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With the participation of







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# INTRODUCTION

This diagnosis identifies an **action framework** to contribute to the recovery of the tourism in Latin America and the Caribbean (LAC). This action framework includes:

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(i) The adaptation of biosafety protocols to face SARS-CoV-2, reinforcing the real and perceived safety in tourist organizations and destinations.



(ii) The identification of a **management framework,** which establishes the **basis** to respond in an agile and effective way to **future sanitary crises.** 

# Summary

An analysis on the adequacy of existing biosafety tourism protocols in Latin America and the Caribbean (LAC) was developed, detecting gaps and concluding that:



Secondly, **the management framework for these protocols in terms of implementation, communication and control shall be revised,** in order to ensure their effectiveness. The following conclusions were drawn:





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# **PROJECT JUSTIFICATION**

# **Tourism:**

- •Key activity in generating GDP, employment and investments in LAC
- •One of the sectors most affected by COVID-19
- (restrictions, mobility, lockdowns)
- •Multiplier effect of the **tourism impact**



# May-August 2020: Biosafety protocols in the tourism industry 2021: Vaccination (logistic and supply problems, new variations of the virus, side effects, uneven administration) Knowledge of virus and its different transmission modes

•Experience in the implementation of protocols

tourism GDP



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# Latin America

WTTC estimations for 2020

Biosafety protocols are still crucial and indispensable to guarantee the highest levels of safety for users and employees of the tourism sector to generate confidence and promote the reactivation of the sector.



Caribbean

tourism Jobs

# CONSIDER LEARNED LESSONS

ESTABLISH THE BASIS TO MANAGE FUTURE CRISES

# OBJECTIVE

Make a diagnosis on the adaptation of current biosafety tourism protocols to generate safer tourist spaces and services in LAC and recover the confidence of the user.





# **Specific objectives**



•Identify Risk Nodes (RN) that should be covered in protocols considering the transmission modes of the SARS-CoV-2.

•Identify needed implementation, communication and control mechanisms.

# **SCOPE OF THE DIAGNOSIS**



# Geographic

Countries in Latin America and the Caribbean (LAC) and in another world regions



# **Sectorial**

Hospitality (accommodation and restaurants), local transportation and tourist areas (ports, airports and beaches)



# **Time period**

Documents published until January 2021

# Sources of information



# **Primary sources**

# **Revised protocols**



# LAC region:

- •Argentina
- •Brazil
- •Chile
- •Colombia
- •Costa Rica
- •Jamaica
- •Mexico
- •Panama
- •Peru
- •Dominican Republic

# Other regions:

- •Australia
- •Spain
- •Hong Kong (China)
- •lsrael
- •New Zealand
- •Portugal
- •Seychelles

In addition:

Caribbean Public Health Agency (CARPHA), Brazilian support service for Micro and Medium Business (SEBRAE), Pacific Asia Travel Association (PATA), World Travel and Tourism Council (WTTC), International Civil Aviation Organization (ICAO) and the World Health Organization (WHO)

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# **Interviewed entities**



- •The Civil Aviation Authority of Colombia
- •Airports of Peru
- •Sodis Alliance
- •AMResorts
- •European Association of Consumers for Standardization(ANEC)
- •Municipality of Aracatí(Brazil)
- •Association of the Gastronomic Industry(ACODRES)
- •Association of Hotels, Restaurants and Cafes of Europe(HOTREC)
- •Associations of Hotels, Restaurants and Casinos of Peru (AHORA)
- •Tourism Authority of Panama (ATP)
- •Municipality of Maceió (Brazil)
- •Caribe Hospitality
- •Casa Andina Hotels
- •Centre for Tourism training (CENFOTUR)
- •National Council of Ground transportation of Peru
- •Argentine Consumers
- •National Corporation of Consumers and users of Chile (CONADECUS)
- •Cruise Lines International Association (CLIA)
- •Decameron Hotels
- •Despegar.com

