

## An Overview of Romania's Pandemic Measures and their Effect upon Travel across the Romanian-Hungarian Border

*Enya-Andrea TĂMAȘ\**

**Abstract.** *The coronavirus broke out in Europe in January 2020, throughout February and March, the number of pandemic-related measures increasing significantly. The crisis leads to the introduction of unprecedented restrictions across Member States, and the variety of national responses intensified with the evolution of the pandemic. In terms of internal measures, the most common choice was the introduction of a lockdown, while external measures generally included travel and entry restrictions and the reintroduction of border checks. Restrictions and bans on travel have an especially important meaning in the Schengen Area, the 'borderless' part of Europe. The article aims at making a radiography of government measures introduced in the fight against the pandemic in the European Union, with a special focus on Romania the effects of the restrictive measures on cross-border travel behaviour and patterns across the Romanian-Hungarian border. To achieve this, an online survey was conducted to analyse to what extent restrictive measures targeting travel affected cross-border travel towards Hungary. Both Romania and Hungary have followed the EU trend in their measures, and it seems that these, more or less, had an impact only on the frequency of travels across their shared border. Other aspects, such as changes in border-crossing process and citizen's acceptance of their domestic restrictions are also analysed here.*

**Keywords.** *Pandemic measures; travel restrictions; entry ban; Covid-19; Romanian-Hungarian border*

### **Introduction**

About two months after the first case of an atypical viral pneumonia was reported in the Chinese city of Wuhan, the WHO declared the novel coronavirus a global pandemic on 11 March 2020.<sup>1</sup> Even before declaring it as such, countries globally had begun to issue measures to limit or significantly slow the spread of the virus, closing borders, suspending international travel, placing restrictions on travellers arriving from Covid-19 hotspots. Officially, the virus broke out in Europe on 25 January<sup>2</sup>, and throughout February and March, the number of pandemic-related measures increased significantly, the crisis leading to the introduction of unprecedented measures across Member States (MS).

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\* PhD. student at the Faculty of European Studies in Cluj-Napoca and specializes in the field of Romanian-Hungarian cross-border relations. **E-mail:** enya.tamas@ubbcluj.ro.

<sup>1</sup> World Health Organization (WHO), "Opening Remarks by WHO Director-General at a Media Briefing on COVID-19," 11 March 2020, accessed July 29, 2021, <https://www.who.int/director-general/speeches/detail/who-director-general-s-opening-remarks-at-the-media-briefing-on-Covid-19-11-march-2020>.

<sup>2</sup> Eric Maurice et al., "Covid-19: European Responses, a Complete Picture," *Policy Paper* (Robert Schuman Foundation, May 12, 2020), accessed July 27, 2021, <https://www.robert-schuman.eu/en/doc/actualites/Covid19-26032020-en.pdf>.

The EU's internal border regions were one of the most gravely affected zones of Europe. Constituting almost half (40%) of the EU's territory, giving home to 30% of its population,<sup>3</sup> these regions were severely affected both economically and socially by the pandemic. After decades of gradually opening up borders, the Covid-19 crisis has "affected border regions in a way that had never been experienced since the establishment of the Single Market in 1992."<sup>4</sup> As most Member States decided to close their borders, we saw citizens and workers not being able to reach their workplaces and loved ones, leaving them in a very difficult and vulnerable position. In the blink of an eye, years of cooperation across borders was disrupted. The pace with which measures were issued during this period was unprecedented, its manner largely uncoordinated.

The article aims at making a radiography of government measures introduced in the fight against the pandemic in the European Union, with a special focus on Romania their effects on cross-border travel behaviour and patterns across the Romanian-Hungarian border. To achieve this, an online survey was conducted to analyse to what extent restrictive measures targeting travel affected cross-border travel towards Hungary. The motivation behind the choice on this particular border lies in the fact that this is the only Romanian border shared with a Schengen country, therefore having a very special status – both within and outside the 'borderless' Europe.

### *Methodology*

The present article contains three main parts, therefore multiple research approaches and methods have been used. The main research topic the article investigates addresses the measures taken by the government of Romania during the coronavirus pandemic. For this, the first part of the article aims to give an EU-wide context through exploring the nature of measures taken by other MS and the European institutions. Together with the second part which, as said, focuses on Romania during the pandemic, a descriptive approach has been adopted, relying mainly on the use of secondary data. The third part is more hybrid, as it combines both descriptive and an exploratory approach since new, primary data has been introduced. For all of these, both quantitative and qualitative data have been used.

All descriptive parts of the article rely on the analysis of existing data. Among the qualitative resources, one can observe the heavy reliance on national and EU legislation and governing acts, but relevant scholarly work has also been consulted. For the exploratory part the research data was collected through an online survey, made in Google Forms, distributed on social media platforms. The questionnaire had 5 parts: the introductory part contained questions about the respondents' socio-demographic characteristics, and was followed by 3 identical parts containing the same questions, but which referred to different time periods: before March 2020; between March 2020 – March 2021; after March 2021. The logic behind this partition was that, most restrictive

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<sup>3</sup> European Commission, "Communication from the Commission to the Council and the European Parliament. Boosting Growth and Cohesion in the EU Border Regions," COM(2017) 534 final, Brussels, 20 September, 2017, accessed July 29, 2021, [https://ec.europa.eu/regional\\_policy/en/information/publications/communications/2017/boosting-growth-and-cohesion-in-eu-](https://ec.europa.eu/regional_policy/en/information/publications/communications/2017/boosting-growth-and-cohesion-in-eu-).

<sup>4</sup> European Committee of the Regions, "Public Consultations on the Future of Cross-Border Cooperation," (Report), 26 April, 2021, 33, accessed July 29, 2021, [https://portal.cor.europa.eu/egtc/about/Documents/Report\\_on\\_the\\_Consultations-Future\\_of\\_CBC.pdf](https://portal.cor.europa.eu/egtc/about/Documents/Report_on_the_Consultations-Future_of_CBC.pdf).

measures and travel bans were adopted during March. The time period between March 2020 – March 2021 can be regarded as the ‘core’ of the pandemic, in which the most restrictive measures have been in place. Although a total relaxation didn’t come with March 2021, the general availability of the vaccines saw the increase in the number of people exempt from bans and restrictions. Therefore, from March 2021 a return to normality can be observed to some extent. The questionnaire was distributed in July 2021 on social media platforms, 51 respondents answering our questions.

### ***Responses to Covid-19 pandemic in the European Union***

Bonardi et. al distinguish between two approaches taken by states in the fight against the Covid-19 pandemic: a. the ‘herd-immunity approach’, according to which the viral dissemination through the population is a necessity to achieve collective immunity, relied solely on containment public policy measures; b. the ‘lockdown approach’ meant that “most of a country’s population had to stay at home to stop the virus dissemination” to avoid over-crowding of hospital facilities and prevent the deaths of people. While some countries initially chose to follow the first approach, with the rapid evolution of the health crisis, within a few weeks most governments opted for the lockdown strategy.<sup>5</sup>

Similarly, the choice of the majority in Europe was to try and stop the pandemic, through containment measures. By March, most EU MS have responded to the pandemic with national lockdowns, the reintroduction of border controls and restrictions to cross-border mobility, both intra- and extra-EU. The resulting picture was, and to a measure still is, a web of dynamic, multi-layered measures. The imposed restrictions reveal a large amount of differentiation, both in terms of their scope and their implementation.

### ***Member State responses***

Besides domestic restrictions, MS responses to the Covid-19 pandemic have led to an unprecedented closure of both internal and external EU borders, implemented in a unilateral, ad hoc and uncoordinated way. The variety of responses intensified with the evolution of the pandemic, some states lifting, others reiterating or exacerbating the temporary restrictions and controls, thus further amplifying the EU-wide fragmentation.

Although border controls and travel restrictions went hand in hand, it is essential to differentiate between the two instruments. According to Thym, border controls imply that people may only cross internal Schengen borders at official border crossing points, and nowhere else. Border controls erect a physical control infrastructure but they do not imply travel restrictions. On the other hand, travel restrictions or bans correspond to an almost complete border closure, except for some categories.<sup>6</sup>

The legal basis for the introduction of such measures is twofold. First of all, travel bans are covered by Art. 27 and Art. 29 of Directive 2004/38/EC, which state that “Member States may restrict the freedom of movement and residence of Union citizens and their family members, irrespective of nationality, on grounds of public policy, public security or public health” (Art. 27 – para. 1, Directive 2004/38), and that the “only diseases justifying measures restricting freedom of movement shall be the diseases with

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<sup>5</sup> Jean-Philippe Bonardi et al., “Fast and Local: How Lockdown Policies Affect the Spread and Severity of Covid-19,” *Covid Economics* 23, no. 23 (28 May, 2020): 326, accessed July 15, 2021, <http://unassumingeconomist.com/wp-content/uploads/2020/05/fast-and-local.pdf>.

<sup>6</sup> Daniel Thym, “Travel Bans in Europe: A Legal Appraisal (Part I),” *EU Immigration and Asylum Law and Policy* (blog), 18 March, 2020, accessed July 15, 2021, <https://eumigrationlawblog.eu/travel-bans-in-europe-a-legal-appraisal-part-i/>.

epidemic potential” (Art. 29 – para. 1, Directive 2004/38). These measures, however, must respect the principle of proportionality (Art. 27, para. 2, Directive 2004/38). It is beyond doubt that the coronavirus qualifies as a ‘disease with epidemic potential’ and may justify, therefore, travel restrictions under Article 29 of the Directive.

