
**A STUDY OF SOCIO-ECONOMIC IMPACT OF COVID-19 PANDEMIC IN
SULTANATE OF OMAN**

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Abstract

Coronavirus disease (COVID-19), caused by acute respiratory syndrome coronavirus 2 (SARS-CoV-2), is a worldwide issue hurting millions of people in more than 210 countries, including the Sultanate of Oman (Oman). Spatiotemporal analysis was performed to study the geographical patterns of the transmission of COVID-19 over the period from 29th April to 30th June 2020. Our assessment was done utilizing five geospatial approaches within a Geographical Information System (GIS) framework, including a weighted mean centre (WMC), standard deviational ellipses, Moran's I autocorrelation coefficient, Getis-Ord General-G high/low clustering, and Getis- statistic. The Moran's I/G- statistics revealed that COVID-19 cases in datasets (numbers of cases) were grouped throughout the research period. The Moran's I and Z scores were over the 2.25 criterion (a confidence level above 95 percent), ranging from 2274 instances on 29th April to 40,070 cases on 30th June 2020. The results of demonstrated variable rates of infections, with a substantial geographical heterogeneity across the several wilayats (district) (district). The epidemic condition in several wilayats, such as Mutrah, As-Seeb, and Bowsher in the Muscat Governorate, was more severe, with Z score greater than 5, and the current transmission still displays a growing tendency. This investigation demonstrated that the directional trend of COVID-19 cases has shifted from northeast to northwest and southwest, with

the overall afflicted region growing over time. Also, the data show that the rate of COVID-19 infections is greater in the most populous locations. The findings of this work give a good platform for future study by analysing the most resolute areas in greater depth and may help decision-makers choose specific zones for alleviation programmes.

Keywords: Socio-Economic, Covid-19 Pandemic, Oman

1 Introduction

Since March 2020, the World Health Organization (WHO) has classified the coronavirus disease 2019 (COVID-19) as a pandemic. This illness is one of the most current and greatest risks that the world is facing. The persistent worldwide concern over this significant health danger is primarily driven by the rapid rate at which the pandemic is spreading. In addition, this pandemic has significant health, social, and even political implications for both industrialised and developing countries. As of today (17th November), the WMO Covid-19 dashboard reports that the number of confirmed cases around the globe has surpassed 55 million, while the number of deaths is getting close to 1.4 million. According to Cutler and Summers. (2020), the estimated costs of the COVID-19 pandemic in the United States may reach \$16 trillion, which is approximately 90 percent of the annual gross domestic product. This would make the cost of the pandemic greater than the cost of the Iraq War, and it would be close to the cost of the costs associated with global climate change.

At the local, the national, and the international levels, there have been a lot of attempts taken to stop the COVID-19 virus from spreading. However, the "global" strategy that was developed to deal with the emerging pandemic has been hampered by a number of challenges, the most significant of which are the "creeping" nature of the pandemic and its rapid transmission rate. To date, more than 210 countries and territories around the world have been affected by the pandemic. Several studies have corroborated its incredibly high rate of transmission, which has been linked to a variety of socioeconomic and environmental variables. In addition to these efforts, numerous researchers from all around the world have been seeking to comprehend the behaviour of this pandemic, namely its transmission, detection, treatment, and the socioeconomic effects it has.

There is invariably a spatial component to the transmission of illnesses in general and infectious diseases in particular. By tracing contact trajectories within population networks, professionals in public health are able to determine how illnesses spread locally or even globally through the process of transmission. In this regard, the Geographical Information System (GIS) is a powerful analytical tool not only because it incorporates fundamental epidemiological information on humans, times, and locations, but also because it acts as a shared interface for the centralised reporting and tracking of indicators from a variety of locations. In other words, GIS is a powerful

analytical tool not only because it incorporates fundamental epidemiological information on humans, times, and locations, but also because it incorporates fundamental epidemiologic data georeferencing). Because of these benefits, epidemiologists are now able to develop maps that illustrate the geographical distribution of illnesses on a variety of scales, including global, regional, national, provincial, and local. Because of these maps, scientists are able to make more accurate predictions regarding which groups will be vulnerable and the degrees to which they will be exposed to the danger of illnesses. Additionally, probabilistic risk maps at granular geographic scales enable for the tracking of epidemics, the prioritisation of methods for disease prevention and control, and the allocation of adequate funding for the purpose of disease control by local authorities. In addition, geographic information systems make it simpler to visualise the spread of infectious diseases through the use of temporary map animation and network analysis. Better accuracy, efficiency, resource monitoring, and cost savings are all possible with the use of information technology (IT) solutions, which may be used to bolster financially responsible and substantial expenditures throughout the whole public health industry. There have been a great number of studies that have presented evidence to suggest that GIS is a crucial tool for various situational awareness programmes dealing with pandemic illnesses. This tool may be found in hospitals or emergency operations centres.