- •Gastronomic Business Federation of the Republic of Argentina (FEHGRA)
- •GHL Hotels
- •Punta Cana Group
- •Hilton Hotels
- •Libertador Hotels
- •Costa Rica Tourism Board
- •Keteka
- •Meliá Hotels International
- •Ministry of Foreign Trade and Tourism of Peru
- •Ministry of Tourism of Argentina
- •Ministry of Tourism of Belize
- •Ministry of Tourism of Brazil
- •Ministry of Tourism of Paraguay
- •Bahamas Ministry of Tourism and Aviation
- •Organization of Brazilian World Heritage Cities
- •Municipality of Salvador de Bahia
- •Municipality of Santa Marta
- •Tourism Secretary of Mexico
- •National Tourism Service of Chile (SERNATUR)
- •National Union of Consumers and Users of the Republic of Panama (UNCUREPA)

# METHODOLOGY

# 1) Risk maps:

# Objective:

Identify **risk nodes (RN)** where it is necessary to define measures to minimize the transmission risk.



# **Transmission Modes**

#### Identification of transmission modes

# Airborne transmission through aerosols

Drops of 5 microns or smaller size can remain suspended in air for a variable time, and reach distances longer than 2m.



#### **Droplet transmission** Produced when the infected person coughs, sneezes or talks. These drops reach trajectories of up to 2m.



#### **Contact transmission** When touching contaminated surfaces with secretions from infected people and then putting hands on the oral, nasal or conjunctival mucosa.

# The risk is NOT STATIC (it is variable)

Safety distance (<2m)

Ventilation natural, forced interior/external)

**Time of exposure** (> 15 min.)

**Relative humidity** (<40%)

**Respiratory protection** 

The combination of these factors increases or reduces the risk of transmission

#### DIAGNOSIS OF BIOSAFETY PROTOCOLS IN THE TOURISM SECTOR

# **RISK VARIABILITY**

# **RISK MODULATING FACTORS:**

(+) MORE RISK

<u> </u>	LESS SAFETY DISTANCE BETWEEN USERS	SAFETY DISTANCE	MORE SAFETY DISTANCE BETWEEN USERS	
	CLOSED SPACES AND NOT WELL VENTILATED	VENTILATION	OUTDOORS SPACES	
	LONG TIME OF EXPOSURE	TIME OF EXPOSURE	REDUCED TIME OF EXPOSURE	
	WITHOUT FACE MASK	RESPIRATORY PROTECTION	WITH AN APPROPRIATE FACE MASK	
$\bigcirc$	HUMIDITY <40%	RELATIVE HUMIDITY	HUMIDITY BETWEEN 40% - 60%	$\bigcirc$



(-)

LESS

RISK

THE RISK ALSO INCREASES WHEN PEOPLE SPEAK, SHOUT OR SING AND DECREASES IF THEY ARE IN SILENCE.



# 2) Determination of variables

1	•••
•	

# **Objective:**

Identify critical management variables to evaluate their coverage degree in current protocols and find best practices.



\*VARISK= Variables Related to the Management of Risk Nodes. \*VICC= Variables Related to the Implementation, Communication and Control.

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# Critical management variables (VARISK and VICC)

# Secondary sources

# **Protocols**

Evaluate the coverage degree of risk nodes (RN) on the current protocols.



# **Primary sources**



\*VARISK= Variables Related to the Management of Risk Nodes. \*VICC= Variables Related to the Implementation, Communication and Control.

# Scope and Specificity of Reviewed Protocols



•Protocols for all types of food and beverage establishments including bars, restaurants, take away services and delivery, among others.

- •Measures for transport operators or infrastructure managers.
- •Transport vehicles: tourist buses, public and private transport, rental vehicles and shuttles operated by hotels, among others.

- •Specific protocols for beaches (maritime, fluvial and lacustrine).
- •General protocols for outdoor and entertainment spaces (applicable to beaches).
- •National protocols and for airport concessions or management companies.
- •Some protocols refer to International Civil Aviation Organization (ICAO), World Health Organization (WHO) and guidelines provided by the authorities.

