

Part II The Japanese government's response to COVID-19

Chapter 9

Border control (Resumption of international travel)

As the COVID-19 pandemic spread all over the world, each country responded by closing its borders. Restricting people's movement, limiting people's right to mobility, tightening border control measures and closing one national border after another had intrinsically been deemed "prohibited tactics." Following the steps taken by European and North American countries, however, Japan closed its doors as well. Under the framework of the immigration control law and the National Security Council, Japan refused entry by people from areas where novel coronavirus infections were rampant. Still, it failed to stop the intrusion of COVID-19 from Europe. As it tightened border control measures at points of entry later on – from late March to May – such measures had enormous effects on social and economic activities. Japan has since aimed to resume international travel while balancing efforts to contain infections with social/economic activities and diplomatic needs.

This chapter will first survey the moves explored by Europe, which experienced an explosive increase in infections, toward resumption of the movement of people, including expectations for "immunity passports" for people departing from Europe. We will then provide an overview of the total picture of Japan's measures at points of entry to the country, the sense of crisis on the part of the government's panel of experts and Foreign Minister Toshimitsu Motegi's initiative for resumption of international travel. Then we will examine the National Security of Council's role in working out the "step-by-step measures" toward resuming the international movement of people announced on June 18, Japan's negotiations with Australia, New Zealand, Thailand and Vietnam, as well as the nation's quarantine capacity that supports its border measures.

1. Border control and moves in Europe

1.1. Border control

In its attempt to bring the SARS epidemic under control in 2003, for the first time in its half-century history the World Health Organization advised postponement of travel to Hong Kong and Guangdong Province in China. Shigeru Omi, who at that time was secretary general of the WHO Regional Office for the Western Pacific, said that was "an extremely difficult decision" since the postponement of travel was expected to have a negative impact on economic and social activities in Hong Kong.¹

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Border control measures (taken at points of entry) are introduced to prevent as much as possible the intrusion of an infectious disease and to delay its spread inside the country. In view of the history of measures taken so far against infectious diseases, it was “completely beyond the realm of expectations” that in responding to the COVID-19 outbreak countries around the world would tighten restrictions on people’s travel and the right to mobility and close national borders one after another – since these measures had long been deemed “prohibited,” according to experts on infectious diseases.

An infectious disease like COVID-19 – whose virus spreads even from asymptomatic carriers or patients with mild symptoms – is far more difficult to suppress than in the case of SARS. To defend themselves against this invisible enemy, governments locked down their cities and closed national borders. Japan also followed the steps taken by European and North American governments to close its borders. Shutting down the borders caused a serious fragmentation of the international economy. Since people were required to go through a 14-day self-isolation before departure and another round for 14 days after entry, business executives found it difficult to travel abroad freely as in the days before the pandemic.

However, such a situation cannot be maintained for long. Countries around the world soon explored reopening their borders to restart economic and social activities. Public health and epidemiology experts warned that loosening border control measures would inevitably reignite infections and urged governments to proceed with caution. Global economic and social activities were reinvigorated as nations reopened their borders, but as long as the borders were open, nations would continue to be exposed to the unseen threat of the novel coronavirus.

1.2. Reopening people’s movement in Europe after the spread of infections

Border control measures are effective when there is gap in the degree of the spread of infections inside and outside a country. Those measures lose their meaning between countries where infections have spread to the same degree. It is therefore relatively easy for a country to open its border with another where infections have spread to the same or even lower degree. This is called a risk equalization approach. It is an approach based on reciprocity – that if the infection risk in both countries comes down to a level mutually acceptable, they can ease restrictions on people’s movements while keeping necessary border control measures.²

China and South Korea, which both managed to bring infections under control at an early stage, relaxed mutual restrictions on bilateral travel ahead of other countries in East Asia. On May 1, the two countries introduced a fast-track system to exempt business travelers from the 14-day self-isolation after entry if they tested negative for the virus before departure.

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European countries permitting travel inside the region prior to the summer holiday season was a consequence of the infection having already spread across the countries in the region. Since the infections had spread in each of the European countries and the effects of entry restrictions in curbing infection diminished, the countries explored moves to reactivate the economy that had been hurt by restrictions on people's travel.

From March 16, the European Union prohibited in principle travel to the region by people from outside member countries that are party to the Schengen Agreement – which allows people of member countries to cross borders inside the EU without going through immigration control – and other European nations. However, in light of the views from inside the EU that placed emphasis on the economic benefits of reopening tourism, the severe travel restrictions were gradually eased. In mid-June, in-person diplomacy involving top leaders of member countries resumed. On June 18, French President Emmanuel Macron visited London and greeted British Prime Minister Boris Johnson with an unfamiliar bow of his head.

