (Chien and Law, 2003). They involve creation of an inter-functional team to develop measures to ensure health safety and propose specific action protocols.

Employees also play a fundamental role, not only in handling the crisis properly, but also in business recovery. Various studies therefore include measures that involve human resources among the main categories of crisis management practices in a hospitality context (Hao et al., 2020; Israeli et al., 2011). Our study identifies the following major human resources measures as effective in past crises: specific training programs to ensure employees’ safety and security; additional internal communication channels; and an emergency communication network to keep employees informed and keep morale high, an important factor during hard times (Hao et al., 2020; Kim et al., 2005; Lo et al., 2006).

Finally, at organizational level, hotels must apply self-rescue strategies to face the uncertain environment and sharp contraction in sales. These strategies include reducing non-essential costs and carefully monitoring cash-flow predictions (Hao et al., 2020). Effective control measures based on lower operational costs, closure of facilities, flexible staff allocation, and delay of investments were key to handling crisis and enabling business recovery in past healthcare crises, such as SARS (Lo et al., 2006) and Ebola-induced tourism crises (Novelli et al., 2018). Based on the foregoing, we hypothesize that:

H2: *Organizational and human resources related strategic measures (contingency plans, cost reduction or new training programs) will be essential to recover hotel activity in a COVID-19 scenario.*

2.2.3. Marketing related strategic measures

Our review of the crisis management literature in hospitality shows that most studies found marketing measures to be essential in facing disruption and aiding future business recovery. In the current context of uncertainty, hotels must restore customer confidence by establishing communication strategies to keep customers informed of the protective measures the hotel implements to ensure a safe environment (Lo et al., 2006).

COVID-19 is also causing long-term changes in customer preferences, information demand, and consumption behavior (Hao et al., 2020). Hotels should identify new customer preferences and develop new products, while also reinventing communication campaigns and prioritizing use of new digital platforms such as social media to communicate with customers. In a recent international study examining key recovery strategies, most hotels stated that they had made substantial investments in marketing and sales strategies to attract new markets, while also creating new packages and special offers (Herédia-Colaço and Rodrigues, 2021).

Past events and recent studies demonstrate the utility of the following strategic marketing measures in combatting the current crisis: develop specific campaigns and offers to address the local market; develop and promote new products and services (to generate alternative revenue); extend loyalty program benefits; prepare promotional plans to increase future stays; update and improve channels to contact, attract, and sell to customers; digitalize marketing strategies and advertise through different media channels (Hao et al., 2020; Herédia-Colaço and Rodrigues, 2021; Israeli et al., 2011; Lai and Wong, 2020; Lo et al., 2006; Rodríguez-Anton and Alonso-Almeida, 2020). We therefore propose that:

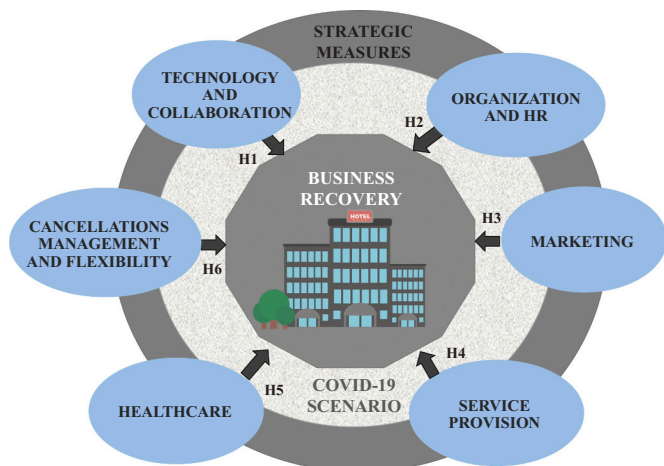


Fig. 1. Theoretical framework.

H3: *Marketing related strategic measures (advertising, digital channels or new packages) will be essential to recover hotel activity in a COVID-19 scenario.*

2.2.4. Service provision related strategic measures

Hotel recovery requires full restoration of normal business operations through development programs (Henderson and Ng, 2004) and self-renewal strategies to revitalize the cash flow, enhance operating capabilities, and make rapid, dynamic adjustments based on the pandemic's ever-changing situation (Hao et al., 2020). Hotels may need to employ efficient methods and systems to reduce operating costs and engage customers online or develop flexible sales and daily pricing strategies based on the current situation. For instance, hotels should strategically close or reduce the number of properties and facilities; offer specific discounts to encourage use of additional hotel services; postpone non-essential building and system maintenance; minimize fixed costs; cut non-essential services; and combine airfare, accommodation, local tours, and food and beverage to enhance customer experience.

In essence, hotels must reinvent their service process to meet emerging customer needs. Building on experience from prior crises, effective service provision measures include improving facilities and customer service, conducting extensive advertising and promotional campaigns, offering a personalized customer service line or additional benefits, improving customers' well-being, promoting direct booking through the hotel website, launching new accommodation products with additional benefits, and increasing functional private space (Hao et al., 2020; Henderson and Ng, 2004; Herédia-Colaço and Rodrigues, 2021). We therefore argue that:

H4: *Service provision related strategic measures (booking channels, improved customer service, additional benefits) will be essential to recover hotel activity in a COVID-19 scenario.*

2.2.5. Healthcare related strategic measures

Current research reports health-related lessons learned from the 2003 SARS outbreak in Asia. Hoteliers in Hong Kong set up a contingency plan to minimize the crisis (Chien and Law, 2003), investing effort in cleaning and disinfecting rooms and common areas, and using protective equipment, including masks (Henderson and Ng, 2004).

