# COMMUNITY BASED-TOURISM (CBT) MANAGEMENT DURING THE CORONAVIRUS PANDEMIC ALONG THE ANDAMAN COAST OF THAILAND

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**Abstract:** Community-based tourism (CBT) have been challenged in the Coronavirus 2019 era. This qualitative research aims to explain the CBT management during the Coronavirus 2019 pandemic in five communities of five provinces along the Andaman coast of Thailand. The data were collected via online in-depth interviews and online focus group discussions, from totally 10 key informants of CBT entrepreneurs (two from each province/community). The data were analyzed by using content analysis. The results revealed that the CBT management during the Coronavirus 2019 pandemic was based on the communities' cultural and natural resources. The tourism operation was focused on building confidence and safety for tourists.

Key words: Community Based-Tourism (CBT), Coronavirus 2019, Pandemic, Andaman Coastal Area, Thailand

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# INTRODUCTION

Tourism has been a consistently growing branch of industry since the beginning of the 21st century (Dogru et al., 2021). This industry has a significant positive impact by stimulating the economy globally, including consumption, trading, investments, and domestic and international employment (Pyke et al., 2016; Qian et al., 2018). However, obvious trends of healthcare and safety changes, as well as environmental and natural resource changes, have strongly impacted the world's tourism industry, resulting in transformative tourism. Its platform and management can thus lead to improved tourist well-being (Pung et al., 2020). Due to the heavy Coronavirus 2019 pandemic during 2019-2020, movements of and travel by people, whether for tourism or for business, were considered factors contributing to the pandemic (Shi and Liu, 2020).

Besides, expansion of businesses, infrastructure, and other facilities has affected the limited environment and natural resources (Agarwal et al., 2019). Therefore, this dramatic situation provided a chance to review tourism industry and to reset the system of tourism development for a better future (Koodsela et al., 2019). The new direction of tourism could be dominantly community-based tourism (CBT), and it is expected to gain popularity (Sirivejjabhandu, 2022). This is because the community-based tourism framework focuses on rights as well as benefits of communities and their people (Higgins-Desbiolles, 2020), and it could help to reduce poverty over communities efficiently (Croes, 2014), provide employment in tourism (Lee et al., 2018), and generate equality of incomes and resources (Giampiccoli, 2020). The community-based tourism is considered a way to develop communities in terms of resource management by applying local culture and society to stimulate community spirit in clear distinction from mass tourism (Rungrat et al., 2017). As a result, a large number of tourists in mass tourism areas can be distributed to local and regional areas, where there are still a smaller numbers of tourists. According to the Andaman tourism cluster in five provinces of Thailand, a development plan for the community-based tourism contains communities that are models for other communities in the future, so incomes can be expanded from mass tourism areas to local community areas (Boonmee and Tanasavate, 2019; Demkova et al., 2022).

The Andaman coast in southern peninsular Thailand is considered to be among the leading marine tourism targets globally. There are a lot of tourist attractions, beautiful and unique natural resources, especially marine resources, beaches, and islands. The community-based tourism along the Andaman coast has been expanded since more tourists tend to want to learn and experience a different kind tourism, sensing pure nature, attending environmentally friendly activities, and staying at unique accommodations (The Office of Strategy Management, Southwest Andaman, 2016).

Although this community-based tourism has become more popular, the COVID-19 pandemic has had economic impacts on household incomes and income distribution, as well as social impacts changing lifestyles. Due to the restrictions associated with this infectious disease, more people have become stressed and nervous (Batra, 2021; Kungwansupaphan, 2021). As a result, the community-based tourism in each community have had to adapt themselves to this situation so as to restore some community's features to be distinctive and unique. Regarding such community-based tourism, 'Travel in a New Normal' in

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the Covid-19 era has made it challenging to develop the processes and outcomes in community-based tourism (Janthadech, 2021; Srimaca and Muneenam, 2021). As a consequence, this article aims to explain the situations and components of community-based tourism during the COVID-19 pandemic in the Andaman coast of southern peninsular Thailand.