On June 30, the EU Council, the legislative branch of the EU, permitted travel from 15 nations outside the bloc to Schengen countries.³ Beginning on July 1, it became possible for people from Australia, New Zealand, Canada, Japan, South Korea, Thailand and other countries to travel to the Schengen Agreement area. The criteria for choosing countries eligible for the easing of travel restrictions were as follows:

- The number of new infection cases per 100,000 people in the past 14 days was either lower than or close to the corresponding average as of June 15 among EU member countries.
- Compared with the last 14 days, the number of new infection cases was either stable or on a downward trend.
- A comprehensive evaluation of anti-novel coronavirus measures – tests, surveillance, tracking of people in close contact with infected patients, containment measures, treatment and reporting systems, reliability of information, average score in the International Health Regulation and other related matters – was taken into consideration.
- Whether the country in question accepted travelers from the EU countries (reciprocity).

Among the items in the criteria, what became an issue with non-EU countries including Japan was reciprocity. It is the usual practice to apply reciprocity in immigration control. However, an important factor taken into account during the COVID-19 crisis was the degree of the spread of infection. Many EU member countries suffered a much more serious expansion of infection than the rest of the world, and countries like China and Japan, which managed comparatively to keep infection under control, had no other choice but to be prudent in reopening travel with Europe. For example, Germany on July 2 lifted restrictions on entry from 11 non-EU countries, but it decided to permit entry from Japan,

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China and South Korea, which still restricted travel from Germany, only when they lifted their own restrictions. Since Japan maintained the entry restrictions vis-a-vis Germany and other EU countries, Germany continued to curb entry from Japan from the viewpoint of reciprocity.

To prepare for the summer holiday season, southern European countries, which rely heavily on tourism, called for reopening national borders. On June 15, Re-open EU (<https://reopen.europa.eu/>) was set up to enable tourists to obtain the latest information on each country's travel restrictions and the state of operation of its transportation systems. Spain later lifted its state of emergency and exempted entrants from a 14-day self-seclusion requirement. On July 1, Portugal reopened its border with Spain without imposing a self-seclusion period on entrants. On the other hand, Germany, which was still on guard against an expansion of infection, imposed a 14-day self-seclusion on entrants who left or transited through any of the countries and areas where the Robert Koch Institute judged the risk of infection was high.

1.3. Expectations for “immunity passports” to be issued in Europe

The idea of an “immunity passport” aroused great expectations as a checkpoint passage license to smooth travel between countries that had closed their borders. The need to be tested before departure and after entry every time and to prove negative for the virus was a substantial burden on short-term business travelers who had little time to spare. It was believed that immigration control would be much smoother if they were issued “immunity passports” proving that they were immunized against the novel coronavirus. Discussion on such passports heated up in Europe, where people's cross-border movement was an everyday practice. Even in Japan, expectations for the issuance of such passports grew momentarily among economic experts.

On April 9, the Robert Koch Institute of Germany announced that it would start nationwide antibody tests in mid-April.⁴ The large-scale antibody tests aroused expectations in Europe and North America for the introduction and use of immunity passports. Germany, Italy, Britain, the U.S., Chile and other countries considered the introduction of such passports in concrete terms.⁵

In view of the growing expectations in many countries for immunity passports, the WHO on April 24 announced a Scientific Brief⁶ noting that since there was no sufficient scientific evidence to prove accuracy and reliability of antibody tests, introduction of immunity passports – which might falsely mark some people as immunized against the virus even when they were not – could lead to a slackening of infection control measures and a rise in the risk of infection expansion. The WHO's Scientific Brief caused the discussion over immunity passport to gradually die down.

The discussion over immunity passports gathered momentum based on the desire

to reopen economic and social activities – despite the lack of medical evidence concerning the very questions of whether people acquired immunity once they were infected with COVID-19 or how long immunity would last if they did. The idea of immunity passports may have presented a ray of hope in Europe, where the number of infection cases and deaths were surging explosively. It remained unclear, however, when safe and effective vaccines would be developed, and in August, a case of reinfection with the novel coronavirus was reported in Hong Kong. The discussion over immunity passports served as a reminder as to how difficult it is to simultaneously contain the infection and reopen economic and social activities.

2. Closing and reopening the borders

2.1. Japan closing its doors

Beginning with banning the entry of foreigners from China's Hubei Province, the Japanese government gradually tightened its border control measures at points of entry beginning in February.⁷ However, experts on infectious diseases had called for quicker and more stringent border control measures, especially applying the entry ban to people coming from a wider area. The intrusion of novel coronavirus cases originating in Europe added to the sense of crisis, and the Expert Meeting on the Novel Coronavirus Disease Control on March 17 called on the government to tighten control at points of entry. By July 22, the government prohibited entry into Japan of people coming from 146 countries and regions in Asia, Oceania, North America, Europe and other areas. As Japan closed its doors to travelers from overseas, the number of airline passengers using the Narita International Airport in May plummeted by 98 percent from a year earlier.⁸

The government's basic policy on response to COVID-19, updated on May 25, defined border control measures against the novel coronavirus as follows:

