



Purpose of the Note

This briefing note:

- Summarizes the 2001 outbreak of Foot and Mouth Disease in livestock in the United Kingdom.
- Describes the consequences and lessons that were identified at the time about how best to address challenges faced by rural communities in the midst of a large-scale ban on visiting the countryside.
- Considers how we might draw insights from this episode for the rural tourism sector today, addressing the challenges of a global lockdown caused by COVID-19 (the novel coronavirus).

This briefing note is intended for policy-makers who are responsible for rural tourism policy and provide support for tourism businesses, for regional tourism associations and destination marketing organizations, and for businesses in the tourism sector.

About the MacEachen Institute

The MacEachen Institute for Public Policy and Governance at Dalhousie University is a nationally focused, non-partisan, interdisciplinary institute designed to support the development of progressive public policy and to encourage greater citizen engagement.

Authors

Kevin Quigley, PhD
Jocelyne Rankin

Contact

For more information on this research, contact mipp@dal.ca

Foot and Mouth Disease in the UK in 2001: Observations for Policy-Makers and the Rural Tourism Sector in the age of COVID-19

Key Observations and Recommendations

- Rural tourism, like other sectors, must react quickly to crises, and their responses should be underpinned by the best (scientific) information.
- Responses must be formulated with a view of the rural economy as a whole not piecemeal, sector by sector.
- There are two principal parts to the communications challenge: (1) Short-term responses that focus on immediate issues, e.g., clear and consistent directives, correcting misinformation; and (2) Medium-term responses that are more strategic and communicate the return of the rural community after the threat is over.
- Knowing one's market is important; international travellers who come for extended stays and day-trippers from the city are both important markets and have different needs.
- Key stakeholders must be consulted in the process. Some key stakeholders may not be particularly well-organized, -funded or -represented. These factors may make it more difficult to learn their views and build consensus in the sector though both are important for sustainable solutions.
- Crises often highlight weaknesses and vulnerabilities that already existed. Some communities are more severely affected than others and take longer to recover.
- Bureaucratic inertia and entrenched interests in policy circles can slow the process and result in outcomes that are perceived to be unfair; organizational redesign in public agencies does not necessarily address these challenges.
- Crises may present opportunities to improve; there could be opportunities to further professionalize and coordinate the sector as well as make strategic improvements in slow years with an eye to medium-term recovery in light of emerging trends (e.g., aging population).

COVID-19: Impact on Tourism in Rural Communities

Tourism and transportation have been among the hardest hit sectors of the economy during the global pandemic (United Nations World Tourism Organization [UNWTO], 2020a). In effect, borders have closed, cruise ships have cancelled sailings, airlines are facing a stark lack of demand, amenities have been closed, and social distancing measures have kept families at home. Compounding this is the reality that widespread job losses have led to income insecurity and a diminished demand for leisure travel, accommodation and food services (e.g., cafés, restaurants, pubs). In some locations, tourism businesses have shifted their focus to supporting the response to the pandemic by making their establishments available to quarantine people, to host healthcare workers or to become healthcare units.

Tourism is a labour-intensive sector and is one of the most affected with millions of jobs at risk through the whole of the value chain. This will particularly affect the most vulnerable populations such as women, youth and rural communities (UNWTO, 2020b).

Rural communities and economies in Canada have particular vulnerabilities when it comes to the impacts of COVID-19 due to factors such as smaller populations (which means a limited workforce and a smaller tax base), longer distances to markets, seasonality of economic activities, reliance on a smaller number of industries, and limited broadband internet connections (Canadian Rural Revitalization Foundation, 2020).

Anecdotal evidence from Britain indicates that COVID-19 is creating new tensions within and between communities over social distancing and purchasing behaviours. Residents of rural communities have expressed concerns about commuters and urban visitors to the countryside over fears of disease spreading and scarcity of provisions. Roadside signs have been posted asking visitors to stay away from the Lake District and rural Wales and visits to second homes as rural sanctuaries have been especially divisive (Phillipson *et al.*, 2020).