The Schengen Area is anchored in a common set of rules enshrined in the Schengen Borders Code (SBC). Three provisions of the SBC refer to the introduction of temporary border controls at internal borders:

- Article 25 specifies that “Where, in the area without internal border control, there is a serious threat to public policy or internal security in a Member State, that Member State may exceptionally reintroduce border control at all or specific parts of its internal borders for a limited period of up to 30 days or for the foreseeable duration of the serious threat if its duration exceeds 30 days. The scope and duration of the temporary reintroduction of border control at internal borders shall not exceed what is strictly necessary to respond to the serious threat.” (Art. 25, para. 1, SBC). “Border control at internal borders shall only be reintroduced as a last resort” (Art. 25, para. 2, SBC).

- According to Art. 28, “Where a serious threat to public policy or internal security in a Member State requires immediate action to be taken, the Member State concerned may, on an exceptional basis, immediately reintroduce border control at internal borders, for a limited period of up to ten days” (Art. 28, para. 1, SBC).

- Article 29 refers to “exceptional circumstances where the overall functioning of the area without internal border control is put at risk as a result of persistent serious deficiencies relating to external border control” and therefore is not relevant to this case.

While Art. 25 sets a general framework for the reintroduction of border controls in the case of foreseeable events, Art. 28 refers to those cases in which immediate action needs to be taken. No matter under which provision it is invoked, all restrictive measures should comply with the principle of proportionality. Proportionality, alas, is a subjective matter. According to Peyrony et. al “the proportionality of border controls and restrictions with regard to the pandemic situation in the CB regions was not always respected”, for example, in cases with very strict controls and restrictions but an extremely low percentage of incidences (as was in the case of Poland, Hungary, Denmark).<sup>7</sup>

Although neither refer directly to public health justifications, the actual and imminent risks connected to the rapid spread of the Coronavirus provide solid substance and justification for the measures taken by mostly all MS. According to Thym, in the initial stages, most MS used Article 28 as the legal basis to justify internal border controls. Subsequently, nearly all MS have started to use Article 25 as the justification of their measures.<sup>8</sup> Austria was the first state to notify the Commission on reintroducing controls on its border with Italy (March 11), and subsequently on all its borders. Austria was shortly followed by other members, such as Hungary, the Czech Republic, Denmark, Poland, Lithuania, Germany, and by the end of March almost all internal borders were covered.<sup>9</sup>

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<sup>7</sup> Jean Peyrony, Jean Rubio and Raffaele Viaggi, *The Effects of COVID-19 Induced Border Closures on Cross-Border Regions* (Luxembourg: Publications Office of the European Union, 2021), 67, accessed July 17, 2021, <https://op.europa.eu/en/publication-detail/-/publication/46250564-669a-11eb-aeb5-01aa75ed71a1>.

<sup>8</sup> Thym, Part I.

<sup>9</sup> European Commission, “Member States’ Notifications of the Temporary Reintroduction of Border Control at Internal Borders Pursuant to Article 25 and 28 et seq. of the Schengen Borders Code,”

### ***March–May 2020: ‘border closure process’***

Dubbed as the ‘border closure process’, the March of 2020 has undone in the span of a month what was previously achieved through decades of gradual opening up. Most of the authorities which set up border controls and closed off crossing points took the decision very quickly and unilaterally, without assessing the future consequences of these measures, which caused longer journeys and increased traffic congestion at borders.

During the first phase of the pandemic response, MS had begun to issue measures to limit international mobility in an effort to slow the spread of the virus. Travel restrictions were the most common measure taken as a first response, most countries banning the entry of people coming from, transiting through or having been to Covid hotspots. Travel restrictions were soon accompanied by complete or partial closure of many points of entry as most border regions saw the number of border crossing points drastically reduced to make it easier to control the number of travellers attempting to enter.

By April, a large variety of measures was observed across the EU internal borders, but travel restrictions, controls and border closures applied along most of them. Mostly in Central and Eastern European countries, a mandatory self-isolation or institutionalized quarantine applied to those who entered.

As it became clear that emergency measures were likely to remain in place for longer than expected, some governments introduced exceptions to minimize the economic and social impacts. Usually, exemptions were adopted targeting the movement of nationals, their family members, diplomats and staff of international organizations, and cross-border workers.<sup>10</sup> Regarding the latter category, on 30 March in a Communication the Commission urged MS to allow and facilitate the mobility of cross-border workers and seasonal workers, who “live in one country but work in another” and “exercise critical occupations for which unhindered movement across borders is essential.”<sup>11</sup> As the pandemic progressed, new categories were included in the list of exceptions.

### ***June – September: ‘phased reopening’***

Throughout the second phase of the pandemic response, governments entered a ‘phased reopening’, both internally and externally. In May, the Commission published a guideline on ‘a phased and coordinated approach for restoring freedom of movement and lifting internal border controls’, in which it invited the MS to “engage in a process of reopening unrestricted cross-border movement within the Union.”<sup>12</sup>

While in the following period travel restrictions remained in place, most of the time their composition changed, shifting from a ban-based approach to more of a health-related approach. Health requirements, such as mandatory quarantines and self-isolation,

accessed July 29, 2021, [https://ec.europa.eu/home-affairs/what-we-do/policies/borders-and-visas/schengen/reintroduction-border-control\\_en](https://ec.europa.eu/home-affairs/what-we-do/policies/borders-and-visas/schengen/reintroduction-border-control_en).

<sup>10</sup> Meghan Benton et al., *COVID-19 and the State of Global Mobility in 2020* (International Organization for Migration, 2021), 1, accessed July 17, 2021, <https://publications.iom.int/system/files/pdf/covid-19-and-the-state-of-global.pdf>.

<sup>11</sup> European Commission, “Guidelines Concerning the Exercise of the Free Movement of Workers during Covid-19 Outbreak,” 2020/C 102/03, *Official Journal of the European Union*, 30 March, 2020, accessed July 18, 2021, [https://eur-lex.europa.eu/legal-content/EN/TXT/PDF/?uri=CELEX:52020XC0330\(03\)&from=GA](https://eur-lex.europa.eu/legal-content/EN/TXT/PDF/?uri=CELEX:52020XC0330(03)&from=GA).

<sup>12</sup> European Commission, “Communication from the Commission. Towards a Phased and Coordinated Approach for Restoring Freedom of Movement and Lifting Internal Border Controls — COVID-19,” 2020/C 169/03, 15 May, 2020, 1, accessed July 18, 2021, [https://eur-lex.europa.eu/legal-content/EN/TXT/PDF/?uri=CELEX:52020XC0515\(05\)&from=EN](https://eur-lex.europa.eu/legal-content/EN/TXT/PDF/?uri=CELEX:52020XC0515(05)&from=EN).

medical certificates, or negative test results overtook most of the travel restrictions as the most commonly implemented type of measure. As the understanding of the virus and its transmission developed, the composition of health requirements shifted as well. While in the first period mandatory quarantines were the most common intervention, later certificate requirements became increasingly common, surpassing the other measures. Besides opening entry points, governments also expanded exemptions to travel measures, thus allowing more travellers to enter. Important to mention, though, is the fact that while the EU has opened up internally, it remained closed to most travellers from abroad.<sup>13</sup>

### ***October–December: responses to new outbreaks and virus mutations***

Amid warnings of a resurgence of the virus, most governments started to reintroduce curfews, institute lockdowns, and reinstate travel and entry criteria. As states built up their capacities in the previous months, health requirements became a viable alternative to bans and closures. Therefore, while most travel restrictions remained in place, health requirements became the most prevalent measures, entry being conditioned on complying with public health requirements. Still, some countries decided on the reintroduction of strict national lockdowns as the risks posed by new variants of concern<sup>14</sup> started to intensify.<sup>15</sup> To this date there are four variants of concern of the virus: the alpha, beta, gamma and delta,<sup>16</sup> the latter becoming the dominant one in much of the European region<sup>17</sup>.

### ***The EU response***

Per the Treaty on the Functioning of the European Union, the EU has supporting competences in the field of public health<sup>18</sup>, therefore any action taken by the Union is intended only to complement national policies, while its “ability to act depends to a large extent on the Member States and their willingness to work together.”<sup>19</sup>

The EU institutions’ mobilisation started around the beginning of March with the allocation on millions of euros to research and the support of businesses, but as health is not a Community competence, the Commission was not equipped to take over the management of the pandemic response. Still, it attempted to come up with at least a

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<sup>13</sup> Benton et al., 15–19.

<sup>14</sup> World Health Organization (WHO), *Tracking SARS-CoV-2 Variants*, accessed July 27, 2021, <https://www.who.int/en/activities/tracking-SARS-CoV-2-variants/>.

<sup>15</sup> Benton et al., 20–22.

<sup>16</sup> Laurel Wamsley, “The Lambda Variant: What you Should Know and why Experts say not to Panic,” *NPR*, 22 July 2021, <https://www.npr.org/sections/coronavirus-live-updates/2021/07/22/1019293200/the-lambda-variant-coronavirus-what-you-should-know?t=1627213572562>.

<sup>17</sup> World Health Organization (WHO), “SARS-CoV-2 Delta Variant now Dominant in much of European Region; Efforts must be Reinforced to Prevent Transmission, Warns WHO Regional Office for Europe and ECDC,” (Press Release, 23 July, 2021), accessed July 25, 2021, <https://www.euro.who.int/en/media-centre/sections/press-releases/2021/sars-cov-2-delta-variant-now-dominant-in-much-of-european-region-efforts-must-be-reinforced-to-prevent-transmission,-warns-who-regional-office-for-europe-and-ecdc>.

<sup>18</sup> European Union, Consolidated Version of the Treaty on the Functioning of the European Union, Part Three: Union Policies and Internal Actions, Title XIV: Public Health, Art. 168, *Official Journal of the European Union*, 21 October, 2012, <https://eur-lex.europa.eu/legal-content/EN/TXT/PDF/?uri=CELEX:12012E/TXT&from=EN>.