It is of the utmost importance to have an understanding of the spatiotemporal occurrences of COVID-19 on a national level in order to provide essential insight into the ways in which epidemics begin, progress, and eventually end. Oman is one of the nations across the world that is at danger of a pandemic caused by COVID-19. The country's first confirmed case of the virus was reported on February 28, 2020 in Muscat. According to the Omani Ministry of Health, the infection rate has dramatically grown from the end of April to the middle of August, with nearly 2,274–82,924 confirmed cases over this period, and with a greater distribution throughout the majority of wilayats. Oman is now one of the top-ranking nations in terms of the ratio of confirmed cases to the overall population of the country, with approximately 23,000 instances per million people in the country. This information may be gleaned from the demographic viewpoint of the situation. Despite the fact that a great number of studies have used spatial methods to evaluate temporal and geographic features (such as centre, density, hotspots, coldspots, direction, etc.), COVID-19 has not yet discovered any research that focuses on Oman. It is essential to do such an analysis in order to quantify geographical and temporal patterns of the COVID-19 propagation, evaluate the changes in its track over time, and identify the many demographic, environmental, and socioeconomic factors that may speed up infection rates. This evaluation is necessary from a policy aspect in order to assist policy makers in developing their plans and strategies in a more reliable manner, taking into consideration regional differences of this health enormous issue. In this regard, Geographic Information Systems (GIS) can play an important role in outlining the geographical and temporal patterns of COVID-19 in Oman by

making use of a broad variety of spatial information. To be more specific, developments in GIS techniques, in particular spatial modelling and data mining, have made it feasible to present a comprehensive picture of the key geographical hotspots of this virus at a variety of spatial scales. This was previously impossible.

Psychological impacts of COVID-19 pandemic on food consumption

Although the precautions taken by governments all over the world were essential in preventing the further spread of COVID-19, many people raised concerns about the psychological, social, and economic havoc that these restrictions may wreak on people's eating habits and ways of life. During periods of isolation and self-quarantine, making significant changes to one's lifestyle can bring on a significant increase in feelings of concern, boredom, despair, tension, anxiety, and dread of both the disease and death. Because of these feelings, the interaction between customers and food has become more complicated (WHO, 2020a).

To begin, at the beginning of the outbreak, consumer understanding about the virus and its potential severity was limited. As a result, consumers concentrated on impulsive purchase and hoarding rather than making informed decisions. Soon after announcing their first coronavirus cases, numerous nations around the world have been documented to have experienced widespread instances of panic buying of non-perishable food items (such as wheat, pasta, noodles, packaged meals, and rice). These instances have been documented in numerous instances. There are many other hypotheses that might be entertained to account for such a prevalent pattern of behaviour. First, because food is obviously the most important thing for every single human being, impulsive shopping is a usual response for humans to emergency situations. This response is not caused by a lack of food, but rather by the worry that they may run out of food (Grasso, 2020). This behaviour is "transmissible," as shown by Grasso (2020). The perception of scarcity is self-fulfilling, since the more people hoard, the more others become infected with the panic, and as a result, the food runs out more quickly. Grasso (2020) demonstrates that the perception of scarcity is self-fulfilling. Second, there is more evidence to suggest that this conduct is a response to anxious or unsure feelings. Throughout human history, stressful unfulfilled conditions like natural catastrophes, wars, diseases, and other similar occurrences have led to panic buying and hoarding of various goods. It is a strategy for coping with a situation that is fraught with uncertainty. Third, it's possible that relinquishing control over the future and giving in to the demands of society may lead to adhering to related patterns (Sim et al., 2020). A consumer's perception of a loss of control over their purchasing decisions might leave them with an uneasy feeling that drives them to seek compensation in the form of more purchases (Chen et al., 2017). However, rash shopping decisions can have a number of unintended consequences, including an increase in the cost of food and an over use of available food supply (Cranfield, 2020; WHO, 2020a).