More developed

- •Protocols for cruise ports, marinas and tourist piers (maritime, fluvial and lacustrine), private management or concessions.
- •Most of them have not been able to be widely implemented.



# Results of Variables of Risk Management (VARISK)

# and User's Perceptions





# **Risk Nodes (RN) map and coverage level in LAC**



# The coverage of Risk Nodes (RN) in lodging protocols is HIGH.

			Include	d in protocols
		VARISK - Risk Nodes (RN)	Total	LAC region
		Check-in		
	Check-in and check out	Key/card delivery		
Low		Payment		
		Use of lifts		
Medium	Stav	Use of common spaces		
	Stay	Rooms		
High		Catering service	•	
	Ventilation	Ventilation: indoor spaces		

			Include	d in protocols
Low	N N	/ARISK - Risk Nodes (RN)	Total	LAC region
Medium	Relative humidity	Relative humidity		•
High	Operational support processes	Use of shared equipment of cleaning Staff areas (canteens, rest areas, dressing rooms and toilets) Supplier management Waste management		
		waste management	_	

# ACCOMMODATION (H)



# **User's Perceptions**



of users perceive accommodations as unsafe spaces

It is necessary to reinforce the **communication** of protocols and, **to a lesser extent**, improve risk nodes (RN) with lower coverage.



# **Risk Nodes (RN) map and coverage level in LAC**



# The coverage of Risk Nodes (RN) in restaurants' protocols is MEDIUM-HIGH.

			Included in re	vised protocols
		VARISK - Risk Nodes (RN)	Total	LAC region
		Preparation of the space		
	Welcome	Accommodation and allocation		
		Tables mounting and dismantling		
Low				
	Orden	Menu		
	Order	Order		
Medium				
		Bar service		
	Sorvico	Table service		
High	Service	Take away / Delivery		
		Toilets		
	Billing/Exit	Payment		

			Included in	revised protocols
		VARISK - Risk Nodes (RN)	Total	LAC region
$\langle \rangle$	Kitchen	Menu preparation	•	
Low	Ventilation	Ventilation		
Medium	Relative humidity	Relative humidity	•	
		Use of shared cleaning equipment		
High	<b>Operational Support</b>	Staff areas (canteens, dressing areas and rest areas) Supplier management		
	processes	Waste management		





Real risk is different from perceived risk

\* In general, they are closed spaces, with poor ventilation at times, with users without a mask and in social activity - eating and talking.



# **Risk Nodes (RN) map and coverage level in LAC**



# The coverage of Risk Nodes (RN) in local transportation's protocols is MEDIUM-LOW.

			Included i	n revised protocols
$\frown$		VARISK - Risk Nodes (RN)	Total	LAC region
		Customer service area		
	Terminal	Ticket sales area		
	Waiting area			
Medium		Boarding		
	Luggage handling			
High	Landing			
	Inside the vehicle			
	Ventilation	Ventilation		

VARISK - Risk Nodes (RN)         Total         LAC region           Low         Relative humidity         Image: Comparison of the second sec	
Low         Relative humidity         Relative humidity	
Shared cleaning equipment	
Operational support Staff areas (canteens, dressing rooms and rest areas)	
processes Supplier management	
High     Waste management	
Informal economy	

LOCAL TRANSPORTATION



**User's Perceptions** 

84%

of users perceive this subsector as unsafe.