#### LITERATURE REVIEW

## Community-based tourism (CBT)

Community-based tourism is one development approach for tourism that has an identity and features which are different from mass tourism (Lee and Jan, 2019; Potjana Suansri and Responsible Ecological Social Tour, 2003). Its objective is for people in a community to have opportunities and a wide range of benefits from tourism, which is appropriately managed by that community (Croes, 2014; Curcija et al., 2019; Demkova et al., 2022; Goodwin and Santilli, 2009; Higgins-Desbiolles, 2020). Local people can also get economic benefits from their community's enterprise development which is supported to make the community strong, to reduce poverty, and to exchange cultural and societal perspectives between the tourists and the community. In addition, community-based tourism can evolve to a plan to direct a community's tourism management to be self-reliant with good quality of people's lives and to raise awareness of environment and sustainable development (Giampiccoli, 2020; Lee, 2013; Mayaka et al., 2019; Potjana Suansri and Responsible Ecological Social Tour, 2003; Umam et al., 2022).

Community-based tourism is based on a community development concept that has the local people participate in tourism development plans in terms of resource conservation, economic and social development, and community ownership. The concept of community-based community can be divided into three dimensions (Mayaka et al., 2019). First, involvement is considered the main element to operate this community-based tourism. It is started from part ownership or whole ownership of the development. Second, power and control are a dimension of relationships between local community elements—social and historical contexts—and community-based tourism operators from outside. If a project or activity for community-based tourism is started by some people or an organization from outside, a community can lose its power and control. Third, outcomes and tourism quality need to be set in order to support a community to be self-reliant and have social justice, sustainability, and independence of community operation. However, community-based tourism might not be successful if people in a community do not receive skill development which is necessary for business operation.

#### Community-based tourism in Thailand

According to the Office of Permanent Secretary, the Ministry of Sports and Tourism (2017), tourism operations throughout the country were surveyed. It was found that there were 264 communities applying the community-based tourism concept. Among these, there were 63 communities (23.86%) in the Southern and Andaman tourism provinces, the world's leading tourism base. The community-based tourism in these provinces was remarkably expanded since there were more tourists tending to learn and gain different experiences from their trips and having the desire to sense pure nature by attending environmentally friendly activities. Nevertheless, the COVID-19 pandemic still interfered and caused small and medium-sized enterprises to adjust themselves or to close down their businesses permanently (Batra, 2021).

#### MATERIALS AND METHODS

This qualitative research contains multiple case studies to investigate and analyze situations. Due to the limitations imposed by COVID-19, especially the social distancing measures, data were collected through online in-depth interviews and online focus group discussions between January and March, in 2022 (Figure 1). This research was certified for ethics in social and human research, with reference no. EC 001/65 on the 5<sup>th</sup> of January 2022, by the Public Policy Institute, Prince of Songkla University, Thailand.

#### Study Area

The scope of study adopted was the following five prototype communities operating community - based tourism in five provinces Phangnga, Phuket,

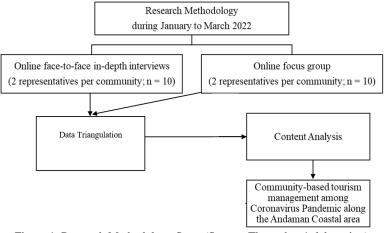


Figure 1. Research Methodology Steps (Source: The authors' elaboration)

Krabi, Trang, and Satun Provinces - of the Andaman Tourism Cluster, Southern Thailand, with the certification of the Community - Based Tourism Standard by Designated Area for Sustainable Tourism Administration (Public Organization) (Figure 2).