In addition, the presumption that customers will store up on non-perishable items implies that they will be required to substitute foods from different food categories. Inadvertently discouraging customers from taking the necessary servings of fruits and vegetables can be a side effect of some substitution trends (WHO, 2003, 2015). In addition, people who have the financial means to purchase more food may hoard more than they require, which can wreak havoc on disadvantaged communities and populations (Naja&Hamadeh, 2020). This can prevent certain vulnerable groups, such as the elderly or the poor, from obtaining certain food items (Wesseler, 2020).

Second, at the individual, family, and national levels, COVID-19 altered people's eating patterns and diet consistency, which resulted in a lower nutritional and health status [For example, all types of malnutrition—undernutrition, micronutrient deficiencies, and overnutrition (cf. overweight/obesity)—rose worldwide, as did food-related non-communicable diseases] COVID-19 also caused a rise in the number of people who were infected with COVID-19 (UNSCN, 2020). As a result of lockdowns and quarantines, the disruption of regular routines worsened feelings of worry and made it difficult to maintain a balanced diet. This increase in anxiety, which in turn leads to fewer intentions for healthy eating, appears to be caused, at least in part, by uncertainty. Because of the increased worry and boredom, individuals will abandon their healthy eating behaviours and instead choose for more frequent snacking (Naidoo, 2020). In point of fact, negative emotions such as fear and anxiety lead to overconsumption, also known as "emotional eating," particularly of "comfort foods" (such as sweets and junk food), which are high in fats, carbohydrates, salt, and calories (FAO, 2020e; Moynihan et al., 2015; Ylmaz&Gokmen, 2020). This can have a negative impact on one's health.

Socio-economic impacts of COVID-19 pandemic on food consumption

Despite unprecedented levels of official assistance, the COVID-19 pandemic produced a catastrophic worldwide economic and financial crisis for the year 2020, as well as growing rates of unemployment and poverty on a global scale (Brodeur et al., 2020; McKibbin& Fernando, 2020). Because of travel restrictions and increased social isolation, the labour force in all areas of the economy has decreased, which has led to the loss of a significant number of jobs. In addition to this, there has been a decrease in the demand for produced goods and commodities. It was forecasted that the global economy will contract by three percent in the year 2020. It was announced in June 2020 that the company has amended their projection to a 4.9 percent decrease. According to projections made by the World Bank (2020a), the global GDP will drop by 5.2 percent. According to the OECD, it is anticipated that the GDP of the entire world would

decrease by a range of 6.6 to 7.6 percent by the year 2020. This prediction is contingent on the progression of the second wave of COVID-19 (OECD, 2020). It is anticipated that this downturn will be the most severe economic downturn since the end of the Second World War and will be far more severe than the worldwide financial crisis that occurred in 2008–2009. (International Monetary Fund, 2020b). There is a high probability that the economic downturn will have a significant impact on food consumption, which will promptly have an effect on the general quality and diversity of diets. According to CIHEAM (2020, page 13), "the largest impact of the pandemic on demand will be considerably deeper and long-lasting." [Citation needed] It is the direct consequence of substantial cutbacks in income brought about by the massive economic crisis that has gripped the whole world.

To begin, the food supply was severely hampered by the severe economic downturn that was brought on by the COVID-19 epidemic (Laborde et al., 2020). Over 140 million people throughout the world might fall into extreme poverty in 2020 if social and economic mitigating measures are not put into place. This is a 20 percent increase from 2019, with the majority of the increase occurring in sub-Saharan Africa and South Asia. According to Sumner et al(2020) 's estimations, the COVID-19 economic shutdown will force an additional 420–580 million people into poverty, making this the first time since 1990 that worldwide poverty has increased. People's purchasing power would dramatically decrease as a result of the recession, which would have an impact on the availability of food and lead to an increase in food insecurity, both of which would have an effect on people's diets as a whole (FSIN, 2020; Swinnen& McDermott, 2020). It is possible that by the year 2020, the pandemic will have increased the number of people who are undernourished by 83 to 132 million, and it will have increased the number of people who face extreme food insecurity by 135 million (FAO, 2020a; World Food Programme, 2020a).