With the advent of SARS-COV-2, it is crucial to ensure the physical health and psychological wellbeing of front-line staff. Hotels chains have adopted strict hygiene and sanitary measures to ensure their customers safe accommodation. These measures include thorough disinfection, control of food hygiene, provision of sufficient protective materials, online medical consultation, body temperature checks, employee training in epidemic detection, and closure of laundry rooms, gyms, and other public facilities (Hao et al., 2020; Lai and Wong, 2020).

In Spain, hospitality groups have embraced the common goal of protecting customer and employee health by implementing strict hygiene standards in facilities and promoting social distancing. To the extent possible, they avoid direct contact between employees and customers by strengthening digitalization and developing extensive communication and awareness programs that involve both customers and employees in adopting and complying with COVID-19 prevention measures (Rodríguez-Anton and Alonso-Almeida, 2020). Hotels must also provide hygienic material and temperature controls in rooms and common areas, train employees to assist potential positive cases, and collaborate with travel agencies to guarantee hygiene by adopting all of these measures. We therefore argue that:

H5: *Healthcare related strategic measures (protocols, hygiene habits, common areas adaptation) will be essential to recover hotel activity in a COVID-19 scenario.*

2.2.6. Cancellation management and flexibility related strategic measures

Hotel managers facing cancellations must shift from a reactive to a proactive focus (Lai and Wong, 2020) to cope with the devastating drop

in occupancy rates due to COVID-19. Facing mass cancellations and very few new bookings, hotels are anxious to sustain their day-to-day business and ensure some cash flow. With few foreign visitors, promotional packages must target residents by adding value through extra amenities for local and any remaining foreign guests, as such policies will be more effective than discounts on room prices (Chien and Law, 2003; Henderson and Ng, 2004).

Restoring customer confidence is critical to riding out this crisis. Several hotel chains reassured customers by initiating free cancellation service and providing re-booking assistance, extending loyalty program membership, and increasing the benefits of membership (Hao et al., 2020; Rodríguez-Anton and Alonso-Almeida, 2020). Further, to combat the tremendous number of service cancellations, many hotels developed new functionalities, offering greater flexibility to avoid cancellations and revitalize part of their market share. For instance, they emailed guests and groups that cancelled a special offer or incentive to re-book, invited guests and groups that cancelled to book again, and provided greater flexibility on check-in and check-out times. They also permitted customers to cancel the booking without penalties due to the health situation and provided flexible re-scheduling. Our final hypothesis argues that:

H6: *Cancellation management and flexibility related strategic measures (flexible rates, free cancellations) will be essential to recover hotel activity in a COVID-19 scenario.*

3. Methodology

3.1. Measures and sample

We collected empirical data by developing a quantitative survey instrument using the following steps. First, we drew on an extensive literature review of crisis management studies on the hotel sector to identify the main categories and strategic measures proposed in the literature. Second, we examined the websites of the main Spanish hotel associations and managerial publications to capture relevant qualitative data and strategic recommendations. Third, we conducted a thorough analysis of the institutional webpages and social media profiles of the most significant hotel chains in Spain to benchmark best practices implemented and enrich the questionnaire's content.

To pretest the questionnaire, we initially sent it to a group of 25 experts from the hospitality management sector (academics, consultants, and hotel managers with specific knowledge of the topic), who analyzed the content, rewording, and comprehensibility of the questionnaire items. We then conducted five personal online interviews with managers from different hotels. We obtained useful information about these managers' perspectives, the importance they attributed to different measures, and their concerns about specific issues (e.g., financial, service-related). The managers expressed worries about the near future as they face uncertainty about the pandemic's development and duration. They noted the urgency of implementing cost-saving strategies and applying for national funds or financial aid. They were also adapting their hotel protocols to the measures specified by public institutions such as the Institute for Spanish Tourism Quality (ICTE) to ensure that they restart activity in a safe environment. Additionally, the managers were designing specific offers and packages to increase future sales by focusing on emerging customer needs. Finally, the managers emphasized the urgent need to digitalize processes, adopt new technologies, and capitalize on the emerging importance of digital channels to communicate with customers in the current situation. Based on this valuable information and suggestions from the managers, we refined, enriched, and validated the questionnaire.

Our final step was a pilot test of a random sample of 15 hotel managers for definitive validation of the questionnaire's content. The final version of the questionnaire was composed of 30 items (see Table 2) measured using a Likert scale ranging from 1 ("totally disagree,"

Table 2
Strategic measures to facilitate recovery of business activity in hotels.