It is necessary to check that all risk nodes (RN) are covered with safety measures that are properly **communicated.** 



The inside of the vehicle is perceived as unsafe, although the coverage level is HIGH



# **Risk Nodes (RN) map and coverage level in LAC**



# The coverage of Risk Nodes (RN) in local beaches protocols is MEDIUM.

			Included in	revised protocols
		VARISK - Risk Nodes (RN)	Total	LAC region
	Accesses	Users flows (capacity control) Parking		
Low				
	Can d avea	Play and recreational areas		
	Sand area	Access walkway		
Medium		Toilets and dressing rooms	<u> </u>	
		Showers and footbaths		
		Users/rest areas		
High		Concessionaires		
		First aid and rescue services		
		Informal economy		

			Included in	revised protocols
Low	V	/ARISK - Risk Nodes (RN)	Total	LAC region
	Wet area	Seashore		-
Medium		Swimming area		
	Humidity	Relative humidity		
High	On eventioned even even	Use of shared cleaning equipment		
	Operational support	Waste management		



# **AIRPORTS / PORTS**



- •Current protocols focus more on strategic and transversal aspects than risk nodes (RN), such as the conditions of entry and exit during the pandemic, required tests, necessary forms to be completed by the travellers or quarantine indications.
- •Several risk nodes(RN) present a low coverage, as the protocols do not **include specific measures**.
- •Some of the protocols refer to the recommendations of the International Civil Aviation Organization (ICAO), a specialized organization of the United Nations (UN) that promotes safe development of international civil aviation. These recommendations cover practically all risk nodes (RN); therefore, the detailed coverage analysis of ICAO's protocol is included.



# **Risk Nodes (RN) map and coverage level in LAC**



# The Risk Nodes (RN) coverage in airports' protocols is MEDIUM-LOW

				included in revised protocols		
		VARISK - Risk Nodes (RN)	Total protocolos	LAC region	ICAO	
		Access				
	Access	Trolleys and luggage				
				1		
$\frown$		Check-in / Documentation				
	Check-in area	Luggage handling				
		Auto Check-in				
	Inspection and control	Scanner / Trays				
Medium		Control / Customs		i 🔴 i		
		Vending machines				
High		Toilets				
		Commercial areas				
	Departure terminal	Catering services				
$\smile$		Waiting area <b>s</b>				
		Recreational areas				
		Smoking areas	i i i	Ó		

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Included in revised protocols

#### VARISK - Risk Nodes (RN) Total LAC region ΙCAO Boarding / disembarking process **Boarding /disembarkation** Bus transfer Access and exit walkways Luggage handling by staff Baggage claim area Low Baggage claim areas Ventilation Ventilation Medium **Relative humidity** Relative humidity High Use of share cleaning equipment **Operational support processes** Staff areas (dressing rooms, canteens and toilets) Suppliers management Waste management Informal Economy



\*The survey to users about airports and ports spaces was developed together since these spaces share travelers' itinerary and therefore, risk nodes.



# **Risk Nodes (RN) map and coverage level in LAC**



# The Risk Nodes (RN) coverage in ports' protocols is LOW

			Included in revised protocols
		LAC region	
		Access	
	Access	Trolleys and luggage	i i i i i i i i i i i i i i i i i i i
$\frown$		Check in / Decumentation	
$\langle \rangle$	Check-in area	Luggage handling	
Low		Auto Check-in	•
		Scoppor / Trave	
Medium	Inspection and control	Control / Customs	
		Vending machines	-
High	Departure terminal	Toilets	-
		Commercial area	
		Catering services	
		Waiting area	
		Recreational area	
		Smoking area	
		27	

#### VARISK - Risk nodes (RN)

#### Included in revised protocols LAC region

		Boarding /Disembarkation
	Boarding /disembarkation	Bus transfer
		Access and exit walkways
Low	Paggago claim area	Luggage handling by staff
	Daggage claim area	Baggage claim area
Medium	Ventilation	Ventilation
	Relative humidity	Relative humidity
High		
	Operational support processes	Share and cleaning equipment
$\setminus$		Staff areas (dressing rooms, canteens and toilets)
		Suppliers management
		Waste management
		Informal Economy



\*The survey to users about airports and ports spaces was developed together since these spaces share travelers' itinerary and therefore, risk nodes