Despite these challenges, there are indications that domestic tourism could reactivate relatively quickly after the crisis. People will be looking forward to travelling short distances to take advantage of all the benefits rural areas can offer: nature, gastronomic experiences, cultural activities, wellness and adventure outdoor programmes, handcrafted products, among others. Therefore, it is important for businesses, especially those in rural areas, to take advantage of this time and prepare themselves to face the challenge of recovery when travel restrictions are eventually lifted (UNWTO, 2020c).

Is Foot and Mouth in the UK in 2001 comparable to the global lockdown brought about by COVID-19 in 2020?

We recognize that health, social and economic consequences of COVID-19 are occurring on a much larger scale than the 2001 Foot and Mouth Outbreak in the UK. Indeed, the unprecedented nature of the situation makes it difficult to find comparable cases from which to draw lessons. Also, the human-to-human transfer of COVID-19 raises important questions about whether or not rural communities would welcome visitors in their communities lest they spread the virus. In contrast, Foot and Mouth could not be transmitted to and between humans.

Nevertheless, we believe that the large-scale shutdown of the UK British countryside, the (sometimes underappreciated) importance of the tourism sector in the economy as a whole and

the highly fragmented nature of the sector, composed largely of small businesses, provides an opportunity to examine the case in light of some of the challenges brought about by COVID-19.

Also, while the current circumstances have resulted in many jurisdictions looking to others for ideas about how best to manage the health, social and economic risks associated with COVID-19, there is still considerable uncertainty in all regions. While Foot and Mouth is far from a perfect point of comparison, it provides us with an example that has occurred and been studied. We can now look back and consider which interventions worked and which did not, and what lessons have been identified for future reference.

The Appendix contains a table that describes the similarities and differences between these two events in more detail.

What is Foot and Mouth Disease?

Foot and mouth disease (FMD) is a highly contagious viral infection that affects livestock such as cows, pigs, sheep, goats and other animals with divided hooves. FMD is characterized by open sores around the mouth, on the mammary glands, and between the hooves, acute lameness and reluctance to move, fever, loss of appetite or milk production (Canada, 2012).

The significance of the disease is related to the ease by which the virus can be transmitted through all secretions and excretions from infected animals. It can also spread indirectly through footwear, clothing or equipment contaminated with the virus, feed or water, and through the air. Pigs contribute more to airborne transmission because they excrete very large quantities of virus compared to other species (Canada, 2012). FMD is not a public health risk to humans and is not related to the childhood disease called hand, foot and mouth disease caused by the Coxsackie virus (Canada, 2012). Nor is FMD a food safety issue because affected animals are easily identified and removed from the food chain, and the virus is killed by cooking.

2001 Outbreak in the UK

The United Kingdom suffered an extreme outbreak of foot and mouth disease in 2001 that originated at a farm where unprocessed food leftovers (swill) containing imported meat infected with the virus was fed to pigs. From there the disease spread quickly and affected over 2,000 premises in Britain (1,722 in England, 187 in Scotland and 117 in Wales) in 44 counties. The outbreak lasted seven months and led to the slaughter of more than six million animals. The direct cost to the public sector is estimated at over £3 billion and the cost to the private sector is estimated at over £5 billion (National Audit Office, 2002).

Foot and Mouth Disease and Tourism

The crisis of FMD, which began as a farming disaster, had a much wider impact on a range of sectors of the economy, most notably on tourism. To limit the spread of FMD the government advised the public at the start of the outbreak to stay off farmland and avoid contact with farm animals. A few weeks later, local authorities were empowered to close walking and horse-riding paths in rural areas, which effectively closed the 240,000 kilometres of public rights-of-way in Britain that are significant in attracting visitors to rural areas. Other tourist attractions and events were closed to the public or cancelled including access to public lands, some national parks and forest areas, and even parks in south-west London. These measures were comparable to placing

the entire British countryside under quarantine, with immediate and inevitable consequences for the rural tourism industry (Sharpley and Craven, 2001). In February 2002, the Office for National Statistics reported that in 2001 the number of visitors from overseas fell by 9 per cent to 22.8 million — the lowest since 1994 (20.8 million) (Frisby, 2002). The FMD crisis lasted from February to September 2001; the terrorist attacks on September 11, 2001 caused a substantial loss of income to the tourism sector and the wider economy as worldwide travel plummeted.