Impacts of the COVID-19 pandemic on food consumption in the GCC

Gulf Cooperation Council members are Saudi Arabia, the United Arab Emirates (also known as UAE), Kuwait, Oman, Qatar, and Bahrain. These six Arab Middle Eastern countries have a combined population of 57.694 million people and a GDP of US\$ 1.647.893 billion in 2019. (World Bank, 2020a). The massive hydrocarbon resources, which account for 30 percent of the world's proved oil reserves and 22.2 percent of the world's proven natural gas reserves, have contributed to the region's status as one of the wealthiest in the world. The economy of the GCC nations are primarily driven by revenues from oil and natural gas. Up to fifty percent of the gross domestic product and ninety percent of exports and government revenues in the GCC countries were derived from oil in 2019. (World Bank, 2020c).

The United Arab Emirates (UAE) reported the first verified case of COVID-19 in the Middle East and GCC countries on January 29, 2020. (CNBC, 2020). In subsequent months, throughout

the months of February and March, Bahrain, Kuwait, Oman, and Qatar reported their first instances of the disease. Since then, the governments of the GCC have implemented preventative measures and protocols, such as imposing travel restrictions and curfews in important cities, as well as making medical care completely free for patients (Alandijany et al., 2020; Gulf Health Council, 2020). Although it was absolutely necessary to take these steps in order to stem the spread of COVID-19, doing so has had a severe impact on the economic activities inside the country (El-Saharty et al., 2020). In addition, lockdowns that were implemented to halt the epidemic led to a significant reduction in the worldwide demand for oil, which led to a steep decrease in the price of oil. Disruptions in trade and tourism added more headwinds to the situation (International Monetary Fund, 2020c). In the GCC area, "COVID-19 has created negative supply and demand shocks, and the oil price decrease has hit fiscal revenues hard and reduced external balances," as El-Saharty et al. (2020, page 40) point out. "These two factors have combined to impair the country's external balances." It is anticipated that the most major channel via which the consequences of COVID-19 would be felt in GCC nations will be the large decrease in oil prices brought about by COVID-19. This is because of the GCC countries' exposure to oil and gas exports (Arezki& Nguyen, 2020). In point of fact, despite the efforts of OPEC and its allies, global oil consumption fell by 10 percent in 2020, reaching a total of 94.7 million barrels per day. This was in contrast to the average price of oil, which fell by 33 percent, from 61.41 dollars per barrel in 2019 to 41.26 dollars per barrel in 2020. (World Bank, 2021). According to a report published by the International Energy Agency in 2020, "Road travel in regions with lockdowns plummeted by 50 to 75 percent, with worldwide average road transport activity plummeting to less than half of what it was in 2019." By the end of the first quarter of 2020, the number of people travelling via aeroplane had decreased by sixty percent (IEA, 2020). The decline in global oil demand and prices made the economic recession in 2020 even worse for the GCC, which is still highly dependent on hydrocarbons (an average of 40 percent of GDP, 70 percent of government income, and 75 percent of exports). As a consequence of this, the GDP of the GCC states is projected to decrease by 4.8 percent in the year 2020, which would be worse than the results seen in the worst years of the global financial crisis in 2008 and 2009 and the worst years of the oil price decline in 2014 through 2017.

Second, the efforts that are being taken to manage COVID-19 are causing more serious disruptions in the tourist, transportation, and retail sectors than was originally expected (International Monetary Fund, 2020c). There would be significant implications as a result of an increase in unemployment and a decrease in pay in the GCC area because of the large number of workers (both residents and expats) in the services industry in that region (Telci, 2020). As a result, the majority of GCC countries implemented plans to decrease the number of workers in a variety of industries, most notably the oil and gas industries (Tahir&Bhatti, 2020). Several GCC nations have also implemented stimulus measures in order to assist their population and develop

their commercial sector. As an illustration, Kuwait increased the amount of funding available to small and medium firms by 16.5 billion dollars. A reform programme of 11.4 billion dollars was initiated in Bahrain (ESCWA, 2020a).

The pandemic caused by COVID-19 also had an effect on food consumption patterns and food security in the GCC. Indeed, the way in which people consume food, as well as buy it and interact with it, has undergone substantial transformations. In the Gulf Cooperation Council, various consumer trends that are impacting food and health habits have been discovered, according to a number of research and assessments (GCC).