<sup>19</sup> Maurice et al., 1.

coordinated, if not, unified response by issuing several nonbinding guidelines which were meant to offer a framework for coordination for MS. Soon after receiving the first notifications pursuant to Arts. 28 and 25 of the SBC, the Commission acknowledged that, if done correctly, the reintroduction of border controls could play a key role in containing the crisis. Therefore, on 16 March, the Commission published its *Guideline for border management measures* in which it lets the MS know that they might reintroduce temporary border controls at the internal borders in line with the SBC ((2020) 1753). On the next day, the 27 leaders, during a meeting via videoconference approved the closure of the EU's external borders for an initial period of 30 days.<sup>20</sup> The following guideline regarded frontier and seasonal workers (2020/C 102/03), while the next basically summarized all the previous ones ((2020) 2050). In its following guideline, the Commission put forward a 'phased approach' offering a 3-step 'joint European roadmap' towards the 'restoring of freedom of movement and lifting of internal border controls' (2020/ C169/03). In September 2020, the European Commission proposed a colour-coding scheme for European countries based on their infection rates and other health indicators, which was also nonbinding as countries could partake in it on a voluntary basis.<sup>21</sup>

Despite the will of the European institutions, the situation resulted in purely national decisions, the MS acting in a dispersed and uncoordinated manner, sometimes to the detriment of each other. Some authors argue that European action has left an impression of unease<sup>22</sup> and has been questioned for its failure to scrutinize the legality and proportionality of national restrictive measures from the perspective of EU law,<sup>23</sup> which raise questions about the added value of EU in times of crisis<sup>24</sup>.

### ***Mapping the pandemic related measures taken by Romania***

During the second half of March, in Romania, as elsewhere, comprehensive containment measures were taken. Most hotels, restaurants, and retail entities were closed, culture, sport and leisure activities were suspended, schools were closed and mass events prohibited. The borders with most neighbouring countries were closed, followed by internal mobility restrictions and curfews. Since then, most of these restrictions have been lifted.

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<sup>20</sup> Peyrony et al., 9–19.

<sup>21</sup> Bernd Riegert, "Coronavirus: What the EU's new Traffic Light System Means," *Deutsche Welle*, 14 October 2020, <https://www.dw.com/en/coronavirus-what-the-eus-new-traffic-light-system-means/a-55265476>.

<sup>22</sup> Nicolas-Jean Brehon, "The European Union and the Coronavirus," *European Issues* No. 553, 7 April, 2020, accessed July 18, 2021, <https://www.robert-schuman.eu/en/european-issues/0553-the-european-union-and-the-coronavirus>.

<sup>23</sup> Sergio Carrera, Ngo Chun Luk, *Love thy Neighbour? Coronavirus Politics and Their Impact on EU Freedoms and rule of law in the Schengen Area* (Brussels: CEPS, 2020), accessed July 18, 2021, <https://www.ceps.eu/ceps-publications/love-thy-neighbour/>.

<sup>24</sup> Sandra Mantu, "EU Citizenship, Free Movement, and Covid-19 in Romania," *Frontiers in Human Dynamics* 2, 2020, accessed July 18, 2021, <https://www.frontiersin.org/articles/10.3389/fhumd.2020.594987/full>, DOI=10.3389/fhumd.2020.594987.

### *January–February 2020 – early preventive measures, first cases*

In early January, the Romanian government announced several preventive measures, and started an extensive communication campaign.<sup>25</sup> In February, the first regulation regarding quarantine was issued, and a 14-day mandatory quarantine was imposed for people returning from the Hubei Province and twelve localities in Italy,<sup>26</sup> along with a 14-day self-isolation period at home for people returning from other provinces in China and other localities from the Lombardy and Veneto regions in Italy.<sup>27</sup> On February 26, the first case of infection with the new coronavirus was confirmed in Romania.<sup>28</sup>

### *March–May 2020 – state of emergency*

With the beginning of March came a ban on all indoor or outdoor gatherings,<sup>29</sup> the suspension of courses with the closure of all schools, and the suspension of all commercial flights, bus rides and rail transport to and from countries being in yellow and red zones. On the 16<sup>th</sup> of March, in the context of the evolution of the epidemiological situation determined by the spread of Covid-19, the President of Romania signed the decree establishing a state of emergency for 30 days.<sup>30</sup> At this point there were 139 cases of Covid infections. During the state of emergency, 12 Military Ordinances were issued containing domestic measures meant to prevent the spread of Covid-19 as well as regarding travel and entry restrictions. Commercial flights to and from most EU countries were suspended; the entry through border crossing points of third country foreigners was

<sup>25</sup> Ministerul Sănătății [Ministry of Health], “Comitetul interministerial pentru monitorizarea și managementul potențialelor infecții cu noul coronavirus” [Interministerial Committee for monitoring and management of potential new coronavirus infections], 26 January 2020, accessed July 19, 2021, <http://www.ms.ro/2020/01/26/comitetul-interministerial-pentru-monitorizarea-si-managementul-potentialelor-infectii-cu-noul-coronavirus/>.

<sup>26</sup> Ministerul Sănătății [Ministry of Health], “Măsuri suplimentare pentru limitarea și prevenirea posibilelor îmbolnăviri cu Coronavirus” [Additional measures to limit and prevent possible Coronavirus disease], 23 February 2020, accessed July 19, 2021, <http://www.ms.ro/2020/02/23/masuri-suplimentare-pentru-limitarea-si-prevenirea-posibilelor-imbolnaviri-cu-coronavirus/>.

<sup>27</sup> Ministerul Sănătății [Ministry of Health], “Continuarea măsurilor de prevenire și limitare a eventualelor îmbolnăviri cu noul coronavirus” [Continue measures to prevent and limit possible coronavirus disease], 25 February 2020, accessed July 19, 2021, <http://www.ms.ro/2020/02/25/continuuarea-masurile-de-prevenire-si-limitare-a-eventualelor-imbolnaviri-cu-noul-coronavirus/>.

<sup>28</sup> Loredana Ficiu, “Detalii despre primul român diagnosticat cu noul coronavirus. Are 20 de ani și locuiește în comuna Prigoria” [Details about the first Romanian diagnosed with the new coronavirus. He is 20 years old and lives in the commune of Prigoria], *Mediafax*, 27 February, 2020, <https://www.mediafax.ro/coronavirus/detalii-despre-primul-roman-diagnosticat-cu-noul-coronavirus-are-20-de-ani-si-lucra-la-restaurantul-italianului-care-a-vizitat-recent-tara-noastra-18897127>.

<sup>29</sup> Ministerul Sănătății [Ministry of Health], *Buletin informativ* 08 March 2020, h. 12:00, accessed July 19, 2021, <http://www.ms.ro/2020/03/08/buletin-informativ-08-03-2020-ora-1200/>.

<sup>30</sup> Președintele României [The President of Romania], “Decret semnat de Președintele României, domnul Klaus Iohannis, privind instituirea stării de urgență pe teritoriul României” [Decree signed by President of Romania, Mr. Klaus Iohannis, on the establishment of a state of emergency on the territory of Romania], 16 March 2020, accessed July 25, 2021, <https://www.presidency.ro/ro/media/decret-semnat-de-presedintele-romaniei-domnul-klaus-iohannis-privind-instituirea-starii-de-urgenta-pe-teritoriul-romaniei>.

prohibited (except if they transited through specially organized corridors, in line with the Commission guidelines); movement outside one's residence was restricted, first only during the night, and then during days as well; and home isolation or institutional quarantine was introduced for all persons entering Romania.

In line with the EU guidelines on frontier and seasonal workers, exceptions regarding cross-border mobility were introduced for certain categories, later the authorities deciding to allow the transport of seasonal workers from Romania to other states via charter. Consequently, hundreds of people amassed in the parking lots of Romanian airports without any respect for health measures, waiting to be flown to Western Europe for seasonal work.<sup>31</sup> In light of this, the next Military Ordinance introduced the obligation to obtain the approval of the Romanian authorities for the transport of seasonal workers, but failed to detail the procedure itself. By the rest of the Military Ordinances mainly gradual easing measures were introduced. The following table summarizes the main provisions of each Military Ordinance:

<b>Table 1. Military Ordinances issued during the pandemic</b>
<b>Military Ordinance no. 1</b>
Military Ordinance no. 1 decreed the closure of restaurants, hotels, cafes and pubs, the suspension of all cultural, scientific, artistic, religious, sporting, entertainment, and personal care activities, and allowed only the organization of events in open spaces with less than 100 participants. According to the ordinance, starting with March 18, all flights to and from Spain were suspended for a period of 14 days. Moreover, the suspension of flights to and from Italy was extended for another period of 14 days, starting with March 23, 2020.
<b>Military Ordinance no. 2</b>
The second Military Ordinance introduced restrictions on the movement of persons, prohibiting the movement of persons during the night, except in certain justified cases. All shopping centres were closed, too. Starting with this ordinance, it was forbidden for foreign citizens to enter Romania, except through the specially organized transit corridors, exceptions being made for other residents, family members, and others.
<b>Military Ordinance no. 3</b>
On March 24, the third Military Ordinance was issued. Meanwhile, two days earlier the first 3 deaths in Romania due to the virus were confirmed. This instituted a national lockdown, calling in the military to support police and Gendarmerie personnel in enforcing the new restrictions. Movement outside the home or household was prohibited, with some exceptions (work, buying food or medicine etc.), while people over the age of 65 were allowed to leave their homes only between 11 a.m. and 1 p.m. Starting with 25 March, for all persons entering Romania the measures of quarantine or self-isolation were introduced. Moreover, all flights to and from France and Germany were suspended for a period of 14 days.
<b>Military Ordinance no. 4</b>
A fourth Military Ordinance has been issued on 29 March, further strengthening previously imposed fines and restrictions.
<b>Military Ordinance no. 5</b>
The Fifth Military Ordinance was issued on 30 March, extending bans on flights and international travel. According to this, the suspension of flights to and from Spain was extended for a period of 14 days, starting with March 31, and to and from starting with April 6.
<b>Military Ordinance no. 6</b>

<sup>31</sup> "Sute de români se înghesuie pe aeroportul din Cluj ca să plece în Germania. S-a deschis dosar penal" [Hundreds of Romanians crowd the airport in Cluj to go to Germany. A criminal case has been opened], *Știrile ProTV*, 09 April, 2020, <https://stirileprotv.ro/stiri/social/sute-de-romani-se-inghesuie-in-cluj-ca-sa-plece-in-germania-fara-distantare-sociala.html>.