A compounding effect to the FMD crisis was the role of local and international media. Television newscasts provided detailed coverage of spiralling numbers of livestock infections and “viewers at home and abroad watched in horror as the British countryside was denuded of livestock and the smoke from burning carcasses continued to rise” (Frisby, 2002, p. 90). As a result, visitors to Britain cancelled their trips and looked for alternative destinations. The worldwide coverage of the FMD crisis was sensationalistic and at times inaccurate, and the reality on the ground was not nearly as bad as what was portrayed in the media.

The impact on the tourism sector was massive and widespread with losses estimated at between £4.5 and £5.4 billion. Visitor numbers fell to nearly zero in certain regions. The most severe impacts on tourism were on small accommodation providers, such as bed and breakfast establishments, guesthouses and self-catering accommodation (National Audit Office, 2002).

The devastation of the tourism industry highlighted the interdependence between farming and tourism. Tourism had become the dominant economic activity in many rural areas as traditional sources of income from farming had declined. Table 1 illustrates the economic comparison between agriculture and tourism in Britain with data from 2001.

Table 1: Tourism and Agriculture compared

	<i>Agriculture (all)</i>	<i>Tourism</i>
Revenue per annum	£15.3bn (total) £7.3bn (livestock & livestock products)	£64bn
GDP	1%	4%
Foreign exchange	£8.4bn (total) £1.0bn (livestock/dairy)	£12.5bn
Employment	1.5% of workforce	7% of workforce
Tax contribution	£88m	£1.5bn
Growth rate: 1996-1999	-21% in revenue	+26% in revenue

Source: Sharpley and Craven, 2001 (data from English Tourism Council, 2001)

Compensation

The Government had different approaches for supporting the agricultural sector compared to other non-farming businesses. Full compensation was provided to farmers for the loss of livestock and infected materials due to the enforced slaughter. Compensation amounts were based on the value of the animal immediately before it became infected by foot and mouth disease, in accordance with the 1981 Animal Health Act (National Audit Office, 2002). Compensation payments to farmers totaled nearly £1.4 billion. Full compensation was deemed necessary to ensure compliance with enforced slaughter to eradicate the disease.

In comparison, compensation measures for non-farming businesses were considered administratively complex and less reflective of the losses the sector sustained. To receive support, non-farming businesses could:

- Claim local tax relief from the local authority;
- Apply to Inland Revenue and Customs & Excise for the deferral of tax and national insurance payments;
- Apply to bank managers for extended lines of credit or capital repayment holidays;
- Apply for loans, guaranteed by the government, of up to £250,000 on a Small Business Service helpline;
- Seek advice on employment issues from local job centres (Sharpley and Craven, 2001).

A Business Recovery Fund worth £39 million was made available to help small non-farming businesses. The Regional Development Agencies contributed a further £12 million, of which most was used for tourism promotion (Donaldson *et al.*, 2006).

As a whole, these measures were seen as a confusing and insufficient package of support. Businesses were required to seek advice and financial assistance from a variety of sources and the financial support provided was short-term and primarily based on a deferral or loan basis. The uptake of these measures among non-farming businesses was low. The British Chamber of Commerce reported that only 10% of affected businesses applied for business rate relief or a temporary deferment of tax, VAT or national insurance payments (Sharpley and Craven, 2001).

The crisis highlighted in stark terms the importance of tourism to the rural economy. “Profound misconceptions about the role and relative importance of farming were rapidly over-turned, and the complexity of the relationships between farming and other rural businesses were starkly revealed” (Donaldson *et al.*, 2006, p.6).