Item	Description
SM1	Maintain investment in digital marketing , improving SEO positioning and strengthening brand image in metasearch engines ; update content.
SM2	Redesign advertising messages to orient them to new customer concerns and improve customer confidence (report on safety rules, flexibility in reservations, etc.).
SM3	Design specific campaigns that focus on a local audience (with specific advantages) and expand them to other segments as demand increases (including content such as webinars or frequently asked questions).
SM4	Promote advertising on social networks (Facebook, YouTube, Instagram), as this medium provides virality at a relatively low cost (prioritize audiovisual content such as images or videos).
SM5	Offer specific benefits for regular customers (loyalty club members), such as the possibility of paying at the establishment, accumulating double points on loyalty cards, and extending specific promotions.
SM6	Design offers and packages oriented to the national market , offering additional benefits (e.g., children free, breakfast included) and providing incentives to extend stays: services such as a free spa or upgrades to the next category.
SM7	Improve the terms of free cancellation : permit customers to cancel without penalties if the health situation changes.
SM8	Offer greater flexibility in non-refundable rates to avoid cancellations (e.g., allow customers to reschedule their reservation on another date or exchange it for a pass with no expiration date).
SM9	Offer greater flexibility with entry and exit times , permitting early check-in or late check-out to prevent customers from having to wait on the street or in common areas.
SM10	Encourage direct booking through the hotel's website, offering exclusive advantages (special rates, flexible hours, welcome details, reduced rates for healthcare professionals, etc.).
SM11	Instead of reducing prices, offer customer additional benefits (e.g., local gastronomy gifts, free admission to nearby attractions, etc.).
SM12	Offer a personalized customer service line to prepare and manage customer stays: provide information on local attractions, means of transport, health information, and pre-arrival contacts to inform customers of all measures taken, etc.
SM13	Design specific services aimed at improving the client's "integral" well-being , offering, for example, mindfulness, yoga, or meditation sessions at the hotel.
SM14	Offer customers and local population specific discounts to encourage them to use additional hotel services (e.g., restaurant, swimming pool, etc.).
SM15	Allow check-in and check-out online (or from a mobile application) to avoid waiting and crowding and minimize interaction with staff.
SM16	Provide 24-hour online customer service , such as room service or minibar orders via mobile phone (digital concierge service through WhatsApp).
SM17	Adapt meeting and event facilities to new security protocols, enhancing the digital experience and improving technological infrastructure to support videoconferences and online congresses .
SM18	Minimize the use of paper and digitize activities (e.g., room key available on cellphone, QR devices to access restaurant menus, etc.).
SM19	Collaborate with local entities (agencies, event organizers) to create unique offers and packages that address the local public (closest demand).
SM20	Actively collaborate with other agents in the sector (airlines, DMOs, other hotel companies) to launch joint communication campaigns that strengthen the destination's image and improve customer confidence.
SM21	Create a contingency plan including protocols and action measures and familiarize all staff and customers with it.
SM22	Create a position " head of health security " to be the expert in charge of coordinating and implementing measures and designing the necessary training for employees in said protocols.
SM23	Develop a specific plan to reduce and control operating costs in the coming months.
SM24	Design a safety and hygiene training plan for staff to help the team adapt to the new scenario; establish controls to ensure that staff follow the new protocols.
SM25	Develop a specific plan for the reduction and control of operating costs in the coming months.
SM26	Train all hotel employees to assist potential unexpected positive cases.
SM27	Promote specific measures to improve hygiene habits and make antibacterial gel stations widely available in companies, institutions, shops, and streets.
SM28	Establish temperature controls to detect potentially infected individuals.
SM29	Provide prepared hygienic material in hotel rooms and common areas , encouraging antibacterial and hygiene gel use (among employees and

Table 2 (continued)

Item	Description
	customers); reorganize common area furniture to ensure appropriate distance and safety .
SM30	Adapt common areas such as elevators, garages, shared terraces, and swimming pools; develop specific protocols to prevent spread of the virus.

measure is completely insignificant) to 7 ("totally agree," measure is very significant).

We administered the questionnaire to a sample of hotel industry professionals. General managers served as key informants, as the purpose of the questionnaire was to examine their managerial perceptions of how useful the different measures would be in recovering hotel activity and adjusting it to a "new normal" by minimizing health risks. Analysis focused on the hospitality industry due to its economic importance and the urgent need for empirical research on how hotels can respond to and recover from the COVID-19 crisis (Duarte-Alonso et al., 2020; Rivera, 2020). We focus on Spain because it is a World's Top Tourism Destination and a country where hospitality is essential to the national economy. According to the World Tourism Organization (2020), Spain remained the top European destination and the third worldwide in international visitor spending (US\$86.8 billion). Spain's 2019 travel and tourism GDP was US\$198 billion, 14.3% of Spain's economy.

We created a list of general managers with partial funding from the Spanish Ministry of Science and Research. We then randomly selected 1000 Spanish companies from a total population of 6417 hotels that reopened in July 2020 in Spain (INE, 2020) (Table 3). Calls and emails to companies increased participation, yielding 237 valid questionnaires (response rate 23.7%). We found no statistically significant differences among respondent and non-respondent firms (e.g., by comparing number of employees and annual sales) or among early and late respondents (Armstrong and Overton, 1977).

3.2. Results

3.2.1. Factor analysis

Factor analysis of the strategic measures (Table 4) revealed that the 30 measures, grouped into six factors through principal component analysis and varimax rotation method, accounted for 62.91% of the variance. The minimum loading for each practice on a factor was 0.55.

The first factor included SM21 (create contingency plan including protocols and actions), SM22 (create a head of health security), SM23 (train staff on safety and hygiene), SM24 (establish effective internal communication channels), and SM25 (plan to reduce and control operating costs). This factor accounted for 28.76% of the variance. We labeled it "organization / HR."

The second factor encompassed SM1 (invest in digital marketing, SEO position, and brand image in metasearch engines), SM2 (redesign advertising messages), SM3 (focus specific campaigns on local audience and expand them to other segments), SM4 (advertise on social networks), SM5 (offer specific benefits to regular customers), and SM6 (design offers and packages oriented to national market, including

Table 3
Technical details of the research.