On the same day, the Sixth Military Ordinance placed Suceava, along with eight adjacent communes, under total quarantine due to a massive breakout.
Military Ordinance no. 7
The seventh Military Ordinance was issued on the 4 <sup>th</sup> of April, further extending the national lockdown period, and imposing a second local quarantine on the town of Țândărei. It also suspended all flights to and from Austria, Belgium, Switzerland, the United States of America, the United Kingdom, the Netherlands, Turkey and Iran for a period of 14 days, and extended the suspension on flights to and from Germany and France for another two weeks. It was also stipulated for the first time that charter flights that transport seasonal workers from Romania to other states is allowed, with the approval of the competent authorities of the destination country. International road transport of persons is suspended by regular and occasional services to and from Italy, Spain, France, Germany, Austria, Belgium, Switzerland, the United Kingdom, the Netherlands and Turkey throughout the state of emergency.
Military Ordinance no. 8
On April 9, the Eighth Military Ordinance came into effect, reinforcing previously adopted measures, including the suspension of flights to and from Spain for another 14 days, and the closure of border crossing points.
Military Ordinance no. 9
The Ninth Military Ordinance of 16 <sup>th</sup> of April reinforced the suspension of all flights to and from Austria, Belgium, Switzerland, United States of America, United Kingdom, the Netherlands, Turkey, Iran, Italy, France and Germany with two weeks each, and introduced some relaxations on the Romanian-Bulgarian border for the cross-border workers.
Military Ordinance no. 10
On 27 April, the tenth Military Ordinance came into effect which reinforced the safety provisions and restrictions on the movement of the elderly population.
Military Ordinance no. 11
On 11 May, the Eleventh Military Ordinance lifted the Țândărei quarantine and reinforced the suspension on flights to and from Spain for two days.
Military Ordinance no. 12
The last Military Ordinance lifted the Suceava quarantine.

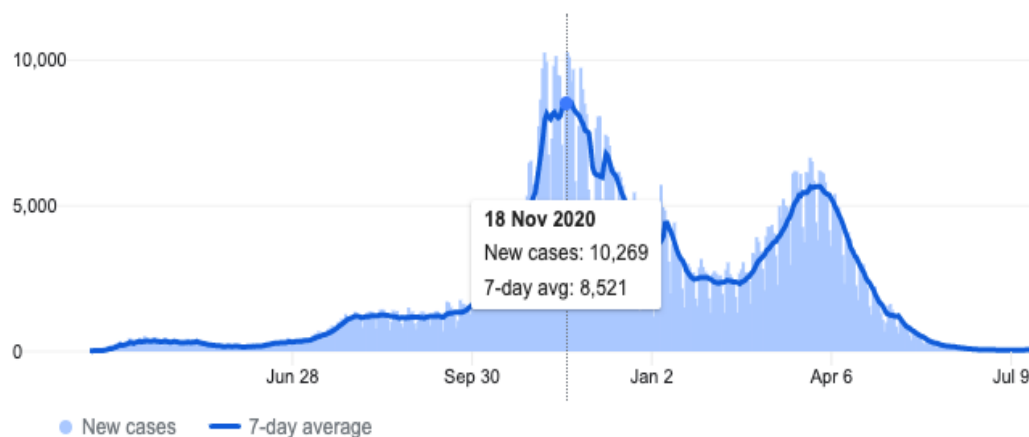
### ***June–October 2020: state of alert, relaxations***

On May 15 the state of emergency was replaced by a state of alert, maintained to this day by re-issuing a decision on this matter every 30 days, with new restrictive or easing measures being introduced each time. For a period, most safety measures not only remained in place but new ones were introduced: shops and restaurants remained closed, public gatherings were banned, the obligation to wear a protective mask in all public indoor spaces was introduced, quarantine/self-isolation became obligatory for all persons (with some exceptions), the suspension on flights, road and railway transport to most countries was prolonged, schools remained closed, and although movement within a locality was allowed, outside of it became prohibited (Decision 24/18.05.2020). Two weeks later, at the end of May some restrictions on public gatherings and inter-locality movement were lifted, several types of businesses could open and international transport also started to some extent (Decision 26/28.05.2020). In terms of travel, in July the criterion on the basis of which the exemption from quarantine/isolation measures apply to those who enter changed – the cumulative incidence rate of new cases/100000 inhabitants in the last 14 days had to be less or equal to that registered in Romania in the same period. From that moment on the National Institute for Public Health updates weekly the list of EU/EEA states (Decision 33/02.07.2020). At the end of July came some must needed level of decentralisation regarding decisions on public health measures as counties were allowed to decide on some aspects regarding internal restrictions (Gov. Decision

553/15.07.2020). Therefore, from August the picture was much more dynamic, as different measures were implemented across the regions based on their incidence rates. At the end of the month some all-encompassing rules were put forward by the Government regarding safety measures during the electoral campaigns (Gov. Decision of 27.08.2020), and for the first half of autumn only minor details changed (regarding the number of persons allowed to participate at certain events, or the capacity level to which businesses could allow citizens to enter, the types of gatherings, and so on).

### ***November–December 2020: second wave***

With November, as the incidence rates started to rise, so did the number of reintroduced restrictions. At the beginning of the month came the obligation to wear a protective mask, both inside and outside, on the whole territory of Romania, indifferent of the infection rates. At the same time, mobility outside one's residence was prohibited during night time, and most indoor activities were banned (Gov. Decision 935/07.11.2020), and teaching activities moved, once again, to the online sphere (Decision 53/08.11.2020). Sadly, it seems that these measures were taken too late. The highest number of new cases/day was reached on 18 November, with more than 10.000 persons being tested positive for in one day.



**Figure 1.** Romania's Covid infection curve<sup>32</sup>

### **January – June 2021: third wave, new variants**

The last weeks of 2020 saw no change from the point of view of public health measures, and the 2021 Government Decisions prolonged most of them for the next period. Two weeks later, the first mention regarding vaccinated persons coming to Romania appeared, according to which those who come to Romania and more than 10 days passed since they have been vaccinated with two doses are exempt from the measures of quarantine/isolation (Decision 4/18.01.2020).

As up to this point schools were closed and teaching activities took place exclusively online, and with the incidence rates slowly decreasing, the authorities felt the

<sup>32</sup> Ensheng Dong, Hongru Du, and Lauren Gardner, “An Interactive Web-Based Dashboard to Track COVID-19 in Real Time,” *Lancet Infectious Diseases* 20, no. 5, accessed July 29, 2021, doi: 10.1016/S1473-3099(20)30120-1. JHU CSSE COVID-19 Data: <https://github.com/CSSEGISandData/COVID-19>.

need to coordinate the opening of schools. Alas, a uniform approach would not have been wise and efficient, as infection rates differed greatly across the regions of the country. Therefore, in February a new methodology and criteria system was put forward, which established 3 scenarios:

- a. In the 'green scenario' the cumulative incidence rate for the last 14 days in the locality is less than or equal to 1/1000, in which case the physical presence of all students is allowed.
- b. In the 'yellow scenario' the incidence rate is between 1/1000 and 3/1000, therefore only the following categories can attend schools: all pre-schoolers and preliminary education students, students of terminal classes in secondary ed. and high school.
- c. In the 'red scenario' no one can attend schools as the incidence rate is above 3/1000 (Decision 5/03.02.2021).

With the vaccination campaign well under way by this point, immunity became a criterion for exception from the measure of quarantine/isolation. Therefore, those persons entering the country who have been fully, and those who have been infected in the last 90 days were added to the exemptions (Decision 7/04.02.2021). All the other persons could enter only by presenting a negative Covid test, taken with maximum 72 hours before arriving at the border (Decision 6/04.02.2021), and for a period of time even they had to enter a 10-day long quarantine/isolation (Decision 9/11/02.2021). With spring came yet another wave, the incidence rates started rising again. As a reaction, the time interval during which people could go outside of their residence was also correlated with local incidence rates:

- a. If the incidence rate was between 4/1000 and 7,5/1000 inhabitants, a 20:00 curfew was set on Friday, Saturday and Sunday;
- b. If the incidence rate was higher than 7,5/1000, a 18:00 curfew was set on every day and businesses had to close at 20:00.

In the following period, most restrictive measures remained in place, with only small regional variations. A general 22:00 curfew was upheld, controversially, though, on Easter day free movement was allowed between 20:00 – 02:00 to be able to attend religious ceremonies (Decision 22/08.04.2021). In April, the government approved the provision of assistance to Ukraine (Decision 23/22.04.2021) and India (Decision 24/27.04.2021) in line with their request through the EU Civil Protection Mechanism.