# Strategies to improve coverage and user's perceptions on safety

	Subsector	RN Coverage	Main perception	Action
	ACCOMMODATION	High	Unsafe space	
	RESTAURANTS	Medium-high	Safe space	Reinforce Risk Nodes`
	LOCAL TRANSPORTATION	Medium-low	Unsafe space	(RN)coverage with specific measures and improve communication
	BEACHES	Medium	Unsafe space	
	AIRPORTS	Medium-low	Unsafe space	
٢	PORTS	Low	Unsafe space	



# **Results of Variables related to Implementation, Communication and Control (VICC)**



# VICC VARIABLES

Implementation • Communication • Control







The diagnosis is complemented with the analysis of the implementation, communication and control measures that are carried out in the protocols through:



•Revision of the contents of protocols



Interviews to key stakeholders

THE RESULTS OF THE DIAGNOSIS ARE KEY TO CREATE AN EFFICIENT MANAGEMENT FRAMEWORK OF PROTOCOLS

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# COVERAGE IN REVISED PROTOCOLS







In relation to factors that modulate the risk of contagion and affect its variability, these are referred to with different levels of detail, and therefore in some cases measures to reduce the risk are insufficient:



Safety distance: covered in protocols, although contemplating disparate distances, sometimes insufficient to prevent contagion.



**Ventilation:** it is necessary to prioritize natural aeration as much as possible and stipulate guidelines to reduce the likelihood of aerosol formation in indoor spaces (through filtration systems, CO2 measurement, avoiding air recirculation, etc.)



**Exposure time:** it is covered indirectly in the protocols, although it is necessary to consider that a longer exposure time generates mayor probability of contagion.



**Use of mask:** the use of mask is contemplated in the protocols, although it does not specify the type of mask recommended.



**Relative humidity:** this factor is not directly covered by the protocols, although in some cases the temperature is mentioned, which directly affects the percentage of relative humidity.





**COVERAGE IN REVISED PROTOCOLS** 

within the organization and at the destination

#### COMMUNICATION Restaurants Local Accommodation **Beaches Airports** Ports transportation TOTAL INTERNAL COMMUNICATION OF MEASURES (TO STAFF AND USERS) LAC EXTERNAL COMMUNICATION TOTAL (TO THE DESTINATION, OTHER PRIVATE AND PUBLIC AGENTS AND RESIDENTS) LAC



**Required actions:** 

•Efficiently manage varied and variable information, channels and coordination with all agents; update information and make it accessible and understandable to the user (for example, with "single window", apps, updated webs with consolidated information).

•Structure and systematize communication to support the adoption and management of protocols, as well as to involve all key agents. (for instance, through risk management committees or regular meetings)



Users feel confusion and distrust

Low level of coverage of the communication

when receiving disparate information from various sources.

variables in the protocols.

#### DIAGNOSIS OF BIOSAFETY PROTOCOLS IN THE TOURISM SECTOR





#### COVERAGE IN REVISED PROTOCOLS

CONTROL		Accommodation	Restaurants	Local transportation	Beaches	Airports	Ports
	TOTAL	•	•			•	
COMPLIANCE WITH MEASURES	LAC	•	•			•	•
PROTOCOLS UPDATE	TOTAL	•	•		•		
	LAC	•	•				
HEALTH	TOTAL		•		•		
OF STAFF	LAC	•	•		•	•	
CONTINGENCY PLANS (MANAGMENT OF POSITIVE OR SYMPTOMATIC USER CASES)	TOTAL		•	•	•		
	LAC		•		•		
CONTINGENCY PLANS (MANAGEMENT OF POSITIVE OR SYMPTOMATIC STAFF CASES)	TOTAL	•	•	•	•	•	
	LAC		•		•	•	•

\*N/A: no protocols from countries outside LAC were included in the sample.



The internal supervision of measures, the updating of protocols as well as the contingency plans in some sectors are the weaknesses of the control variables.

Users perceive that there is no **appropiate control** (e.g. on-site control measures, user feedback), and a lack of coordination

#### **Required actions:**

•Updating the protocols is necessary to achieve effectiveness and validity of measures throughout the pandemic.