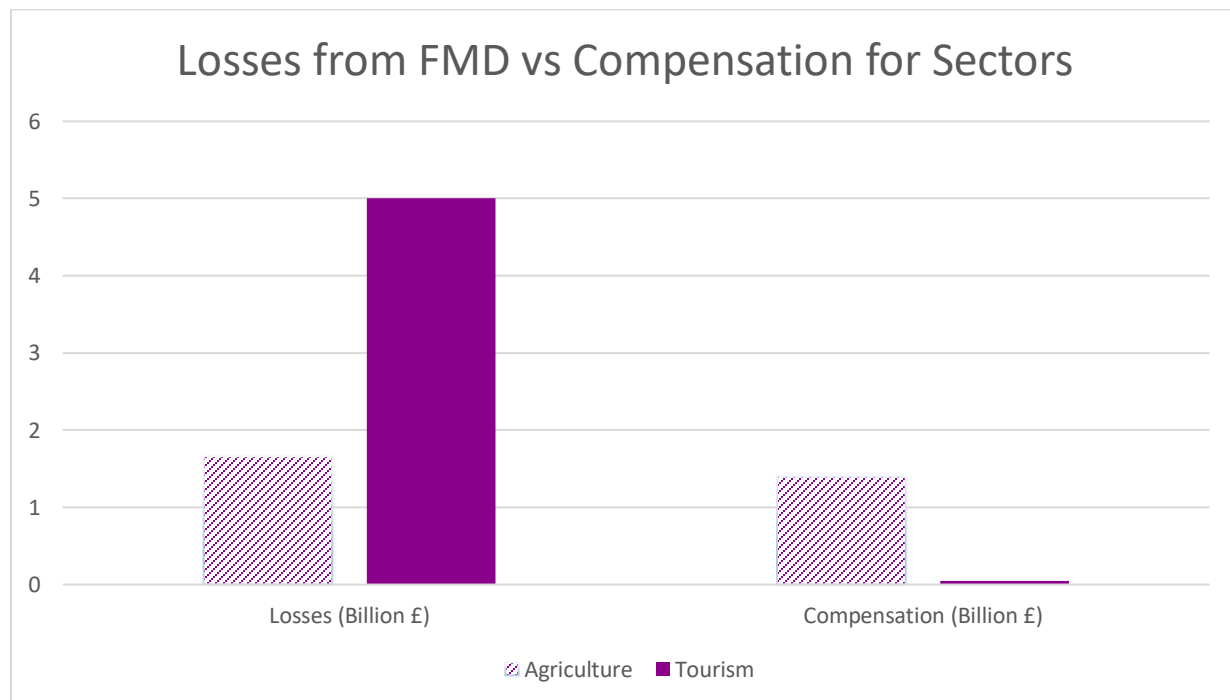


Figure 1: Estimated losses to the tourism and agricultural sectors due to the 2001 FMD outbreak and subsequent compensation received (National Audit Office, 2002).

Effectiveness of Tourism Marketing Campaigns

To deal with the devastation to the tourism sector, the British Tourist Authority (BTA) secured special government funding and formulated a recovery plan that included immediate and longer-term campaigns to remarket Britain and the British countryside.

The initial phase of the BTA's plan was to ensure that visitors had accurate information about what it was, and was not, possible to do around Britain; to develop a program to encourage overseas visitors back to the country; and to undertake strategic campaigns in key overseas markets to improve perceptions of Britain as a destination. Below are some examples of promotion and marketing campaigns that were undertaken:

- Up-to-date information and practical advice for the tourism sector was made available on the BTA website: www.tourismtrade.org.uk
- Businesses could advertise special offers to promote their product overseas on www.visitbritain.com
- The BTA recommended that businesses mail their upcoming clients and prospective visitors to let them know about activities and excursions they could still do and assure them that Britain was as welcoming as ever.
- The BTA published a Visitor's Charter on its website, which was a reliable source of information to reassure prospective tourists that the country was safe to visit, there were no restrictions on travel, the vast majority of attractions were open and the food was safe and plentiful.
- A new website was created – www.open.visitbritain.com – to answer visitors' questions about the outbreak, to provide advice on travelling around Britain and up-to-date information on the status of attractions, events and activities. This website became an important piece in the government's communication strategy about FMD for tourism, farming and scientific interests.
- The BTA kept in regular contact with its overseas offices to understand how the FMD outbreak was being perceived overseas and to keep them informed of developments and share best practices in responding to the crisis.
- The BTA developed a tactical marketing strategy for overseas audiences that included television, print and radio advertising, direct mail, e-mail blasts, press visits, newspaper and consumer magazine supplements, special offers and competitions and trade promotions.
- From September 2001 to March 2002 and beyond, the BTA planned to move into a recovery phase, which involved activities and programmes to ensure the longer-term sustainability of Britain's inbound tourism industry. The terrorist attacks of September 11, however, hit an already beleaguered inbound tourism industry even harder, as worldwide travel plummeted (Frisby, 2002).