At the end of May came good news – starting with June several restrictions and prohibitions will be lifted on the organization of cultural, artistic and entertainment activities, weddings and other private gatherings, trainings and workshops, conferences, sport competitions, the functioning of fitness studios, indoor restaurants, clubs, bars and pubs, and more. The participation to most of these activities required either a vaccination certificate, a negative test or proof of infection in the last 90 days. Moreover, after more than a year, the elimination of travel restrictions for third country foreigners were eliminated (Decision 32/27.05.2021) and some exceptions were formulated for those traveling to Romania because of the EURO 2020 championship (Decision 38/09.06.2021).

Since July quarantine measures for those arriving in Romania are based on the cumulative incidence rate/1000 inhabitants for the last 14 days. In accordance with these rates, states are categorized into green (less than 1,5), yellow (between 1,5 and 3) and red zones (above 3), those coming from the latter two zones having to enter quarantine for 14 days. Besides the usual exceptions, those who have been vaccinated, who present a

negative test or have been infected in the last 90 are exempt from quarantine obligations (Decision 43/01.07/2021).

At the time of writing, the news is that with August 1 more relaxing measures are coming – 75000 persons will be able to participate at outdoor cultural, artistic and entertainment activities, 400 persons at weddings and other public gatherings, and more persons than before at sport events, trainings and workshops and conferences. Participation, as by now usual, is based on criteria of immunity (Decision 50/26.07.2021), which at the time of writing (one week before these new measures apply) is not so great in Romania. On 27 July, 4.810.721<sup>33</sup> persons have received all the recommended doses of the vaccine, representing only a 24,8% rate of vaccination.<sup>34</sup> In the EU context, this grants Romania the penultimate position in terms of vaccination<sup>35</sup>. Although in early 2021, optimism has grown among the Romanian population about a potential return to normality as several vaccines have been approved, and with thousands of citizens registering on the vaccination platform when the administration of the first dose became available, it seems that Romania's Covid-19 vaccination campaign has been only mildly successful. Despite the fact that it has been supported by a comprehensive and coherent communication strategy, it seems that it wasn't enough to mobilise the population.

### ***Cross-border mobility at the Romanian-Hungarian border***

The 448 km long Romanian-Hungarian border is an internal border in the context of the EU, but an external one from the point of view of the Schengen Area. In this relation, the traditional role of the border has been partially eliminated, but the country still cannot be considered part of a 'Europe without borders'. This transitional state of the border regime lends a special situation to cross-border relations, at all levels. As an external Schengen border, border controls have already been in place before the pandemic situation. Romania is an EU Member State, therefore Romanian citizens enjoy the right of free movement under Union law and undergo only a minimum check in order to identify them for security purposes (Art. 8, para. 2, SBC). This consists of a rapid verification of either their identity card or passport at specifically designed corridors for EU citizens.<sup>36</sup> During the pandemic, the border crossing process was quite often modified by the ever-changing measures detailed above. Before June 2020 there was no mention of Hungary on the list of states with high epidemiological risks, and even after that Hungary remained among the green zone countries for a long time.

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<sup>33</sup> Hannah Ritchie et al., "Coronavirus Pandemic (COVID-19)," *OurWorldInData.org*, accessed July 26, 2021, <https://ourworldindata.org/coronavirus>.

<sup>34</sup> The current population of Romania is 19.100.577 as of Tuesday, July 27, 2021, based on Worldometer elaboration of the latest United Nations data. Worldometer, "Romania Population (Live)," accessed July 27, 2021, <https://www.worldometers.info/world-population/romania-population/>.

<sup>35</sup> Conor Stewart, "COVID-19 Vaccination rate in European Countries as of July 2021," *Statista*, 27 July, 2021, accessed July 27, 2021, <https://www.statista.com/statistics/1196071/Covid-19-vaccination-rate-in-europe-by-country/>.

<sup>36</sup> Poliția de frontieră [Border Police], Condiții generale de călătorie în statele membre ale Uniunii Europene, Spațiului Schengen și Spațiului Economic European [General travel conditions in the Member States of the European Union, the Schengen Area and the European Economic Area], accessed July 27, 2021. <https://www.politiadefrontiera.ro/ro/main/pg-conditii-generale-de-calatorie-in-statele-membre-ale-uniunii-europene-spatiului-schengen-si-spatiului-economic-european-161.html>.

Similarly to Romania, the number of newly infected cases started to rise in autumn, and by November Hungary became a yellow zone country from Romania's point of view for about 6 months (between 02.11.2020–08.01.2021 and 11.02.2021–27.05.2021). For more context on why Hungarian nationals were subject to quarantine measures for so long, the country's 'infection curve' graphic gives a general idea:



**Figure 2.** Hungary's Covid infection curve<sup>37</sup>

Since June 2021 Hungary can be found continuously on the green zone list, therefore at the moment of writing no restrictions or quarantine measures apply to Hungarian nationals and the border crossing procedure resumed its 'natural' course.

### *A look at Hungary during the pandemic*

The first case of Covid appeared in Hungary on 4 March<sup>38</sup> and due to the gradual increase in infection numbers, a state of emergency was declared on March 11<sup>39</sup>. As in most countries of the world, measures restricting the daily lives of people have been introduced, schools were closed, businesses had to stop operating, lockdowns were imposed.

Entry restrictions were initially targeted towards countries with large numbers of cases. First, restrictions began to emerge on air traffic from Northern Italy and then from China, Iran, South Korea, and later Israel. No entry was allowed from these countries, except for Hungarian citizens who were required to undergo 14 days of self-isolation upon return. Checks have been reinstated at the Slovenian and Austrian borders as well.<sup>40</sup> On 17 March the Hungarian government barred entry for all foreign citizens, from this

<sup>37</sup> Dong, Du, and Gardner.

<sup>38</sup> Kovács Zoltán, "Hungary Closes Schools, Bans Entry from Israel over Coronavirus," *Index*, 13 March, 2020, [https://index.hu/english/2020/03/13/hungary\\_coronavirus\\_viktor\\_orban\\_announcement/](https://index.hu/english/2020/03/13/hungary_coronavirus_viktor_orban_announcement/).

<sup>39</sup> Magyarország Belügyminisztériuma [Minister of the Interior of Hungary], "Megjelent és hatályba lépett a veszélyhelyzetet kihirdető kormányrendelet" [A government decree declaring the state of emergency has been published and entered into force], 11 March, 2020, accessed July 27, 2021, <https://koronavirus.gov.hu/cikkek/megjelent-es-hatalyba-lepett-veszelyhelyzetet-kihirdeto-kormanyrendelet>.

<sup>40</sup> Magyarország Belügyminisztériuma [Minister of the Interior of Hungary], "Rendkívüli kormányintézkedések: határellenőrzés, beutazási tilalom, hatósági házi karantén" [Emergency government measures: border control, entry ban, official house quarantine], 12 March, 2020, accessed July 27, 2021, <https://koronavirus.gov.hu/cikkek/rendkivuli-kormanyintezkedesek-hatarellenorzes-beutazasi-tilalom-hatosagi-hazi-karanten>.

point forward only Hungarian citizens could enter the country<sup>41</sup>, and soon all headlines reported how thousands, among them many Romanians, remained stranded in Austria. Important to note is that at this point there were a total 50 cases of infection on the whole territory of Hungary.<sup>42</sup> Later some crossing points were opened for cross-border workers on the Austrian and Slovakian borders, and gradually for general passenger traffic on the other borders. On 21 May, according to the Hungarian government's communiqué, the 11<sup>th</sup> border crossing point was opened on the Romanian-Hungarian border.<sup>43</sup> Hungary abolished all border checks at their part of internal Schengen borders, Austria, Slovakia, and Slovenia during May and June, and eased travel across the Serbian, Croatian, Romanian and Ukrainian borders, as persons coming from these countries no longer had to enter quarantine. On 13 July, Hungary adopted the 'green, yellow, red zones' system. According to this, persons who enter Hungary from a yellow or red country will receive a quarantine order and a red card, which they are obliged to affix to the entrance of their residence. After entering quarantine if they want to be released earlier, they must submit an application to be tested. If they come from a country with a yellow rating, they can be released from quarantine if the first test is negative, but they are also required to take the second test. If they come from a red zone, they can only be released from quarantine after the second test. There are two options for exemption from quarantine:

- a. They have to present two negative PCR tests from 5 days prior to entry into Hungary, taken with time differences of at least 48 hours; or
- b. They have to prove by a document that they have already suffered from Covid in the last six months.<sup>44</sup>

Due to the evolution of the pandemic situation, the Hungarian government has decided to return from September 2020 to the border protection rules applied during the first wave of the pandemic.<sup>45</sup> Therefore, temporary border controls were reintroduced at all internal borders,<sup>46</sup> with some exceptions, once again, at the Austrian, Slovakian

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<sup>41</sup> Magyarország Belügyminisztériuma [Minister of the Interior of Hungary], "Életbe lépett a külföldiek beutazási tilalma" [A ban on the entry of foreigners has come into force], 17 March 2020, accessed July 27, 2021, <https://koronavirus.gov.hu/cikkek/életbe-lepett-kulfoldiek-beutazasi-tilalma>.

<sup>42</sup> "Hungary lets Romanian and Bulgarian Citizens Stuck in Austria Transit: Minister," *Reuters*, 17 March 2020, <https://www.reuters.com/article/us-health-coronavirus-hungary-transit-idUSKBN2142N1>.

<sup>43</sup> Magyarország Belügyminisztériuma [Minister of the Interior of Hungary], "Szijjártó: újabb átkelő nyílt meg a magyar-román határon" [Szijjártó: another crossing opened on the Hungarian-Romanian border], 21 May 2020, accessed July 27, 2021, <https://koronavirus.gov.hu/cikkek/szijasrtó-ujabb-atkelo-nyilt-meg-magyar-roman-hataron>.