Sector	Hotel industry
Geographical location	Spain
Methodology	Structured questionnaire
Universe of population	6417 hotels
Sample size (response size)	1000 firms (237 firms, 23.7%)
Sample error	6.4%
Confidence level	95%, p-q = 0.50; z = 1.96
Data collection period	June to August 2020

Table 4
Rotated component matrix for strategic measures.

Variable	Component					
	1	2	3	4	5	6
SM1	0.152	0.751	0.109	0.214	0.107	0.039
SM2	0.324	0.689	0.163	0.002	-0.074	0.051
SM3	0.216	0.670	0.357	0.047	-0.096	0.045
SM4	-0.038	0.763	0.084	0.241	0.156	0.074
SM5	0.085	0.659	0.204	0.169	0.020	0.354
SM6	0.270	0.558	0.056	0.248	0.023	0.217
SM7	0.055	0.156	0.224	0.119	0.124	0.806
SM8	0.154	0.081	-0.031	0.122	0.005	0.834
SM9	0.114	0.204	0.119	0.242	0.138	0.720
SM10	0.004	0.269	0.131	0.617	0.170	0.067
SM11	-0.035	0.087	0.186	0.624	-0.097	0.159
SM12	0.357	0.251	0.021	0.603	-0.064	0.098
SM13	-0.016	0.061	0.350	0.681	-0.021	0.193
SM14	0.115	0.162	0.230	0.711	0.021	0.075
SM15	0.137	0.037	0.719	0.288	0.055	0.045
SM16	0.324	0.069	0.557	0.255	0.116	0.343
SM17	0.264	0.181	0.631	0.257	-0.153	0.100
SM18	0.439	0.215	0.589	0.229	-0.080	0.097
SM19	-0.048	0.246	0.705	0.199	0.227	0.008
SM20	0.111	0.253	0.686	0.062	0.050	0.101
SM21	0.730	0.133	0.169	0.271	0.220	-0.029
SM22	0.759	0.191	0.086	-0.081	0.093	-0.051
SM23	0.872	0.124	0.027	0.036	0.172	0.123
SM24	0.788	0.147	0.263	0.120	-0.012	0.221
SM25	0.580	0.161	0.210	-0.013	-0.063	0.333
SM26	-0.117	-0.062	0.131	0.086	0.653	0.216
SM27	0.242	-0.021	0.295	-0.213	0.724	0.085
SM28	-0.073	0.078	0.131	-0.042	0.720	-0.049
SM29	0.172	0.111	-0.158	0.144	0.700	0.144
SM30	0.293	0.018	-0.230	-0.025	0.714	-0.105

Extraction method: Principal Component Analysis
 Rotation method: Varimax with Kaiser Normalization
 A rotation converged in seven iterations.

additional benefits). This factor accounted for 9.79% of the variance. We labeled it “marketing.”

The third factor included SM15 (provide online check-in/check-out), SM16 (provide 24-hour online customer service), SM17 (adapt meeting and event facilities to support videoconferences and online congresses), SM18 (minimize paper use and digitalize activities), SM19 (collaborate with local entities to create unique offers and packages aimed at local public), and SM20 (collaborate actively with other agents in sector to launch joint communication campaigns). This factor accounted for 7.85% of the variance. We labeled it “technology and collaboration.”

The fourth factor encompassed SM10 (encourage direct booking through hotel website, offer exclusive advantages), SM11 (offer customer additional benefits), SM12 (offer personalized customer service line), SM13 (improve customer’s integral well-being), and SM14 (offer discounts for additional hotel services). This factor accounted for

Table 5
Means, standard deviation, correlations, and confidence interval.

Variable	Mean	s.d.	1	2	3	4	5	6
1. Organization and HR	6.05	1.08	1.000	0.24–0.75	0.33–0.77	0.10–0.58	-0.06–0.74	0.16–0.59
2. Marketing	5.83	0.90	0.45***	1.000	0.39–0.85	0.35–0.82	-0.14–0.44	0.19–0.78
3. Technology and collaboration	5.54	1.19	0.46***	0.53***	1.000	0.46–0.93	-0.12–0.47	0.21–0.74
4. Service provision	5.42	0.92	0.28*	0.48***	0.57***	1.000	-0.22–0.27	0.24–0.79
5. Healthcare measures	6.33	0.87	0.24*	0.12	0.12	0.02	1.000	0.03–0.43
6. Cancell. mgt. & flexibility	5.78	0.80	0.31**	0.39***	0.38***	0.40***	0.16	1.000

Notes:
 Numbers above the diagonal represent the confidence interval between each pair of constructs (95%).
 * $p < 0.05$.
 ** $p < 0.01$.
 *** $p < 0.001$; $n = 237$.

Table 6
Measurement model results.