Overall, the steps taken by the BTA were seen as a success. The response to the crisis was coherent, coordinated and cost-effective and undertaken in a very short time. It succeeded in counteracting the negative portrayal of Britain generated by the FMD crisis and replacing it with a positive picture in the overseas media (Frisby, 2002). There were some misgivings. Sharpley and Craven (2001), for example, make the point that the marketing efforts undertaken by the BTA were largely focused on rebuilding the international tourist market; rural tourism depends primarily on the domestic market (approximately 6% of overseas tourists visit the countryside).

Selected Outcomes and Lessons Identified

The Government response to the crisis was considered too heavily weighted towards the farming industry, which received £1.4 billion in compensation compared to only £50 million for non-farming businesses that suffered losses. This imbalance may be attributed to various factors, including the relative ease of accessing information and calculating losses for farms (based on livestock lost) compared to small rural non-farm businesses that are diverse and fragmented with relatively weak representation at the national level. By comparison, the agricultural sector is represented by the influential National Farmers Union (Sharpley and Craven, 2001). Overall, the measures aimed at assisting businesses in the wider rural economy were considered relatively small-scale, piecemeal and complex.

Closing the countryside was a costly mistake when it comes to rural prosperity; the economic importance of tourism was underappreciated. Contingency planning now refers to the need to consider the impact of an action on the rural economy as a whole.

The government was criticized for inconsistent messaging regarding visiting the countryside. Initially, government ordered people to stay off footpaths; five weeks later it said it was people's patriotic duty to return.

The regional and local media played an important role in reporting what was happening in their local communities. Local radio broadcasts provided up-to-date and regularly available information. During the peak of the crisis, certain regions broadcast British Broadcasting Corporation (BBC) updates five or even seven times per day. Central government should consider how best it can support and strengthen regional communications in times of crisis (Anderson, 2002).

Changes to Institutions and Policies

The most obvious change in the institutional landscape that resulted from FMD was the demise of the Ministry of Agriculture, Fisheries and Food (MAFF). MAFF was strongly criticized over its handling of the FMD outbreak, for its seemingly slow response, over-centralization and bureaucratic inertia. MAFF was replaced with the Department for Environment, Food and Rural Affairs. The importance of establishing rural economic regeneration programmes in the aftermath of the crisis was lost when the new Department of Environment, Farming and Rural Affairs (DEFRA) was formed. Originally set up to champion rural issues, DEFRA has been overwhelmed by other issues such as climate change, arguably eclipsing important aspects of rural affairs (Donaldson *et al.*, 2006).

The 2001 crisis revealed the extent and diversity of local rural economies in the UK and their vulnerability to a farm crisis. Remote rural economies remain weak and suffer persistent problems of low productivity and incomes (Donaldson *et al.*, 2006). A report assessing the impact of the FMD crisis on rural economies found that, five years after the crisis, economic growth in the worst-affected areas of the country (Cumbria and Devon) had lagged further behind the national average (Donaldson *et al.*, 2006).

MAFF may have been pressured by the National Farmers Union to close footpaths as this report states that the closures were not as a result of "explicit veterinary and scientific advice" (Anderson, 2002, p. 64).

Further Reading

- Irvine, W., and Anderson, A. R., 2005. The Impacts of Foot and Mouth Disease on a Peripheral Tourism Area: The Role and Effect of Crisis Management. *Journal of Travel & Tourism Marketing*, 19 (2-3), 47-60.
- Laws, E., Prideaux, B., and Chon, K. (Eds), 2007. *Crisis Management in Tourism*. Athenaem Press, Gateshead, UK.
- McConnell, A., and Stark, A., 2001. Foot-and-Mouth 2001: The Politics of Crisis Management. *Parliamentary Affairs*, 55 (4), 664-681.