<sup>44</sup> Magyarország Belügyminisztériuma [Minister of the Interior of Hungary], "Infografikán az országba való belépés és a hatósági házi karantén alól való mentesítés feltételei" [Conditions for entry into the country and exemption from official home quarantine in infographics], 31 July 2020, accessed July 28, 2021, <https://koronavirus.gov.hu/cikkek/infografikan-az-oroszagba-valo-belepes-es-hatosagi-hazi-karanten-alol-valo-mentesites>.

<sup>45</sup> Magyarország Belügyminisztériuma [Minister of the Interior of Hungary], "Kormányinfó: visszatérnek az első hullám idején alkalmazott határvédelmi szabályok" [Government information: The government has decided on austerity measures], 28 August 2020, accessed July 28, 2021, <https://koronavirus.gov.hu/cikkek/kormanyinfo-visszaternek-az-első-hullam-idejen-alkalmazott-hatarvedelmi-szabalyok>.

<sup>46</sup> Magyarország Belügyminisztériuma [Minister of the Interior of Hungary], "A teljes belső határon visszaállítja a kormány a határellenőrzést szeptember elsejétől" [At all internal borders, the government will reintroduce border controls from 1 September], 30 August 2020, accessed July 28,

borders. Although border closures were prolonged from 1 October, some easing measures were introduced for the citizens of V4 countries<sup>47</sup>. On 15 October, Hungarians could enter Romania without the obligation to quarantine, as based on the decision of the Romanian authorities, Hungary was no longer included among high-risk countries.<sup>48</sup> Schengen border controls have been continuously prolonged for many months to come, and more stringent measures have been imposed as Hungary entered another national lockdown. Its exit strategy started as early as 26 December, when Hungary started the vaccination process<sup>49</sup>. In February a national consultation process was started, where citizens were asked about restarting and relaxing measures but due to the worsening pandemic situation new restrictions had to be imposed in March<sup>50</sup>. Still, the Hungarian vaccination campaign is quite outstanding in European comparison. When the number of vaccinated people reached new highs, new relaxing measures were taken and introduced, although for participation to most activities required a vaccination certificate. Nonetheless, it seems that such measures motivated the Hungarian population to a great extent, as at the time of writing 5.405.781 persons have been vaccinated with all doses, representing a 55,% rate of immunity.<sup>51</sup> Starting with April, Hungary started to conclude agreements on the recognition of vaccination certificates with countries such as Albania, Bahrain, Cyprus, the Czech Republic, North Macedonia, Georgia, Morocco, Croatia, the Republic of Moldova, Mongolia, Montenegro, Serbia, Slovenia, Slovakia, Turkey which eases travel for Hungarian nationals to these countries significantly<sup>52</sup>. Romania was also included on the list from 31 May,<sup>53</sup> but it cannot be found on following lists. From July 24, Hungary

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2021, <https://koronavirus.gov.hu/cikkek/teljes-belso-hataron-visszaallitja-kormany-hatarellenorzest-szeptember-elsejetol>.

<sup>47</sup> Magyarország Belügyminisztériuma [Minister of the Interior of Hungary], “Operatív törzs: újraszabályozták a V4-ekre vonatkozó beutazási könnyítéseket” [Entry facilitations for V4s have been re-regulated], 5 October 2020, accessed July 28, 2021, <https://koronavirus.gov.hu/cikkek/operativ-torzsz-ujraszabalyoztak-v4-ekre-vonatkozo-beutazasi-konnyiteseket>.

<sup>48</sup> Magyarország Belügyminisztériuma [Minister of the Interior of Hungary], “Operatív törzs: csütörtöktől karanténkötelezettség nélkül lehet Romániába utazni” [From Thursday you can travel to Romania without quarantine], 15 October 2020, accessed July 28, 2021, <https://koronavirus.gov.hu/cikkek/operativ-torzsz-csutortoktol-karantenkotelezettseg-nelkul-lehet-romaniaba-utazni>.

<sup>49</sup> Magyarország Belügyminisztériuma [Minister of the Interior of Hungary], “Országos tisztifőorvos: december 27-én kezdődik az egészségügyi dolgozók oltása” [Chief Medical Officer: Vaccination of health workers will begin on December 27<sup>th</sup>], 23 December 2020, accessed July 28, 2021, <https://koronavirus.gov.hu/cikkek/orszagos-tisztifoovos-december-27-en-kezdodik-az-egeszsegugyi-dolgozok-oltasa>.

<sup>50</sup> Magyarország Belügyminisztériuma [Minister of the Interior of Hungary], “Kormányinfó: szigorításokról döntött a kormány” [Government info: Border protection rules applied during the first wave return], 04 March 2021, accessed July 28, 2021, <https://koronavirus.gov.hu/cikkek/kormanyinfo-szigoritasokrol-dontott-kormany>.

<sup>51</sup> Ritchie et al.

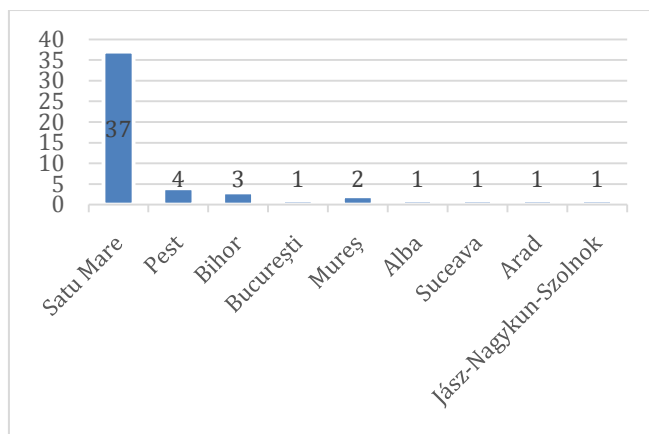
<sup>52</sup> Magyarország Belügyminisztériuma [Minister of the Interior of Hungary], “Védettségi igazolványok elfogadása – 2021.06.09” [Acceptance of protection certificates - 09.06.2021], 10 June 2021, accessed July 28, 2021, <https://koronavirus.gov.hu/cikkek/vedettsegi-igazolvan-yok-elfogadasa-20210609>.

<sup>53</sup> Magyarország Belügyminisztériuma [Minister of the Interior of Hungary], “Védettségi igazolványok elfogadása – 2021.05.30” [Acceptance of protection certificates - 30.05.2021], 31

restored normal crossing procedures at its internal Schengen borders, lifting all border controls.<sup>54</sup> At the time of writing, the EU Digital Covid Certificate eases travel between all EU MS, as the holder “should in principle be exempted from free movement restrictions: Member States should refrain from imposing additional travel restrictions on the holders of an EU Digital COVID Certificate, unless they are necessary and proportionate to safeguard public health.”<sup>55</sup>

### *The impact of restrictions on travel across the Romanian-Hungarian border*

As different countries imposed different levels of travel restrictions, cross-border mobility was by no question hindered. Travel behaviours, therefore, were significantly influenced by such measures. Generally, in the midst of a pandemic people perceive a higher risk for all types of traveling, restrictive measures further highlighting these insecurities. Globally, a large decline was observed in mobility due to fear from Covid and national orders and restrictions (Warren and Skillman, 2020). Nevertheless, people have various travel needs, be that work, shopping, or familial reasons.



**Figure 3.** Territorial representation of respondents

The objective of this part of the article is to outline and analyse the impact of border-related measures on cross-border mobility across the Romanian-Hungarian border. To successfully lead this assignment, an online survey was conducted in July 2021.

Out of the total 51 respondents 46 are from Romania (90%) and only 5 from Hungary (10%). As **Figure 3** shows, most of the respondents are from Satu

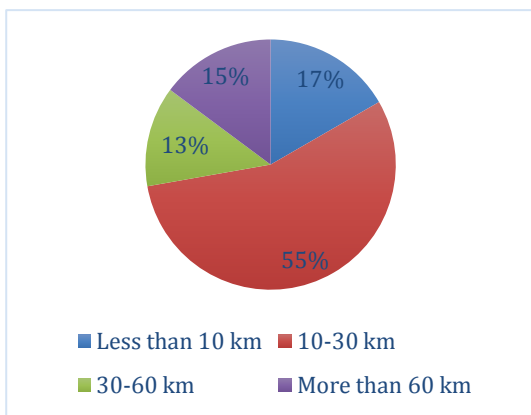
Mare County, and to no surprise, 55% of them live within 10–30 km from the Romanian-Hungarian border.

Moreover, 76% of our respondents live in urban areas, 41% being between the ages of 25–40, 39% between 40–65, 18% between 14–25, and 2% over the age of 65.

May 2021, accessed July 28, 2021, <https://koronavirus.gov.hu/cikkek/vedettsegi-igazolvan-yok-elfogadasa-20210530>.

<sup>54</sup> Magyarország Belügyminisztériuma [Minister of the Interior of Hungary], “Magyarország schengeni belső határain ma hajnalban megszűnt a határellenőrzés” [Border control at Hungary’s internal Schengen borders was lifted at dawn today], 23 June 2021, accessed July 28, 2021, <https://koronavirus.gov.hu/cikkek/magyarorszag-schengeni-belső-hatarain-ma-hajnalban-megszunt-hatarellenorzes>.