Variable	Items	λ^*	R ²	A.M.
Organization and HR	SM21	0.71***(3.83)	0.50	$\alpha = 0.867$ CR = 0.89 AVE = 0.61
	SM22	0.74***(7.46)	0.54	
	SM23	0.87***(5.20)	0.75	
	SM24	0.85***(6.93)	0.72	
	SM25	0.72***(3.52)	0.51	
Marketing	SM1	0.73***(5.37)	0.53	$\alpha = 0.848$ CR = 0.87 AVE = 0.52
	SM2	0.71***(6.02)	0.50	
	SM3	0.71***(8.43)	0.50	
	SM4	0.73***(5.71)	0.53	
	SM5	0.72***(5.19)	0.51	
	SM6	0.74***(5.07)	0.54	
Technology and collaboration	SM15	0.71***(5.34)	0.50	$\alpha = 0.848$ CR = 0.87 AVE = 0.52
	SM16	0.72***(7.44)	0.51	
	SM17	0.71***(7.22)	0.50	
	SM18	0.76***(6.22)	0.57	
	SM19	0.72***(7.28)	0.51	
	SM20	0.71***(5.05)	0.50	
	SM9	0.71***(5.17)	0.50	
	SM10	0.71***(4.56)	0.50	
Service provision	SM11	0.77***(4.46)	0.59	$\alpha = 0.767$ CR = 0.85 AVE = 0.53
	SM12	0.73***(8.31)	0.53	
	SM13	0.70***(7.55)	0.51	
	SM26	0.73***(2.73)	0.53	
Healthcare measures	SM27	0.74***(3.01)	0.54	$\alpha = 0.770$ CR = 0.85 AVE = 0.54
	SM28	0.79***(3.51)	0.62	
	SM29	0.72***(2.65)	0.51	
	SM30	0.71***(3.53)	0.50	
	SM7	0.82***(7.01)	0.67	
Cancell. mgt. & flexibility	SM8	0.70***(6.51)	0.50	$\alpha = 0.818$ CR = 0.82 AVE = 0.61
	SM9	0.71***(3.83)	0.65	
	SM2	0.71***(5.17)	0.50	
Goodness-of-fit statistics	$\chi^2_{390} = 397.24$ ($P > 0.01$) ECVI = 7.02 AIC = 547.24 CAIC = 799.95 NFI = 0.86 NNFI = 0.99 IFI = 0.99 PGFI = 0.60 PNFI = 0.77 NCP = 7.24 RFI = 0.85 CFI = 0.99 RMSEA = 0.015			

Notes: λ^* = Standardized Structural Coefficient; R² = Reliability; α = Alpha Cronbach; CR = Compound Reliability; S.V. = Shared Variance; f.p. = fixed parameter; A.M. = Adjustment Measurement;

* $p < 0.05$.
 ** $p < 0.01$.
 *** $p < 0.001$ (two-tailed).

6.09% of the variance. We labeled it “service provision.”

The fifth factor included SM26 (train employees to handle potential positive cases), SM27 (improve hygiene habits), SM28 (conduct temperature controls), SM29 (provide supplies, rooms, and common areas with antibacterial and disinfectant gel; place furniture at appropriate distance), and SM30 (adapt common areas). This factor accounted for 5.87% of the variance. We labeled it “healthcare measures.”

The sixth factor encompassed SM7 (improve free cancellation options), SM8 (provide more flexible non-refundable rates to avoid cancellations), and SM9 (provide more flexible entry/exit times). This

Table 7
Strategic measures by level of support.

Variable	1	2	3	4	5	6	Final Mean	Hypotheses
Organization / HR	SM21 (6.48)	SM25 (6.24)	SM23 (6.23)	SM24 (5.87)	SM22 (5.47)		6.05	H1 supported
Marketing	SM2 (6.19)	SM4 (5.94)	SM1 (5.92)	SM5 (5.86)	SM6 (5.65)	SM3 (5.46)	5.83	H2 supported
Technology and collaboration	SM15 (6.03)	SM18 (5.99)	SM20 (5.56)	SM17 (5.38)	SM19 (5.29)	SM16 (5.00)	5.64	H3 supported
Service provision	SM10 (6.47)	SM12 (5.95)	SM11 (5.75)	SM14 (4.75)	SM13 (4.23)		6.05	H4 supported
Healthcare measures	SM26 (6.65)	SM27 (6.61)	SM29 (6.24)	SM28 (6.10)	SM30 (6.06)		6.33	H5 supported
Cancell. mgt. & flexibility	SM8 (6.13)	SM7 (6.08)	SM9 (5.14)				6.10	H6 supported

Notes: Parentheses indicate the mean score of each individual item. We order the items in each variable from higher to lower support.

In D1/ In Q1	Measures in the first decile and first quartile (strongest support)
In Q1	Measures in the first quartile (strong support)
Outside Q1	Measures outside first quartile (medium-low support; we removed these measures from subsequent analysis)

factor accounted for 4.54% of the variance. We labeled it “cancellation management and flexibility.”

Table 5 presents the means, standard deviations, and inter-factor correlation matrix for the study variables. We obtained significant and positive correlations among all variables.

The scales showed satisfactory levels of reliability, with CRs ranging from 0.82 to 0.89 and AVEs from 0.52 to 0.61. Similarly, the Cronbach’s Alpha values ranged from 0.76 to 0.86. Each loading (λ) was significantly related to its underlying factor (t -values > 2.65). The AVE, Cronbach’s Alpha, and CR values supported the scales’ reliability and internal consistency (Fornell and Larcker, 1981). The tests support convergent validity for all multi-item constructs (Table 6). To test for discriminant validity, we performed a series of chi-square difference tests between the values obtained for one constrained model and one unconstrained model. The results showed that the constructs did not correlate perfectly (discriminant validity). Furthermore, no confidence interval in the estimation of correlations between each pair of factors contained the value 1 in the key constructs, supporting discriminant validity (see Table 5). These tests prove that each construct differs from the others (Fornell and Larcker, 1981). The measurement model also shows good model fit (χ^2 (390 d.f.) = 397.24 ($p > 0.01$); NFI = 0.86; NNFI = 0.99; IFI = 0.99; PGFI = 0.60; NCP = 7.24; RFI = 0.85; CFI = 0.99; RMSEA = 0.01).