References

- Anderson, I., 2002. Foot and Mouth Disease 2001: Lessons to be Learned Inquiry Report. Presented to the Prime Minister and the Secretary of State for Environment, Food and Rural Affairs, and the devolved administrations in Scotland and Wales. United Kingdom House of Commons. Available:
https://webarchive.nationalarchives.gov.uk/20100809105207/http://archive.cabinetoffice.gov.uk/fmd/fmd_report/report/TITLE_PG.PDF
- Canadian Rural Revitalization Foundation, 2020. Rural Insights Series: COVID-19, 1.1: Supporting Rural Economic Recovery & Resilience after COVID-19. Retrieved from crrf.ca/wp-content/uploads/2020/05/CRRFruralinsights-EcRecoveryResilience.pdf
- Donaldson, A., Lee, R., Ward, N., and Wilkinson, K., 2006. Foot and Mouth – Five Years On: The Legacy of the 2001 Foot and Mouth Disease Crisis for Farming and the British Countryside. Centre for Rural Economy Discussion Paper Series No. 6, University of Newcastle upon Tyne. Available:
<https://www.ncl.ac.uk/media/wwwnclacuk/centreforruraleconomy/files/discussion-paper-06.pdf>
- Frisby, E., 2002. Communicating in a Crisis: The British Tourist Authority's responses to the foot-and-mouth outbreak and 11th September, 2001. *Journal of Vacation Marketing*, 9 (1), 89-100.
- Government of Canada, 2012. Factsheet: Foot-and-Mouth Disease. Retrieved from <https://www.inspection.gc.ca/animal-health/terrestrial-animals/diseases/reportable/foot-and-mouth-disease/fact-sheet/eng/1330481689083/1330481803452>
- National Audit Office, 2002. The 2001 Outbreak of Foot and Mouth Disease. Report by the Comptroller and Auditor General, HC 939 Session 2001-2002.
- Phillipson, J. *et al.*, 2020. COVID-19 and Rural Economies. Centre for Rural Economy and Rural Enterprise UK, Newcastle University. Retrieved from <https://www.ncl.ac.uk/media/wwwnclacuk/centreforruraleconomy/files/researchreports/RE-briefing-Covid19-and-rural-economies.pdf>

Sharpley, R., and Craven, B., 2001. The 2001 Foot and Mouth Crisis – Rural Economy and Tourism Policy Implications: A Comment. *Current Issues in Tourism*, 4 (6), 527-537.

United Nations World Tourism Organization, 2020a. COVID-19: Putting People First. Retrieved from <https://www.unwto.org/tourism-covid-19>

United Nations World Tourism Organization, 2020b. Supporting Jobs and Economies through Travel & Tourism. Retrieved from <https://www.unwto.org/recommendations-for-recovery-covid-19>

United Nations World Tourism Organization, 2020c. UNWTO Webinar: Seizing the opportunity - Enhancing digital skills for the development of rural tourism in post COVID-19. Retrieved from https://webunwto.s3.eu-west-1.amazonaws.com/s3fs-public/2020-05/UNWTO%20webinar_Digital%20Skills%20for%20Rural%20Tourism.pdf

Appendix

Table of similarities and differences between Foot and Mouth Disease in the UK in 2001 and Coronavirus Pandemic (COVID-19) in 2020.

	Foot and Mouth Disease	COVID-19 Pandemic
Effect on humans	Insignificant	Ranges from asymptomatic to mild to severe flu-like symptoms causing death
Disease contagion	Very contagious for livestock	Very contagious for humans
Sectors affected	Agriculture and Tourism	All sectors
Geographic regions affected	Rural regions	Most cases occurring in urban centres with larger populations
Countries most affected	All UK (England, Scotland, Wales, Northern Ireland)	Global; in the West, key markets such as United States, the EU and the UK.
Government containment	Closure of walking and horse-riding trails, cancellation of rural events	Broad travel restrictions, 14-day quarantine required for out-of-province travellers, Only essential services allowed to operate; social distancing directives

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