- 1. CBT A: Baan Sam Chong Nuea Community in Kalai sub-district, Takua Thung district, Phangnga province.
- 2. CBT B: Baan Hua Kuan Community in Kamala sub-district, Kathu district, Phuket province.
- 3. CBT C: Baan Na Tean in Mueang district, Krabi province.
- 4. CBT D: Bo Hin Farmstay Community in Bo Hin sub-district, Sikao district, Trang province.
- 5. CBT E: Baan Bo Chet Luk in Pak Nam sub-district, La Nga district, Satun province.

#### **Key Informants**

The key informants in the research were a group of leaders who are community-based tourism entrepreneurs. These samples were selected by purposive sampling, with the following characteristics. (1) They are owners of businesses, tour

agents, or tour planners related to community-based tourism. (2) They are community leaders or policymakers who are essential to operate community-based tourism. (3) They have been entrepreneurs living in the tourist area provided with community-based tourism since the beginning of the program. (4) They were willing to attend the research program. The details of these 10 key informants are summarized in Table 1.

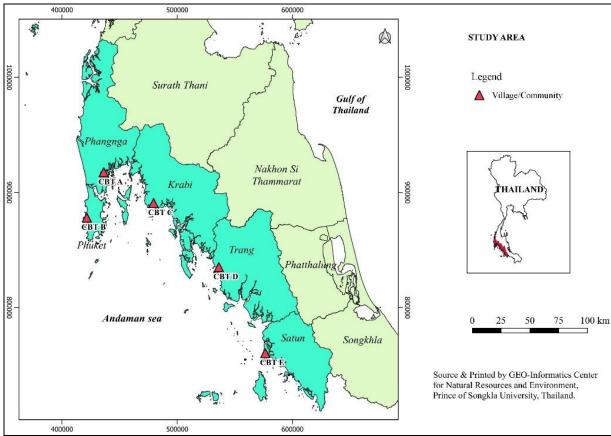


Figure 2. Study Areas (Source: authors)

#### **Research Tools**

The instruments used in the research included the researchers, a set of questions for online in-depth interviews, and online focus group discussions via Zoom application (Cohen et al., 2007; Dayan and İlknur, 2022).

The main question was 'how was the community-based tourism management among Coronavirus Pandemic along the Andaman Coastal area, Thailand?' In addition, the key informants were asked to share opinions about the community-based tourism management during the Coronavirus pandemic along the Andaman coast. All of the data were collected, and voice and video recordings were permitted by these key informants.

No	Respondents	Name of CBT	Dominant religion in community	CBT is major activity	Age	Gender	CBT line of work	Year established	Date of interviews
1	A	CBT A: Baan	Muslim	×	57	F	Owner /policy contributor	2005	17/02/2022
2	В	Sam Chong Nuea	Musiiii		55	M	Owner	2005	20/02/2022
3	C	CBT B:`Baan	Muslim	✓	54	F	Owner/policy contributor	2015	17/02/2022
4	D	Hua Kuan	Musiiii		44	M	Owner	2015	18/02/2022
5	E	CBT C: Baan Na	Muslim	×	47	M	Owner /policy contributor	2004	17/02/2022
6	F	Tean	IVIUSIIIII		45	F	Owner	2004	19/02/2022
7	G	CBT D: Bo Hin	Buddhism	×	53	M	Owner /policy contributor	2004	17/02/2022
8	Н	Farmstay	Duddiisiii		50	F	Owner	2004	19/02/2022
9	I	CBT E: Baan Bo	Muslim	×	59	M	Owner/policy contributor	2004	17/02/2022
10	J	Chet Luk			50	F	Owner	2004	18/02/2022

Table 1. Respondents' demographic background and CBT line of work (n = 10) (Source: The authors' elaboration)

#### **Data Collection**

The steps of the data collection were as follows.

- 1. Online face-to-face in-depth interviews with each community leader of five communities or related people in the community-based tourism management were conducted for not over one hour (two representatives per community; n = 10). During each interview, the data were journaled, together with voice and video records.
- 2. The online focus group discussion with five community-based tourism entrepreneurs or tour agents was conducted once for 2-3 hours (n = 10). During the discussion, the data were written to notes, together with voice and video records.