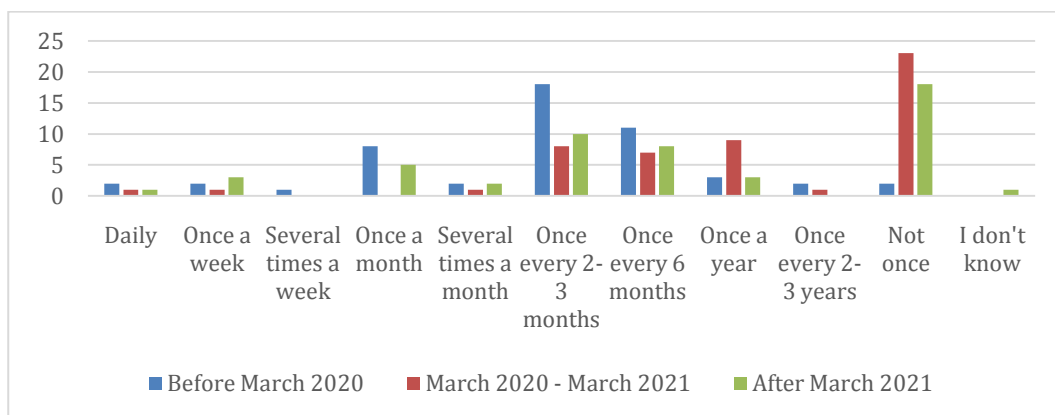
<sup>55</sup> European Commission, “EU Digital COVID Certificate,” accessed July 29, 2021, [https://ec.europa.eu/info/live-work-travel-eu/coronavirus-response/safe-covid-19-vaccines-europeans/eu-digital-covid-certificate\\_en#how-will-it-help-free-movement](https://ec.europa.eu/info/live-work-travel-eu/coronavirus-response/safe-covid-19-vaccines-europeans/eu-digital-covid-certificate_en#how-will-it-help-free-movement).



**Figure 4.** Distance from residence and RO-HU border

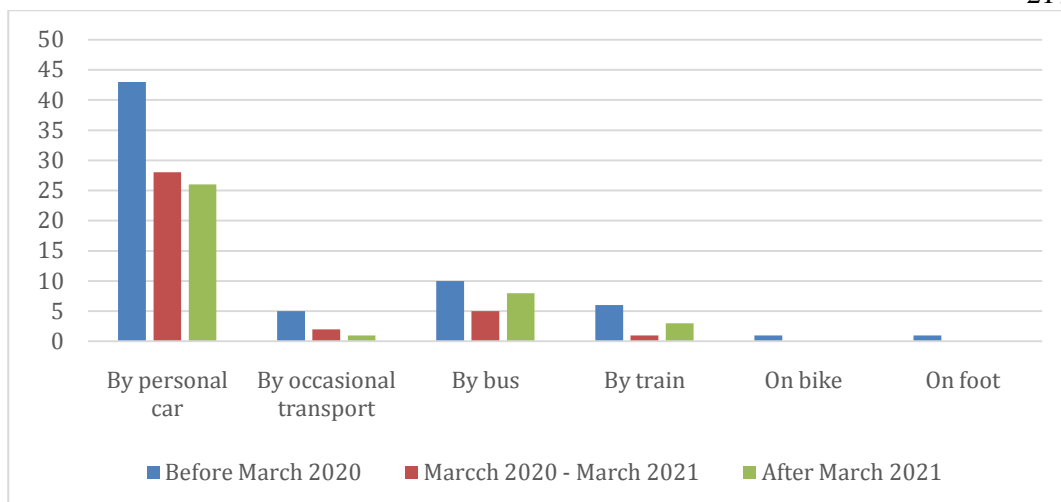
**Figure 5** shows the levels of change in the frequency of cross-border mobility. As one can observe, before the pandemic escalated most of the respondents crossed the Romanian-Hungarian border once every 2-3 months, others once every 6 months, and some once in every month. Between March 2020 – March 2021, most of the respondents did not cross the border, and those who did went between 1–4 times in the whole period. With the vaccination campaign well under way by March 2021, travel started to

regain its former intensity, but as one can see, cross-border travel to and from Hungary still doesn't look the same as before. Most of the respondents still haven't been across the border since March, but to some extent, the level of mobility across this border started to rise.



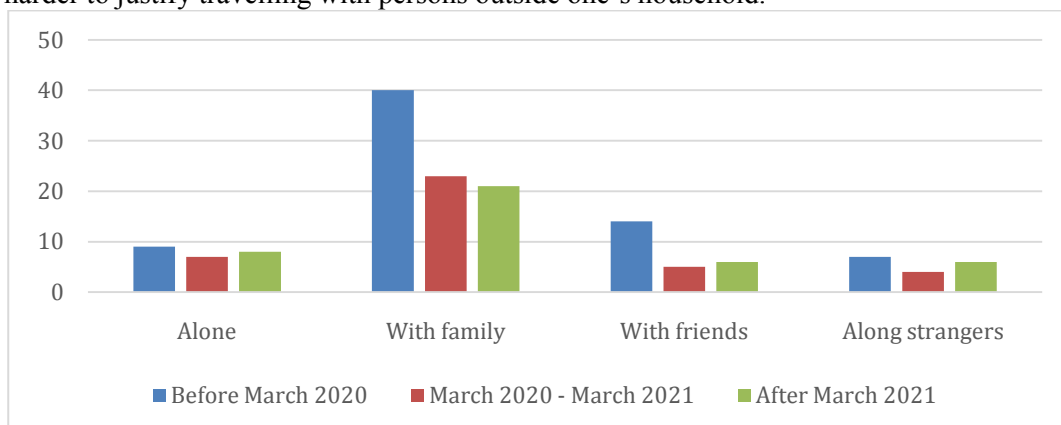
**Figure 5.** Frequency of cross-border travel

Besides frequency, generally speaking a pandemic and certain restrictive measures might influence the preferred mode of transportation of travellers. **Figure 6** shows which modes of transportation were chosen by the respondents in each time period. It might be surprising to see that not much has changed in this regard, as the use of personal car remained the most recurrent choice. During a pandemic this would seem rather normal, as the public transport system depends heavily on the imposed regulations, but the use of personal cars has been dominant even before the pandemic. This can be mainly attributed to the lack of cross-border public transport in the area, the lack of alternative transport infrastructure, such as bicycle or walking lanes across the border, but also Romanians' preference for the use of personal cars in the detriment of public transport modes.



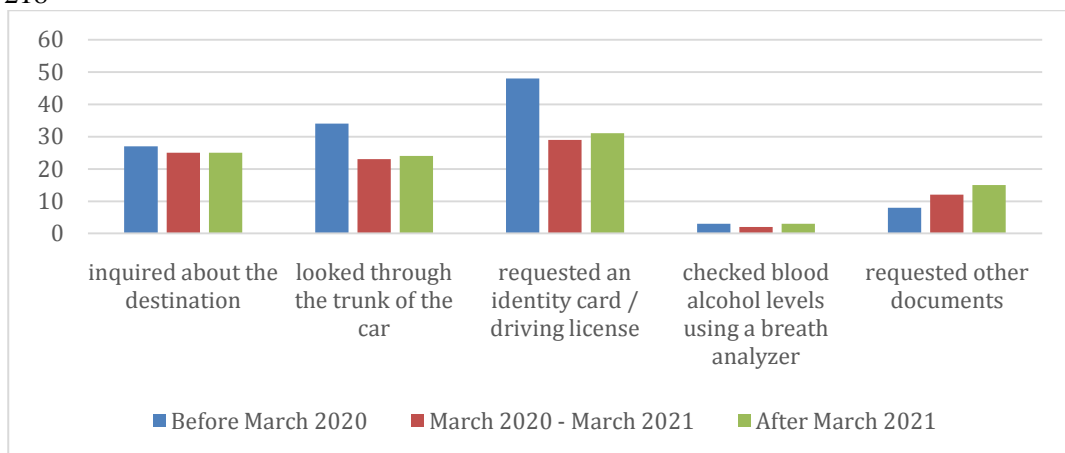
**Figure 6.** Preferred mode of transportation

Respondents were also asked about the companions with whom they travelled across the border. Not much has changed in this regard, as most of them travelled with family before and during the pandemic. Some reduction in the ‘travel with friends’ category can be observed, which might be due to the fact that during restrictions it was harder to justify travelling with persons outside one’s household.



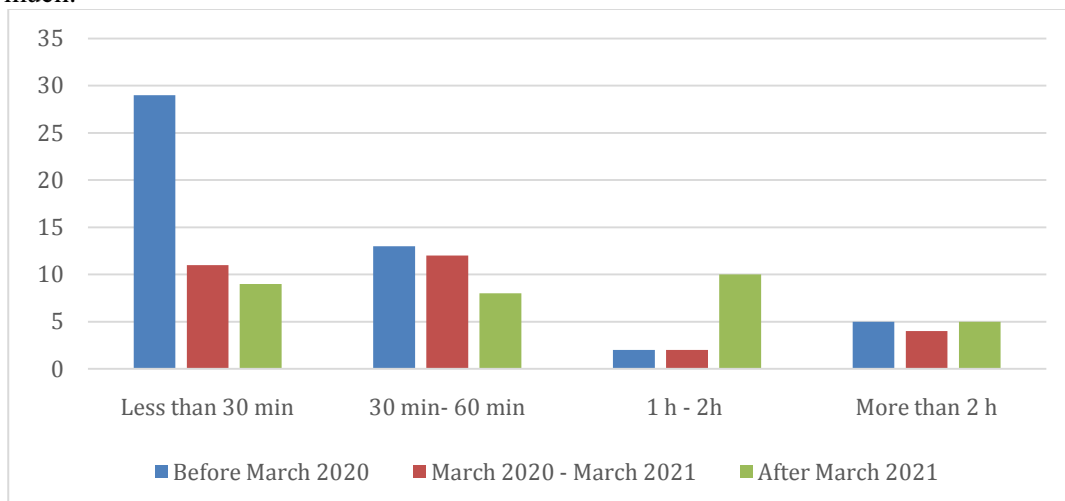
**Figure 7.** Companionship during cross-border travel

As mentioned before, it is very probable that due to the new entry regulations the border crossing procedure involved more steps, became more thorough therefore more lengthy. When asked about what was required at them by the frontier police in each time period, the respondents answered in the following manner:



**Figure 8.** Border crossing procedure

One can see that much of these measures remained the same. As stated before, border controls were not a novelty at this border. Officers at the crossing point generally require an ID card and a driver’s licence, ask about one’s destination, and most of the times look through the car’s trunk. Regarding the last item, it can be seen that with each period more and more respondents stated that they had to present other documents. Before the pandemic, the ID of the vehicle was requested, while between March 2020 – March 2021 a negative test was the most common answer, followed by a work contract. In the period after March 2021, almost all of the respondents mentioned that they had to present a vaccination certification or a negative test in order to cross the border. All these measures seem to be in line with the regulations imposed in each of these periods. It seems, however, that these ‘extra steps’ did not prolong the crossing process with that much.