Finally, Harman’s one-factor test did not detect common method bias (largest single component did not explain majority of the variance in our data, 28.76%; six components had eigenvalues over 1.0, globally explaining over 62.91% of total variance). Using the one-factor model or a first-order factor produced the same results.

3.2.2. Hypothesis testing

To test the study hypotheses, we examined the relevance hotel managers attribute to the different strategic measures. Table 7 summarizes the main results obtained from evaluating the mean values of the variables and measures analyzed. As in prior studies (McCreery, 2003), we drew on statistical quartiles to test the research hypotheses. Since respondents rated all measures on a scale from 1 (“totally disagree”) to 7 (“totally agree”), we calculated the values of the quartiles based on this scale. We considered variables whose final mean was in the

first quartile (Q1) (Final mean > 5.25) as essential for hotels to recover business activity in a COVID-19 scenario. As we explain below, the data support all of the study hypotheses.

Table 7 displays the individual items that obtained the strongest support (first decile (D1), Mean value of the item > 6.3) and strong support (first quartile (Q1), Mean value of the item > 5.25). We removed the items that received the lowest score (Mean value lower than Q1) from the subsequent analysis, as the managers did not consider them strategically relevant.

The data support Hypothesis 1. Strategic measures for the organization and for HR presented a final mean of 6.05, and the most important measures were creating contingency plan including protocols and actions (mean score: SM21, 6.48); develop plan to reduce and control operating costs (SM25, 6.24); develop plan to train staff in safety and hygiene (SM23, 6.23); establish effective internal communication channels (SM24, 5.87); and place someone in charge of health security (SM22, 5.47). The data also support Hypothesis 2. Strategic measures for marketing presented a final mean of 5.83, and the most important measures were redesign advertising messages (SM2, 6.19); advertise on social networks (SM4, 5.94); invest in digital marketing (SM1, 5.92); offer specific benefits for regular customers (SM5, 5.86); design offers and packages oriented to the national market, including additional benefits (SM6, 5.46); and focus specific campaigns on local audience and expand them to other segments (SM3, 5.46). We find support for Hypothesis 3 in the final mean of 5.64 for strategic measures for technology and collaboration. Here, the most important measures were providing online check-in/check-out (SM15, 6.03); minimize paper use and digitalize activities (SM18, 5.99); collaborate actively with other agents in the sector to launch joint communication campaigns (SM20, 5.56); adapt meeting and event facilities to support videoconferences and online congresses (SM17, 5.38); and collaborate with local entities to create unique offers and packages aimed at local public (SM19, 5.29). We also find support for Hypothesis 4, strategic measures for service provision, with a final mean of 6.05. The most important measures were encouraging direct booking through hotel website (SM10, 6.47), offer personalized customer service line (SM12, 5.95), and offer customer additional benefits (SM11, 5.75). The data support Hypothesis 5. Strategic measures for healthcare presented a final

mean of 6.33, and the most important measures were train employees in potential positive cases (SM26, 6.65); increase hygiene habits (SM27, 6.61); provide supplies, rooms, and common areas with antibacterial and disinfectant gel, and place furniture at appropriate distance (SM29, 6.24); conduct temperature controls (SM28, 6.10); and adapt common areas (SM30, 6.06). Finally, the data support Hypothesis 6. Strategic measures of cancellation management and flexibility presented a final mean of 6.10. The most important measures were providing more flexible non-refundable rates to avoid cancellations (SM8, 6.13) and improve free cancellation options (SM7, 6.08).

4. Discussion and conclusions

4.1. Discussion

The unprecedented nature of the COVID-19 crisis is creating serious, highly complex challenges for the hospitality industry (Duarte-Alonso et al., 2020). Given the current scenario, the hospitality industry must identify key recovery strategies (Herédia-Colaço and Rodrigues, 2021), and this study findings yield significant insights to help managers to handle the crisis and prepare for the near future.

Bearing in mind prior crisis management studies, the findings are consistent with the literature and validate the strategic significance and essence of all of the measured categories, named: *Technology and collaboration, Organization and human resources, Marketing, Service provision, Healthcare, Cancellation management and Flexibility*. Among these measures, the highest-ranked and, in turn, priority measures were *Healthcare, Cancellation management and Flexibility, Service provision, and Organization and human resources*:

Firstly, to protect customer and employee health, Spanish hotel groups are implementing strict hygiene standards in their facilities, adopting preventive health measures, and promoting social distancing by reducing direct contact between employees and customers (Rodríguez-Antón and Alonso-Almeida, 2020). In fact, the two healthcare strategic measures that managers scored highest are “train all employees to assist potential positive cases” and “promote specific measures to increase hygiene habits” in the hotel.

Regarding the second category, the results indicate that managers recognize the need to enhance flexibility of cancellations, restore customer confidence, and increase future sales, as prior studies have suggested (Hao et al., 2020). Cancellations exert great pressure on hoteliers through reduced cash flow and lost reservations. It is thus important to enable customers to postpone their reservations rather than cancel them completely. Some chains are allowing customers to change or cancel any reservation up to 24 h before arrival (e.g., Park Hotel group) and give loyal customers welcome extras or special prizes.