#### **Triangulation and Data Analysis**

Data triangulation was used to inspect one topic of the data collected from more than one informant, and triangulation was applied to verify the data gained from the interviews and the focus group discussions. Then the data were analyzed by content analysis.

#### Results

The results of this research in five communities along the Andaman coast in Southern Thailand are described next.

#### Area Context

There were four dominantly Muslim communities in the study: CBT A, B, C, and E. Ninety percent of the people in these communities are Muslim. Only the people in CBT D are dominantly Buddhist. Four communities, CBT A, C, D, and E have been operating their community-based tourism for more than 15 years. They started the project after the Indian Ocean earthquake and tsunami in 2004; while the community-based tourism was started in CBT B in 2015.

Under the theme of their community-based tourism, cultural and nature-based tourism were provided in five communities. The communities provided activities in line with their original ways of life. For example, in CBT B, people's incomes primarily depended on tourism during the high season of tourism. Some of them were employees in tourism businesses; providers of room rentals; and others had their own businesses. However, tourism was considered a second job for people in CBT A, C, D, and E. Their main jobs were in agricultural farms, including rubber tree and oil palm plantations, and in traditional fishing. In CBT D, their community-based tourism was developed by another CBT role model, as the second job following agricultural jobs. The activities were designed to be natural tourism providing learning experiences regarding fishermen's ways of life along Sikao canal, in Trang province. In addition, some materials in their community such as coconut shells, Batik fabrics, long-tailed boat models, and organic rice were promoted as community products.

Table 2. Community-based tourism operation during the Coronavirus 2019 pandemic (Source: The authors' elaboration)

Table 2. Community-based tourism operation during the Coronavirus 2019 pander	,				
Topics			CBT C	CBT D	CBT E
1. Characteristics of Vaccinated Tourists Entering Communities, and Preferred Qualit					
<ul> <li>vaccine certificates (at least two doses)</li> </ul>	✓	✓	✓	✓	✓
<ul> <li>ATK results in case of vaccinations more than 6 months ago</li> </ul>	×	✓	✓	$\checkmark$	×
■ ATK provided for tourists	×	×	×	✓	×
local tourists' temperature check, as well as Mho Chana and Thai Chana scanning applications	×	×	✓	×	×
<ul> <li>reports from tour guides before 'Sandbox' tourists enter the communities</li> </ul>	×	✓	×	×	×
2. Communities' Readiness for Receiving Tourists					
2. 1 Service staff's regular coronavirus 2019 tests					
ATK tests for service staff every 15 days	×	×	×	✓	×
2.2 Area renovation and tourism activities appropriate in a pandemic situation					
<ul> <li>events held in nearby communities in such areas as coastal and rice farm areas</li> </ul>	×	×	×	✓	×
<ul> <li>air ventilation system in the activity areas</li> </ul>	✓	×	✓	✓	×
■ limited number of tourists: 50% of tourists on boats	×	×	✓	<b>✓</b>	<b>✓</b>
<ul> <li>having new tourists join activities with tourists staying in the communities</li> </ul>	×	✓	×	×	×
<ul><li>receiving specific tourists</li></ul>	×	✓	×	×	×
<ul><li>learning activities</li></ul>	×	×	✓	<b>✓</b>	×
3. Public relations and communication of the communities' good image					
<ul> <li>understanding of communication to convey increased prices due to increased cost of</li> </ul>	×	×	×	✓	×
materials, tools, and area sizes					
<ul> <li>additional improvement of public relations signs</li> </ul>	✓	×	×	×	×
<ul> <li>promotion and public relations on TV and online social media</li> </ul>	×	×	×	×	<b>√</b>
4. Community development to enter the Standard of Thailand Safety and Health Admi	nistratio	n (SHA)			
<ul> <li>adaptation to New Normal way of life</li> </ul>	×	×	×	<b>√</b>	×
<ul> <li>continuously following news by community leaders</li> </ul>	×	×	×	<b>√</b>	×
<ul> <li>communities certified by the Amazing Thailand Safety &amp; Health Administration (SHA)</li> </ul>	✓	✓	✓	✓	✓
<ul> <li>communities trained according to the Amazing Thailand Safety &amp; Health Administration</li> </ul>	×	×	×	<b>√</b>	×
(SHA) by Provincial Tourism and Sports Office or other governmental offices					
<ul> <li>readiness of local administration offices and governmental offices</li> </ul>	×	×	×	×	×
<ul> <li>readiness of the communities, private businesses, hotels, and entrepreneurs</li> </ul>	✓	<b>√</b>	✓	✓	✓
5. A Surveillance system and monitoring of the community situation					
<ul> <li>measurements of COVID-19 pandemic prevention</li> </ul>	×	✓	×	×	×