To begin, lockdowns alter the manner in which individuals purchase food since going to the grocery store is now connected with risk (fear of the virus, lengthy queues). Since the beginning of the pandemic, there has been a significant increase in the amount of people in the region who purchase online, and local delivery applications have followed suit (e.g., Talabat, Uber Eats, Instashop; Altios, 2020). Online grocery shopping has increased across the region, with 33 percent shopping online more frequently 2020, according to a study that was published by IPSOS, a multinational market research firm, on the impact of COVID-19 on consumer habits in six markets in the Middle East and North Africa (MENA) region. These markets include Morocco, Tunisia, Algeria, Egypt, Saudi Arabia, and the United Arab Emirates. According to research conducted by Choueiri Group (Food Navigator, 2020), in April 2020, 55% of Saudis shopped for groceries online, which represents a significant increase from the 6% who did so before COVID-19. People of all ages are turning to internet shopping as a way to avoid the crowdedness and lengthy queues that are commonplace at grocery stores. In the United Arab Emirates, there has been a noteworthy rise in the demand for food and general merchandise. Several merchants saw an increase in sales of between 20 and 40 percent during the first half of March compared to the same period in 2019. There has been a significant rise in the number of websites that offer food and beverages over the internet, with delivery periods varying from two to ten days and minimum order sizes rising (KPMG, 2020). App downloads climbed by 70 percent, daily orders increased by 50 percent, and basket value increased by 60 percent by March 2020, as reported by InstaShop, a grocery delivery service operating in the United Arab Emirates (Khaleej Times, 2020). In Qatar, Ben Hassen et al. (2020) detailed an increase in the number of people shopping for groceries online

Of the respondents, 35.35 percent stated that they had increased the amount of food they purchased online. According to Choueiri Group (Food Navigator, 2020), there is a strong possibility that the rapid growth of the eGrocery industry in the region will continue even after the epidemic has passed, which would eventually cause a substantial shift in the behaviour of customers. According to the findings of a survey that was carried out by Alhousseini and Alqahtani (2020) during the COVID-19 era, the percentage of Saudis who purchased food online

climbed from 3% to 28.6%. Previously, the majority of respondents (93 percent) purchased things from the market, but during the COVID-19 period, this figure dropped to 66.7 percent. According to AlTarrah et al. (2021), p. 73 percent of the respondents in Kuwait reported modifying their behaviour regarding food purchasing, with 44 percent shopping less than they normally would. One in three respondents preferred shopping online, 25.6% spent less time shopping, and 27.6% bought more food (in quantity) each time they went grocery shopping.

Second, as a consequence of COVID-19, people in the region altered both their food and their way of life, which was visible all over the world. Other changes, on the other hand, have been deemed maladaptive and are regarded as potential threats to the pandemic as well as numerous public health advancements in a variety of countries. This is despite the fact that certain changes have been applauded because of their propensity to enhance health and reduce the risk of severe illness. Indeed, on the one hand, people who live in that region have been forced to reevaluate their lifestyles and pay more attention to the foods they eat. People in and around the GCC have been concerned about maintaining a nutritious diet in order to strengthen their immune systems and better fight off COVID-19 (Altios, 2020). This represents a change for the better because countries within the GCC are struggling with a broad variety of health problems, including rising obesity rates as well as bad diets and ways of living (Samara et al., 2019). Several studies were conducted before the pandemic that demonstrated the high prevalence of illnesses that are connected to lifestyle choices in the GCC area. For instance, in the United Arab Emirates (UAE), cardiovascular disease (CVD), cancer, diabetes, and chronic respiratory illness were responsible for 77 percent of all fatalities, and the probability of dying prematurely from one of these illnesses was assessed to be 17 percent. Also, in Qatar, according to Al Thani et al. (2018), more than 83 percent of people did not meet the recommendations for their intakes of vegetables, fruits, whole grains, legumes, and high-fiber foods; percent of people were overweight or obese; 50–72 percent regularly consumed sweetened beverages and sweets; and nearly a half regularly consumed fast foods. Concurrently, the prevalence of obesity among Qatar's adult population has increased steadily from the year 2000. (Al Thani et al., 2018). According to a survey that was carried out in 2017 by the Ministry of Health in Oman, respectively 69.3 and 63.3 percent of the population was either overweight or obese. In addition to this, it highlighted a considerable rise in adult obesity rates from the year 1991. (Ministry of Health of the Sultanate of Oman, 2017). Oman, like the rest of the Gulf Cooperation Council area, has one of the highest rates of childhood obesity (World Obesity Federation & The Gulf & Lebanon Recommendations Expert Group, 2020). As a consequence of this, a significant proportion of the Omani population suffers from non-communicable diseases (NCDs), including type 2 diabetes, kidney disease, and heart disease (Ministry of Health Sultanate of Oman, 2014). In addition, in 2017, 57.3 percent of women and 63.9 percent of men reported eating fewer than five servings of fruit and vegetables each day (Ministry of Health of the Sultanate of Oman, 2017).