As far as issues related to service are concerned, managers viewed a personalized customer service line as significant in reducing customer uncertainty in the current environment. They believe it is better to offer additional benefits than to reduce prices, making up the difference in extras such as free entry to local attractions or a free bottle of wine per night of stay rather than reducing rates. Some chains (e.g., Marriot, Meliá) focus on additional benefits for regular customers to foster loyalty, such as allowing customers to pay at the establishment, accumulating double points on loyalty cards, or extending promotions without expiration dates. Hotels should also endeavor to prioritize sales through their websites, enhancing direct contact with customers and creating a stronger bond with the brand (Hao et al., 2020). Consistent with theory, the item that managers scored highest in this variable was “encourage direct bookings through the hotel’s website, offering exclusive advantages.

Finally, managers ranked measures related to Organization and human resources highly. In this area, managers emphasized the need to

develop plans to reduce and control costs (Leung and Lam, 2004; Lo et al., 2006). As sales have contracted sharply, hotels must accept the new situation and define specific cost-saving plans to reduce non-essential costs drastically (Hao et al., 2020). It is crucial to implement specific crisis management plans, including practical, realistic measures to face the situation. In this variable, the highest-ranked item was indeed “create a contingency plan including protocols and action measures and communicate it to all the staff.” As both staff and customers must be familiar with these practices and measures, hotels must implement specific training programs.

4.2. Theoretical implications

From a conceptual standpoint, this study contributes to the literature on crisis management in hospitality by developing and testing a battery of strategic measures for implementation to adjust day-to-day business to cope with the COVID-19 pandemic. It also advances the literature in hospitality management by identifying patterns of hotels’ best practices to face adversity, recover activity and enhance organizational resilience.

As learning from past events is essential, we developed our questionnaire from theoretical analyses of the crisis management literature, focusing on specific studies that analyzed previous and current public health crises (Chien and Law, 2003; Fu, 2020; Hao et al., 2020; Henderson and Ng, 2004; Herédia-Colaço and Rodrigues, 2021; Kimes, 2020; Leung and Lang, 2004; Lo et al., 2006; Novelli et al., 2018; Sigala, 2020; Rodríguez-Antón and Alonso-Almeida, 2020; Tew et al., 2008). Our results confirm prior assumptions in the specialized literature, emphasizing the need for hospitality businesses to implement specific crisis management plans and protocols before, during, and after a crisis. The findings also support and complement recent empirical studies (Duarte-Alonso et al., 2020; Herédia-Colaço and Rodrigues, 2021; Lai and Wong, 2020) that describe key recovery strategic measures essential to adapt to the “new normal” situation, respond properly to the COVID-19 pandemic and revitalize business in the wake of the current crisis.

Moreover, the results give hotel managers valuable ideas on how to face current adversity and become more resilient. The current situation reveals an urgent need to shift from crisis management to resilience-building to improve adaptive learning from disruption, look forward (Rittichainuwat et al., 2020), and enhance collaboration among different stakeholders involved in the process of hospitality management. Several of our proposed measures for recovery focus on the hotel context but can be adapted and implemented successfully in other hospitality firms (restaurants, transport firms, etc.) to respond to the current scenario and enhance organizational resilience (Melián-Alzola et al., 2020; Romao, 2020).

4.3. Practical implications

By identifying key strategic measures, this study offers important insights to guide practitioners in making strategic adjustments to adapt and survive.

It provides list of measures to enable hotel managers to respond strategically to the COVID-19 pandemic. These measures can help businesses not only to ensure safety and health-prevention in their operations but also to enhance aspects of service by incorporating specific technologies, establishing customer relationships, designing new offers, and adapting services. The final battery of items encompasses diverse strategic measures, such as strategies measures for Technology and collaboration among internal and external agents, Organization and human resources, Marketing, Service provision, Healthcare, and Flexibility and cancellation management to offer safe, flexible services. All of these initiatives seek to guide hotel

managers and foster their capability to innovate, use technology and social media, and collaborate with different stakeholders from the sector. The measures also help hotels enhance organizational resilience (Filimonau et al., 2020; Melián-Alzola et al., 2020; Roundy et al., 2017) and reduce the negative effect of COVID-19 on their business, customers, and employees.

Based on the crisis management literature and the experience of prior crises that have affected the hospitality sector, this study proposes and empirically validates a list of key drivers to business recovery, to inspire and guide managers. As central players in hospitality, hoteliers must face the challenge of the current crisis and prepare for the upturn in an uncertain atmosphere, with limited time and information (Herédia-Colaço and Rodrigues, 2021). The proposed battery of measures (see Appendix), organized under six variables, provides a useful roadmap to guide hospitality managers' proactive recovery strategies. The variables also serve as benchmarks to help hotels to face emerging challenges with innovative measures.

4.4. Limitations and future research

Although this study offers relevant insights, it is not free of limitations. First, drawing on prior research, we chose general managers as key respondents because they have knowledge of the strategic variables analyzed and can reduce response bias (Podsakoff et al., 2003). However, future studies could include data from employees or other organizational stakeholders to achieve better understanding of the phenomenon.