## Community-Based Tourism Management during the Coronavirus 2019 Pandemic

The community-based tourism management during the Coronavirus 2019 pandemic was focused on creating confidence and safety for tourists traveling in communities by the following five components: (1) characteristics of vaccinated tourists entering the communities and preferred quality tourists, (2) communities' readiness to receive tourists, (3) public relations and communication of the communities' good image, (4) the community development to enter the standard of Thailand Safety and Health Administration (SHA), and (5) a surveillance system and monitoring of the community situation (Table 2).

#### (1) Characteristics of vaccinated tourists entering communities and preferred quality tourists

In these five communities, restrictions on receiving tourists in the communities were highlighted. In each community, tourists were asked to present their personal information and vaccine certificates (at least two doses). When tourists had got vaccinated over six months ago, they were asked to show Antigen Test Kit results (ATK) in three communities. However, the Antigen Test Kits were prepared for tourists in one community. These kits were billed in the fees for the stay (Table 2).

There were more additional measures in some communities. For example, tourists from the same province or from within the country were requested to check their body temperature and check into the Mho Chana and Thai Chana Applications, according to the Ministry of Health's procedure. In case of a Sandbox project, some tourists needed to show COVID-19 tests and submit to a quarantine before entering the communities. It could be seen that the tourist quality was emphasized in these communities. Plus, it was found that there were two communities high lighting both the quality and quantity of their tourists, according to the following interview. "In our community, we receive all coming tourists but still under our procedure. In the past, when tourists were together in one group, we welcomed and gave information to them in a meeting room. Now, during the COVID-19 pandemic, after tourists did the first procedure, we provided them at an outdoor area" (Respondent E). In the other two communities, the tourist quality was also in focus. They could take part in the community people's activities, but the number of tourists entering the communities depended on the carrying capacity of the communities, as referred to in the following interview excerpt. "We adjusted to a new tourism form, and we try to receive only quality tourists who can join our people's activities. Therefore, we do not receive a large number of tourists. We think we can determine the number of tourists entering the community in each round. We did receive a lot of tourists, but now we select potential tourists who can pay for their trips here" (Respondent C).

#### (2) Communities' readiness for receiving tourists

The results showed that there were two management patterns for readiness for receiving tourists (Table 2).

(2.1) Service staff's regular coronavirus 2019 tests.

It was found that there was only one community having its staff do self-checks with Antigen Test Kit every 15 days and record their test profiles. Moreover, the public relations were pursued online via the community's website and the community's Facebook Fan Page.

(2.2) Area renovation and tourism activities appropriate in a pandemic situation

The community areas were renovated, and tourist activities were set according to protective procedures adopted during the COVID-19 pandemic. The communities in the study cooperated with nearby communities having cultural or resources capital to provide activities or events by geographically zoning the tourism area in the coastal area and in a rice farming area. It was found that the areas in three communities were adjusted to ensure good air ventilation as in the following interview excerpt. "The tourist attractions in our community are not quite crowded and open enough for tourists. Our community-based tourism management is focused on ways of life and nature in the community" (Respondent G).