•Establish suitable control mechanisms for measures in the organization (for instance, checklists, records or internal documentation) and at the destination (for instance, observatories, on-site inspections, self-declarations, or monitoring groups) to regain users`confidence.

Deploy control/performance indicators.

# Key factors for interviewed experts



Beyond the specific processes of implementation, communication and control, there are transversal factors that impact on the performance (efficiency and effectiveness) of the protocols that should be considered in any future update of biosafety measures in the tourism sector.

Regulatory framework and degree of compulsory nature:



Learned lessons in this crisis will reinforce the management structures of both destinations and tourist organizations, laying the bases for future sanitary crises.



# The public-private co-implementation favours:

- •Greater adoption, dissemination and continuity of measures
- •Greater control of measures
- •Union and creation of associations in a highly atomized sector (sector strengthening)
- •Greater commitment of involved agents

#### However, we find:

- •Development and implementation of disparate protocols.
- •Different level of representativeness and participation of key agents (for example, low representation of workers, which is reflected in protocols).



It is necessary to promote public-private co-implementation (e.g. crisis committees in destinations and tourist organizations) and establish mechanisms for their formalization and operation when required.

# Strategies to improve implementation, communication and control

Variable	Analysis	User's Perceptions	Action
IMPLEMENTATION	Heterogeneity on implementation	Distrust	Harmonization of implementation and formalization mechanisms
COMMUNICATION	Dispersion in measures	Distrust	Revision of communication at the destination
	Low coverage in protocols	Confusion	Inclusion of communication measures in protocols
CONTROL	Lack of control (no measures or indicators)	Lack of control	Establishment of cost-effective control mechanisms: public- private coordination, self-control digital channels, and performance indicators.
	Lack of definition of contingency plans	Improvisation and chaos	Definition and specification of contingency plans



UPDATE PROTOCOLS AND REINFORCE VICC

# CHALLENGES

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U.

Update current biosafety protocols considering learned lessons and new researches (VARISK)

- Include risk variability approach: mechanisms to evaluate the risk of contagion according to modulating factors.
- Harmonize biosafety measures and their level of granularity in each Risk Node (RN), to facilitate their implementation and inspire confidence to the user.
- •Include measures for key Risk Nodes (RN) and not currently included in the analyzed protocols.
- Include internal management and self-control measures for tourism organizations and destinations.



Define measures for the management of protocols' implementation, communication and control (VICC)

Establish permanent structures based on learned lessons to face future sanitary crises

- Consider a **collaborative approach and participation** of all key agents of the destination's value chain.
- **Determine and communicate** the degree of obligation to comply with the established protocols.
- Update information (RN coverage according to new science discoveries).
- Establish coordinated and agile **communication channels and structures between key agents of the tourist value chain** (public-public, private-public, private-private).
- Define and implement systematic and cost-effective control mechanisms that guarantee compliance with measures.

#### DIAGNOSIS OF BIOSAFETY PROTOCOLS IN THE TOURISM SECTOR





Promote compliance with protocols by fostering their convergence with the current legal framework (occupational health, food hygiene, safety, etc.) as a basis for the construction of a management framework.

• Facilitate harmonization and self-control measures, improving the perception of the user and regaining market confidence.

• Identify **touchpoints with legal framework** to design biosafety measures and their management structure. The use of **the existing regulatory framework accelerates the design and implementation of measures** and, in turn, values and reinforces the legal framework, contributing to the professionalization of the sector and the consolidation of management structures for future health crises.

#### DIAGNOSIS OF BIOSAFETY PROTOCOLS IN THE TOURISM SECTOR





• **Development of recommendations** to be considered in any **biosafety** tourism protocol in LAC.



• Identify the content that should be revised and updated according to challenges pointed out in the diagnosis.



• Define processes for the implementation, communication and control of protocols that ensure their harmonization, effectiveness and validity.

RETRIEVE THE CONFIDENCE OF USERS, REACTIVATE TOURISM ACTIVITY AND LAY OUT THE BASIS FOR FUTURE CRISES.





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