Second, the questionnaire-based ranking of the proposed battery of measures on managers' perception (and we conducted the study immediately after hotels reopened in Spain in summer 2020). In the near future, it would be useful to examine empirically the impact of these measures on performance, drawing on multivariate techniques to determine their relevance more thoroughly.

Third, our sample included only Spanish hotels. Future research should analyze larger samples, preferably from other regions and destinations, to test whether the proposed measures are useful in other

contexts.

Finally, the main limitation of this study lies in its cross-sectional nature and the unpredictability of the pandemic. We performed an extensive review of the literature on crisis management in hospitality firms, focusing specifically on studies that analyzed prior public health crises, to learn from their experience. The field needs more quantitative and qualitative academic research on COVID-19's impact on hospitality management activity, however. Future research should longitudinally investigate the effects of current crisis in greater depth, examining its effect not only on business activity but also on important variables such as employees' psychological, mental, and physical health; customer and employee engagement; and working conditions in the sector (Jung et al., 2021; Sigala, 2020). Additionally, the pandemics may constitute a paradigm shift on tourists' behavior and decision making in the long term. Additional studies incorporating new theoretical lens, as the Evolutionary Tourism Paradigm, can be useful to dynamically examine the phenomenon from a holistic perspective (Kock et al., 2020).

4.5. Conclusions

Identifying the primary essential key recovery strategies to implement in the short term is crucial for the hotel industry in the current uncertain scenario. Building on the crisis management literature and its empirical analysis of 237 Spanish hotels, this study proposes and validates a battery of strategic measures, grouped into six categories, to recover business activity after the COVID-19 disruption. The findings yield significant insights to guide hotel managers in responding to current crisis and preparing for the near future.

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Appendix: final battery of strategic measures, ranked by managerial relevance

Strategic measures	Description
1. Healthcare	<p>Train all hotel employees to assist potential unexpected positive cases.</p> <p>Promote specific measures to increase hygiene habits and make antibacterial gel stations widely available in hotel facilities</p> <p>Provide prepared hygienic material in hotel rooms and common areas, encouraging antibacterial and hygiene gel use (among employees and customers); reorganize common area furniture to ensure appropriate distance and safety.</p> <p>Establish temperature controls to detect potentially infected individuals.</p> <p>Adapt common areas such as elevators, garages, shared terraces, and swimming pools; develop specific protocols to prevent spread of the virus.</p>
2. Cancellation Management & Flexibility	<p>Offer greater flexibility in non-refundable rates to avoid cancellations (e.g., allow customers to reschedule their reservation on another date or exchange it for a pass with no expiration date).</p> <p>Improve the terms of free cancellation: permit customers to cancel without penalties if the health situation changes.</p>
3. Service Provision	<p>Encourage direct booking through the hotel's website, offering exclusive advantages (special rates, flexible hours, welcome details, reduced rates for healthcare professionals, etc.).</p> <p>Offer a personalized customer service line to prepare and manage customer stays: provide information on local attractions, means of transport, health information, and pre-arrival contacts to inform customers of all measures taken, etc.</p> <p>Instead of reducing prices, offer customers additional benefits (e.g., local gastronomy gifts, free admission to nearby attractions, etc.).</p>
4. Organization & HR	<p>Create a contingency plan including protocols and action measures and familiarize all staff and customers with it.</p> <p>Develop a specific plan to reduce and control operating costs in the coming months.</p> <p>Design a safety and hygiene training plan for staff to help the team adapt to the new scenario; establish controls to ensure that staff follow the new protocols.</p> <p>Establish effective internal communication channels and plan periodic face-to-face or virtual meetings with staff to keep them informed of the latest measures and keep morale high.</p> <p>Create a position "head of health security" to be the expert in charge of coordinating and implementing measures and designing the necessary training for employees in said protocols.</p>
5. Marketing	<p>Redesign advertising messages to orient them to new customer concerns and improve customer confidence (report on safety rules, flexibility in reservations, etc.).</p> <p>Promote advertising on social networks (Facebook, YouTube, Instagram), as this medium provides virality at relatively low cost (prioritize audiovisual content such as images and videos).</p>

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(continued)

Maintain investment in digital marketing, improving SEO positioning and strengthening brand image in metasearch engines; update content.

Offer specific benefits for regular customers (loyalty club members), such as the possibility of paying at the establishment, accumulating double points on loyalty cards, and extending specific promotions.

Design offers and packages oriented to the national market, offering additional benefits (e.g., children free, breakfast included) and providing incentives to extend stays: services such as a free spa or upgrades to the next category.

Design specific campaigns that focus on a local audience (with specific advantages) and expand them to other segments as demand increases (including content such as webinars or frequently asked questions).

6. Technology & Collaboration

Allow check-in and check-out online (or from a mobile application) to avoid waiting and crowding and minimize interaction with staff.

Minimize the use of paper and digitize activities (e.g., room key available on cellphone, QR devices to access restaurant menus, etc.).

Actively collaborate with other agents in the sector (airlines, DMOs, other hotel companies) to launch joint communication campaigns that strengthen the destination's image and improve customer confidence.

Provide 24-hour online customer service for room service or minibar via mobile phone (digital concierge through WhatsApp).

Adapt meeting and event facilities to new security protocols, enhancing the digital experience and improving technological infrastructure to support videoconferences and online congresses.

Collaborate with local entities (agencies, event organizers) to create unique offers and packages that address the local public (closest demand).

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