RESEARCH METHODOLOGY

This research assessed the economic and social impact of COVID-19 on the tourist and hotel industry in Oman. In this respect, a structured questionnaire was distributed to business owners operating in the tourist and hospitality industry of Oman. The questionnaire consisted of four pieces; the first component covered demographic variables and data of their enterprises. The second segment featured the questions connected to economic effect; the third section comprises questions related to social impact; and the fourth section includes open-ended questions linked to initiatives for the future. The data was collected from September 2020 to January 2021 from micro (<five employees), small (6–25 staff), medium (26–99 staff), and big, size-companies (99 and above) (99 and above). In Oman, tourism and hospitality business include cafés, restaurants, campings, events management, farms booking, guesthouses, hotels, motels, taxis booking (local travel-local touring, etc.), tour/holiday packages, tour guides (local sight-seeing, etc.) and travel booking (airlines-national/international).

RESULTS AND ANALYSIS

At the conclusion of the survey period, the information gathered from the 97 respondents was provided with 15 organisations operating in the tourism and hospitality industry. Approximately 68 percent of the people who operate their own businesses are between the ages of 35 and 55, and the majority of them have either a bachelor's degree (47.4 percent), a postgraduate degree (23.7 percent), or a secondary school diploma (19.6 percent). The hospitality industry was represented by the bulk of replies received (34 percent), specifically hotels, followed by motels (15.5%), coffee shops/restaurants and farm reservations (12.4%), tour and vacation package responses (11.3%), and guesthouses (10.3 percent). The majority of those who responded have their businesses located in Muscat (the Capital), which accounts for 43.5% of the total. Al-Dhakiliyah (14.5%) and Ash-Sharqiya North (13%) come in second and third, respectively, and the remaining respondents are spread out across the remaining eight governorates.

. Economic impact of COVID-19 on tourism and hospitality industry

To explore the economic impact of the COVID-19 on the tourism and hospitality industry, various parameters have been included in the questionnaire related to economic aspects. The analysis of data is presented from Tables.

TABLE 1 the impact of the COVID-19 outbreak on the tourism and hospitality businesses

Level of impact areas of impact	Insignificant	Minor	Moderate	Major	Severe

Level of impact areas of impact	Insignificant	Minor	Moderate	Major	Severe
Financial situation	4.1	3.1	8.2	17.5	67
Customer demand for the business products/service	6.2	3.1	11.3	20.6	58.5
Suppliers and supply chain	7.2	6.2	16.5	25.8	44.3
Channels of distribution of the business products/services to customers	3.1	10.3	18.6	27.8	40.2
The overall impact of COVID-19 on the business	3.1	1.0	10.3	18.6	67

TABLE 2 Impact of COVID-19 on international business

Level of impact areas of impact	Insignificant	Minor	Moderate	Major	Severe
Reduction in International visitors	0	3.1	7.2	4.1	85.6
Reduced levels of inquiries/bookings from International visitors	1	6.2	6.2	5.2	81.4
Rearrangement/postponement of future bookings from international visitors	4.1	4.1	7.2	7.2	77.3
Cancelation of future bookings from international visitors	6.2	3.1	6.2	6.2	78.4
Canceled international events	7.2	3.1	8.2	5.2	76.3