**Figure 9.** Duration of border-crossing

Before the pandemic, border crossing seemed to be a relatively fast process, however this might be attributed to the fact that most respondents live within 10–30 km from the border. Still, before March 2020 for most respondents crossing took less than 30

minutes, between March 2020 – March 2021 it took between 30 and 60 minutes, while it seems that since March it usually takes more than 2 hours.

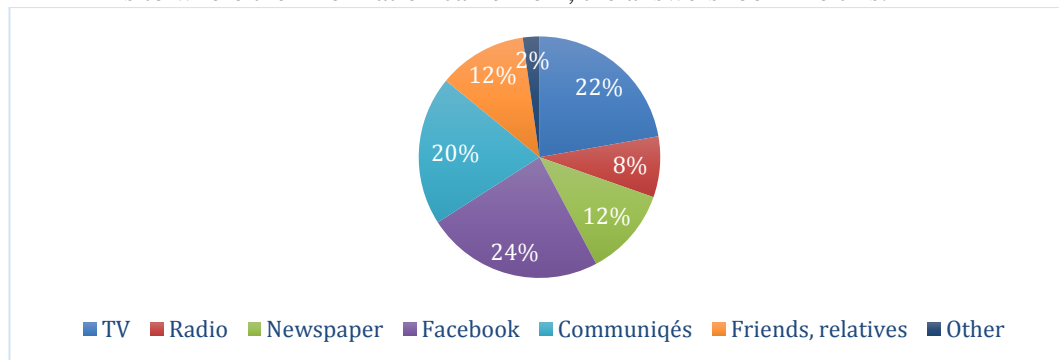
The last aspect regarding cross-border travel was meant to measure the changes in the scopes of cross-border movement. **Figure 9** shows which were the respondents' main motivation for crossing the border during each time period. If before March 2020 most of the respondents went for vacation purposes, during the pandemic, surprisingly, they crossed the border to visit friends and relatives, despite the severe restrictions imposed on physical contacts. However, keeping in mind that the volume and frequency of border crossing was significantly reduced, it is not so unbelievable that when they cross the border, most people do it to see their family, especially in insecure times like this. Since March the levels of crossings increased slightly, as it can also be seen in **Figure 9** the motivations starting to resemble the pre-pandemic patterns.

Besides questions regarding cross-border mobility and travel, respondents were also asked the following:

1. Have you been regularly informed of the measures in place since the beginning of the epidemic?
2. How did you hear about the latest epidemiological measures?
3. Do you find the measures taken by the central authorities of your country useful?

It seems that the national information campaigns have been really successful, as 94% of the respondents have been regularly informed about the new measures being introduced, and 60,7% of them think that these were useful.

As to where the information came from, the answers look like this:



**Figure 10.** Respondents' main source of information

## Conclusion

About two months after the first case of an atypical viral pneumonia was reported in the Chinese city of Wuhan, the WHO declared the novel coronavirus a global pandemic on 11 March 2020. In consequence, countries globally had begun to issue measures to limit or significantly slow the spread of the virus, closing borders, suspending international travel, placing restrictions on travellers, and declaring national lockdowns. The virus broke out in Europe on 25 January, and throughout February and March, the number of pandemic-related measures increased significantly, the crisis leading to the introduction of unprecedented measures across MS. The resulting picture was, and to a measure still is, a web of dynamic, multi-layered measures.

The variety of national responses intensified with the evolution of the pandemic, some states lifting, others reiterating or exacerbating the temporary restrictions and controls, thus further amplifying the EU-wide fragmentation. In terms of domestic,

internal measures the most common were the introduction of a lockdown, which entails the closing of shops, restaurants, cultural and entertainment facilities, the introduction of a curfew, the banning of all sorts of public and private gatherings, the prohibition of mobility one's residence or locality, the closure of schools at all levels. Added to these are the outside, external measures such as travel and entry restrictions or total bans, the reintroduction of border checks, the obligation to enter quarantine at special institutions or at one's residence, the requirement to present authorizations and certificates in order to travel internationally, and so on.

Restrictions and bans on travel have an especially important meaning in the Schengen Area, the 'borderless' part of Europe, where the 26 member countries have gradually abolished all passport and all other types of border control at their mutual borders. The legal basis for the introduction of such measures is twofold. First of all, travel bans are covered by Art. 27 and Art. 29 of Directive 2004/38/EC, and by Art. 25, Art. 28 and Art. 29 of the Schengen Borders Code. Both sources stipulate that MS can temporarily reintroduce border checks and restrict entry of foreign nationals on grounds of public policy, public security or public health. The measures, however, must respect the principle of proportionality.

Many authors have contested the necessity of the intensity and scope of border crossing and entry related measures introduced. Bonardi et al.'s study on 184 countries' lockdown measures showed that lockdowns are indeed effective in stopping the growth of cases and reducing the number of deaths, but extreme measures and strict border closures are not the most effective actions of response. Their analysis shows that partial lockdowns are as effective as stricter measures (such as declaring a state of emergency, implementing curfews), while they are also less damaging to the economy. Moreover, they argue that taking inside-country measures matters much more than taking outside-oriented ones, and that closing and blocking borders is the least effective course of action, especially if internal measures are not taken.<sup>56</sup> Askitas et. al also conclude that once other interventions are controlled for, international travel controls and closure, and restrictions on internal movement have almost no impact on the incidence of new cases. According to the authors, although restricting international movements and enacting travel controls reduce mobility, their impact on containing the spread of the disease appears to be less important: "If countries have banned all international travel soon after the outbreak in China, it would have certainly been an effective measure to seal the country from the virus. However, because most countries did not introduce such bans before the virus has started spreading domestically [...] those restrictions had a limited impact on mobility and could only reduce new imported infections but not contain the spread of the virus."<sup>57</sup> The International Organization for Migration also argues that besides Australia and New Zealand, most countries have been unsuccessful in using border closures to prevent viral spread, "and those that have had success with such closures have used them alongside a comprehensive raft of domestic measures, making it hard to attribute causality."<sup>58</sup> Specifically regarding the EU context, Peyrony et. al state that "the proportionality of border controls and restrictions with regard to the pandemic situation in the CB regions was not always respected," for example, in cases with very strict controls and restrictions

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<sup>56</sup> Bonardi et al., 340.

<sup>57</sup> Nikos Askitas, Konstantinos Tatsiramos, and Bertrand Verheyden, "Flattening the COVID-19 Curve: What Works," *Vox*, 5 June 2020, <https://voxeu.org/article/flattening-covid-19-curve-what-works>.

<sup>58</sup> Benton et al., 3.

but an extremely low percentage of incidences)<sup>59</sup>. Indeed, at many times it might have seemed that measures have exceeded their level of necessity, as it was the case when Hungary banned even transit on its territory with only 50 cases in total.

On behalf of the European institutions not much could be done, as per the Treaty on the Functioning of the European Union, the EU has supporting competences in the field of public health. All the institutions' ability to act depended to a large extent on the MS and their willingness to work together. In this sense, the Commission, the Council and the Parliament have on numerous occasions urged MS to coordinate their measures, but for a long time no harmonization was achieved.

Both Romania and Hungary have generally followed the EU trend during the pandemic: introduced strict lockdowns and entry bans during the first wave; went through a phased reopening between June and September/October 2020; reintroduced some stringent measures as a response to the new outbreaks a variant in the remainder of the year; and correlated relaxing measures with the vaccination campaign and the immunity levels of their citizens starting with 2021.

Nonetheless, the fast-changing travel restrictions of various kinds, coupled with a general fear from getting infected, unquestionably changed (especially international) travel behaviours and patterns of people. Following an online survey conducted in July 2021, it seems that the frequency of cross-border travels has fallen during the pandemic, but mobility across this border started to slowly and gradually restart. With regard to preferred modes of transportation and companionship during travel no relevant change can be observed. Most respondents have travelled by personal cars together with their families both before and during the pandemic. As Romania is not a member of the Schengen Area, border checks have already been in place at the RO-HU border. What changed in the process of border-crossing is the fact that other documents, such as negative tests and vaccination certificates have also been requested. This, however, has prolonged border-crossing, the whole process taking with approx. 1 hour more.

Although travel and entry restrictions are still in force today, movement across the EU has become significantly easier with the launch of EU's Digital Covid Certificate, representing a reliable, secure and common solution to restore mobility and freedom of movement to its pre-pandemic status quo.

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<sup>59</sup> Peyrony et al., 67.

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