Furthermore, in one community, activities of tourism routes were changed to activities in the community. As regards marine activities, congestion on boats was reduced by setting capacity limit to 50% of what it had been, but more tourists were welcomed to do cultural activities as in the following interview excerpt. "We provided tourists activities in our community so that our people and community can have apparent incomes, and we can consider the number of tourists. That means we changed the way to receive tourists" (Respondent C). However, when the communities were ready, they could receive various tourists. In case of more incoming tourists, outdoor activities could be provided, and these tourists could be distributed to stay at local entrepreneurs' places or nearby community networks.

#### (3) Public relations and communication of the communities' good image

Public relations and communication of the communities' good image during the COVID-19 pandemic were pursued in order to build confidence in the tourists traveling in the communities. It was found that ATK checks for staff every 15 days were promoted for the tourism communities. However, the tour prices increased since the capital investments in tourism including materials, tools, and space sizes went up. The public relations were thus intended to make the tourists understand and make them willing to pay. "We increased the prices a bit to make the balance of expenses, but we try to explain our tourists about this matter" (Respondent G). Furthermore, the results revealed that public relations signs for good image were improved to build confidence in the tourists. The public relations by external organizations such as TV stations, and online social media was also welcomed to promote tourism in the communities (Table 2).

# (4) Community development to enter the standard of Thailand Safety and Health Administration (SHA)

During the COVID-19 pandemic, many tour entrepreneurs such as homestay entrepreneurs and some owners of tour businesses were impacted. In consequence, these entrepreneurs were very keen to adjust themselves to survive during this pandemic by entering the standard of Thailand Safety and Health Administration (SHA) issued by the Ministry of Health to create more confidence in tourists. "The pandemic has been more relieved, and tourists are more confident to travel in the community" (Respondent A). The communities had their own management methods to enter the tourism standard. The results indicate that every community was developed to enter the Amazing Thailand Safety & Health Administration (SHA). However, there was only one community trained for SHA by Provincial Tourism and Sports Office. Other communities had not been trained yet, so there would be some trainers from Provincial Tourism and Sports Office, District Offices, District Health Offices, and District Health Center in the areas to give some advice and certify the standard (see Table 2). Besides, the leaders of the communities kept up with the latest news continuously; therefore, the behavior of the communities was adjusted for the new normal. It could be seen that private sector, hotels, and entrepreneurs in the communities adjusted themselves and got ready enough to manage their tourism. Nevertheless, due to the measures of local administration, and government offices, the communities could not accept visitor groups, affecting the community incomes. "Visitor groups from government offices disappear. Only some Thai tourists who can financially support themselves have come to the community. In the past, we received a lot of visitor groups. Because of the COVID-19 pandemic and the preventative measures, visitor groups from government offices still cannot visit the community" (Respondent E).

#### (5) A surveillance system and monitoring of the community situation

Each community adopted observing the situation as regards the COVID-19 pandemic, and designated appropriate

responsibilities in their tourism management, namely procedures to receive tourists and those for room reservations. Tourists were asked to provide some personal information, travel evidence, vaccine certificates, and COVID-19 test results before entering the communities. Besides, the results showed that, in fact, there was only one community that had planned the management since the beginning of the COVID-19 outbreak and forecasted the following impacts because the community realized that they would have to live in this situation for a while (Table 2).