TABLE 3 Impact of COVID-19 on domestic level businesses

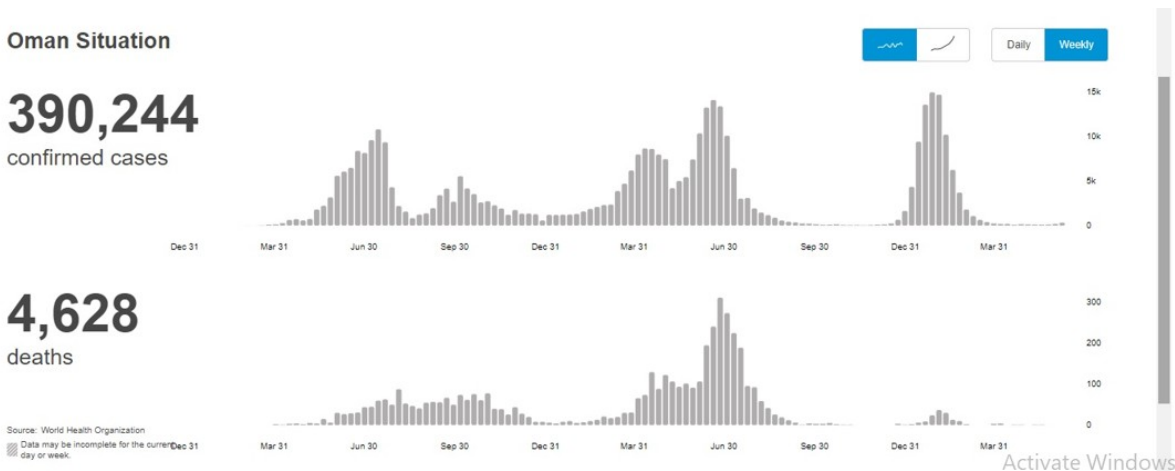
Level of impact areas of impact	Insignificant	Minor	Moderate	Major	Severe
Reduction in domestic visitors	4.1	5.2	11.3	29.9	49.5
Reduced levels of inquiries/bookings from domestic visitors	7.2	4.1	10.3	37.1	41.2
Rearrangement/postponement of future bookings from domestic visitors	5.2	3.1	19.6	35.1	37.1
Cancelation of future bookings from domestic visitors	9.3	4.1	15.5	32	39.2
Canceled National/local events	4.1	5.2	19.6	16.5	54.6

TABLE 4 Risk of business closure period

Time to close	Number of responses	% of responses
No business closure	37	38.10
Less than a month	8	8.20
1–2 months	5	5.20
2–4 months	11	11.30
4–6 months	9	9.30
6–12 months	17	17.50
More than 12 months	10	10.30
Total	97	100

As per WHO(world health organization) current report related to Covid -19 states that “In Oman, from 3 January 2020 to 5:40pm CEST, 22 June 2022, there have

been 390,244 confirmed cases of COVID-19 with 4,628 deaths, reported to WHO. As of 19 June 2022, a total of 7,068,002 vaccine doses have been administered.”



<https://covid19.who.int/region/emro/country/om>

CONCLUSION

Oman's tourist and hotel business has been hit hard by the COVID-19 epidemic, which has had a negative impact on the country's economy and society. When calculating the economic effect, factors such as monetary loss, client demand, logistics and distribution networks, connection with suppliers, and staff turnover were taken into account. The losses were incurred as a direct result of the closing of the border, which led to the cancellation of bookings and the prolonged delay of sporting, business, and cultural activities. Because of this, businesses have not gotten as many enquiries from domestic and international travellers, which has a negative impact on future reservations. It was difficult for the firm to manage both their fixed and variable business costs, which led to huge losses. As a result, the company feared that it could be forced to permanently close its doors. In order for businesses to make it through this challenging time, they have turned to various survival strategies, such as temporarily laying off employees, cutting compensation for both themselves and their employees, and scaling back on the number of services and goods they offer. In this precarious condition, the stringent rules and regulations imposed by the government have made it even more difficult to manage the firm. Because there were insufficient resources and personnel available, businesses were unable to satisfy the requirements set forth by their patrons. As a result of the lack of clarity over when the tourist and hospitality sector in Oman would begin to recover, long-term strategies of companies have also been disrupted. The COVID-19 epidemic has had a significant and widespread impact on the owners of businesses in the tourist and hospitality industries. The lockdown has not only had a financial impact on the owners, but it has also left them emotionally and mentally drained. Among these owners, the

symptoms of despair, apprehensions, rage, boredom, irritation, restlessness, uneasiness, and loneliness appear to be particularly prevalent. Despite the fact that all of the precautions had been taken, the owners had a tough time adjusting mentally to the new standard of living.

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