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A Look Back at SARS and SIP

The recent outbreak of SARS has had a devastating effect upon numerous cities across the globe. Previously, Bob McKercher (2003) looked at how SARS spurred an outbreak of what he labeled SIP (SARS Induced Panic), the results of which were the virtual shutting down of the tourism economies of these cities. This paper further explores SIP, considers the genesis of the panic on the part of international tourists, and suggests some reasons, with the benefit of hindsight, why a disease with such limited medical impact had such a profound impact upon tourism.

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Bob McKercher's (2003) persuasive and passionate essay, "SIP (SARS Induced Panic) a Greater Threat to Tourism than SARS (Severe Acute Respiratory Syndrome)", in the inaugural issue of this journal, made strong and valid points related to the impact of SARS upon the Hong Kong tourism industry, and coined a clever new term, 'SIP', for the tourism lexicon. With the disease thankfully now in remission, it seems appropriate that a look back be taken to consider the genesis, even the logic, of SIP, addressing such questions as: What was the grip of the disease? Why has the limited medical impact of the disease had such a profound effect on the tourism industry?

McKercher's choice of the word 'panic' suggests, per its dictionary definition a "sudden, overpowering, unreasoning fear, especially. when many persons are affected" (Cassell 1995). But was SIP an unreasoned fear on the part of tourists? It can be argued that that the reaction of tourists to SARS was not at all unreasoned - rather their collective decision to avoid Hong Kong, Singapore, China, Toronto, and other affected (regardless of degree of severity) regions was, from a consumer behavior perspective, in fact quite rational.

Any consumer has the ability, at any time and for any reason, to decide not to visit destination 'A' this year, and instead to vacation at destination 'B'. If the traveler harbors any doubt, any doubt at all, regarding a destination's safety, health or otherwise, then why should they chose to go to that destination when the world offers such a cornucopia of choice?

Foregoing a specific destination is a relatively easy choice, made easier with the knowledge that the destination will still be there next year, the following year, and the year after that. It is not like selecting a college (you only go once) or even an automobile that one will drive for several years, with models changing annually. When it comes time to selecting a vacation destination, there are many great choices and many attractive options. Why decide to vacation at a destination that raises questions and doubts, or worse fears - rational or otherwise? Why, with all the places to go in the world, would a tourist decide to spend their two weeks in a place where the locals feel safer, regardless of the actual degree of risk, wearing masks?

A second issue that undoubtedly contributed to SIP was the need to factor into the equation potential vacationers' awareness of the related social issues tied to their travel decision. Returning home from Hong Kong, Singapore, etc. during the SARS outbreak meant not just the risk that the traveler may have been infected during his/her visit, but far more concerning the chance they could return home a carrier of the disease with the potential of infecting family, friends, colleagues, etc. This presents an interesting contrast with another (borrowing McKercher's term) form of SIP; Washington, D.C.'s Sniper Induced Panic. Was it rational for travelers to avoid the American capital during the two weeks that snipers were on a fatal rampage? Clearly the odds of being shot were slim -statistically about the same as contracting SARS. Like SARS, sniper victims were not typically shot in touristy areas. But what makes the DC issue different than SARS is that when tourists decided to visit DC the only one put at risk, again, however slim, was him/herself. At the end of their stay the tourist would not return home with any chance of inflicting their tragedy upon others.

The recent SARS outbreak is certainly not the first time a SIP-like tourism phenomena as been noted. Several years ago, a limited outbreak of pneumonic plague infected parts of western India, far off the tourist track. At the time, the Singapore government (Ministry of Health), this past year so legitimately concerned with the tourism impacts of SARS in the Republic, cautioned their citizens against unnecessary travel to India (Straits Times 1994a) - even though the World Health Organization indicated that the chances of a tourist being exposed to the disease was "almost zero" (Straits Times 1994b). During Miami's unfortunate tourist shooting spree of the



early nineties, tourism cancellations state-wide were as high as 35% (Booth 1993), although the problem was essentially limited to the Miami airport. And each time hostilities flare in the Middle East, Americans simply stop traveling anywhere east of London, for fear of getting anywhere near danger. Such examples abound. What is consistent among these, is how it is the tourism industry, and the tourism workers, who share the consequences along with the actual victims, while, as noted earlier, the tourists don't suffer at all - they just go somewhere else this year for vacation.

Clearly, in today's electronically interconnected world, news events, no matter where in the world they may occur, have the propensity to become magnified beyond reason. Prior to the days of CNN, BBC Worldwide, and the Internet, an incidence of a disease in Hong Kong that killed several hundred people would not have been the major news item that it became in the year 2003. This, however, is the new reality in which we live. For destination marketers, the lesson SARS and SIP have provided is how critically important it has become in our electronic world to provide as much honest and timely information as possible, thus allowing tourists the opportunity to make informed, reasoned, and logical decisions. The bright side is that when problems are resolved, as it seems that SARS has been, the information media can now just as quickly spread that good word, facilitating what hopefully can be an equally rapid recovery process.

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