#### **DISCUSSION**

Community-based tourism should be restored as soon as the government relaxes the measures of COVID-19 prevention. However, every community needed to understand its target groups of tourists, who might also be domestic tourists (Janthadech, 2021; Noorashid and Chin, 2021). Therefore, local tourists living in Thailand entering communities along the Andaman coast in Southern Thailand should be considered the first priority, as they are the most accessible customers, followed by emphasis on the quality of tourists. This result is relevant to the study by Hambira et al. (2022) suggesting that target groups of domestic tourists for nature and cultural tourism should be included in 'new normal community-based tourism'. In terms of community readiness for receiving tourists, each community needed to adjust to transformative tourism for tourist well-being (Pung at al., 2020; Srimaca and Muneenam, 2021) Therefore, it was necessary to survey and investigate needs for services and products to promote small-scale industry of CBT for community restoration (Noorashid and Chin, 2021). Moreover, design of activities and learning topics should be considered for physical and mental health (Voigt et al., 2011). For 'Travel in a New Normal', a new trend in the COVID-19 era, cleanliness, safety, and building ventilation systems should be prioritized (Environmental Protection Agency, 2022; Potjanajaruwit, 2022). Plus, seating distances, queue reservation for park entrance, people capacity limitations, quality small tourist groups, and some safety symbols—SHA, Clean Food Good Taste, and Healthy Accessibility Safety (HAS)—should be emphasized in public relations and in communicating the communities' good image. Importantly, the communities should be certified with the Amazing Thailand Safety & Health Administration (SHA) (Janthadech, 2021). Nevertheless, there have not been any visitor groups attending activities in the communities due to their lack of confidence and readiness; in spite of support by the government for a project 'Thailand meeting is safer' (Janthadech, 2021). Hence, the communities should provide a surveillance system and monitoring of the community situation in order to build confidence and safety for tourists and their own people. Besides, the government should also support with tax policies or financial projects, and in the use of online platforms such as Facebook, Instagram, and YouTube for attracting tourism to the communities. This could imitate Brunei Darussalam that promoted their CBT via online tourism conventions and resilience strategies (Mulyani et al., 2022; Noorashid and Chin, 2021)

#### **CONCLUSION**

This qualitative research article sought to explain the community-based tourism management during the Coronavirus 2019 pandemic in five communities of five provinces (Phangnga, Phuket, Krabi, Trang, and Satun provinces) along the Andaman coast of Thailand, which creates an understanding of the characteristics of community-based tourism management for application in specific situations. This study, however, was conducted during the coronavirus pandemic in the context of the Andaman coast of Thailand; hence, because of the social distancing measures, data were collected through online in-depth interviews and online focus group discussions between January and March, in 2022.

It can be concluded that community-based tourism of the Andaman tourism cluster in southern Thailand has been operated for more than 15 years. It was started after the 2004 Indian Ocean earthquake and tsunami. All activities of the mostly community-based tourism have been still considered as second jobs after people's main occupations.

Their community-based tourism included existing cultural and nature tourism. Five components of the communitybased tourism management during the Coronavirus 2019 pandemic along the Andaman coast were: (1) characteristics of vaccinated tourists entering communities and preferred quality tourists; (2) communities' readiness for receiving tourists—service staff's regular coronavirus 2019 tests and area renovation and tourism activities appropriate in a pandemic situation; (3) public relations and communication of the communities' good image; (4) community development to achieve the standard of Thailand Safety and Health Administration (SHA); and (5) a surveillance and monitoring system of the community situation. The tourism communities in Andaman coastal area were pushed to adapt to the changing situation of the 2019 coronavirus pandemic. These five components were based on transitional situations, which arose from the understanding of the community, such as the internal experiences of the individuals, the condition of the community, and government policies. Besides, the management of community-based tourism in the Andaman coastal area stepped into a "New Normal" of the COVID-19 era, which challenges the communities to develop the processes and outcomes of community-based tourism. All of the above five elements could be developed as preliminary criteria for evaluating community-based tourism management in other similar and interested areas by using participatory action research studies that will establish benchmarks for the growth of CBT communities. The results of management elements may differ by area and other context. Moreover, the informants for this study were only community-based tourism entrepreneurs probed via qualitative methods, and the results, therefore, focused on understanding experiences and phenomena through people who have directly experienced them.

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