- With regard to protective measures at points of entry, the government would continue such steps as entry bans, advising Japanese not to travel abroad, strengthening quarantine measures including checking and monitoring the health of returnees, and visa restrictions in order to prevent the intrusion of the infectious disease into Japan.
- In cooperation with other concerned government bodies, the health ministry would assist public health centers across the country to reduce their workload and strengthen their setup with regard to observation of returnees' health conditions.
- In view of the situation of COVID-19 outbreak in other countries, the Land,

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Infrastructure, Transport and Tourism Ministry would request the use of only limited airports for flight arrivals as necessary, while the health ministry would consider designating specific ports and airports for special quarantine.⁹

- In case of a shortage of facilities where people suspected of infection stay for a certain period for health observation, the health ministry would endeavor to secure such a capacity by carefully explaining to managers of facilities that could potentially be used for the purpose, while keeping in mind the application of Article 29 of the Act on Special Measures for Pandemic Influenza and New Infectious Diseases (on the use of facilities for observation of the health conditions of people suspected of infection) and by cooperating with other government bodies if the need arose.

Although the basic policy did not specifically say so, what was most important among the measures taken at points of entry in combating COVID-19 was the ban on entry. The Justice Ministry played its trump card – Article 5, Section 1, Clause 14 of the Immigration Control and Refugee Recognition Act.¹⁰ The step taken before an entry ban was upgrading the level of information on the danger of an infectious disease to Level 3 – advice not to travel to a particular area (cease travel advisory). The Foreign Ministry took the number of infected cases per 10,000 population, examples of incoming infection cases and other factors into account and upgraded the level of the information on certain countries and regions to Level 3. Later, following comprehensive assessment made by the National Security Council and other government organizations, the justice minister decided to prohibit the entry of foreigners who came from these countries and regions unless special circumstances existed – by regarding each of these people as a “person whom the justice minister has reasonable grounds to believe is likely to commit an act which could be detrimental to the interests or public security of Japan.”

As the government gradually expanded the areas to which the entry ban was applied, starting with Hubei Province of China and then including Daegu metropolitan city in South Korea, COVID-19 infections were steadily becoming rampant around the world. On February 24, the panel of experts said Japan was at a critical juncture over the next week or two of either witnessing an explosive increase in infections or getting the infection under control. Beginning around that time, officials at the health ministry analyzed the infection risk posed by entrants from abroad, and the experts urged the government to tighten its restrictions on travelers from overseas. Also during this period, a growing number of Japanese were traveling to and returning from Europe and other regions where infection had become widespread.

A sense of crisis that “Europe was dangerous” was conveyed by experts to the health ministry. COVID-19 infections were rapidly expanding in Europe, starting with Italy, and the region was experiencing what was called an “overshoot” in Japan. Given the strong economic ties between Japan and Europe, the government was concerned that

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closing its doors – banning entry of travelers from countries in the region – would bring economic activities with Europe to a halt. In addition, the number of Japanese returning from countries experiencing an explosive growth in infection was on the increase. In early March, Japanese tourists who took part in a cruise tour on the Nile in Egypt were found upon their return to have been infected with the novel coronavirus. Cases of secondary infections were also reported in quick succession.

An inflow of infected people was growing sharply. Experts were growing more concerned that unless the borders were closed, a large-scale epidemic would occur in Japan. While only 11 cases of COVID-19 traceable to Wuhan were found in Japan, more than 300 cases traceable to Europe and other regions were discovered by the end of March.

The experts were increasingly alarmed that Japan would no doubt be hit by an epidemic of COVID-19 – given that the number of cases traceable to Europe was “incomparably large.”

The panel of experts was scheduled to hold its eighth meeting on March 19 with the attendance of health minister Katsunobu Kato and Yasutoshi Nishimura, minister in charge of the COVID-19 response. Instead of waiting for that meeting, however, the panel submitted a petition on March 17 to the health ministry and the Cabinet Secretariat, out of concern over growing numbers of infection cases traceable to Europe, Southeast Asia and Egypt.¹¹ The experts urged the government to take urgent steps to tighten border control measures on returnees and incoming foreign travelers, such as more stringent quarantine of Japanese returning from countries and areas from which the entry of foreigners had been banned and requesting their isolation upon return. Members of the panel put together the petition without prior adjustment with the health ministry.

A member of the panel reminisced by saying, “Unless the government followed through with protective measures at the points of entry again, the novel coronavirus would continue to enter Japan from Europe. Japan was at a point where it could not stop an expansion of infection at home. Therefore, we made the call for reinforcing measures at points of entry. We knew that there would be a meeting of the expert panel on March 19, but we had a sense of crisis that if no action was taken immediately, there would be no stopping [the inflow of the virus]. So we filed the petition at that timing, on March 17.”

The next day, on March 18, at the 20th meeting of the government's COVID-19 response headquarters, Prime Minister Shinzo Abe said that Japan would tighten quarantine on people coming from 38 countries – European nations, including all of the parties to the Schengen Agreement, Iran and Egypt, and request travelers from these countries to go through a 14-day waiting period, temporarily putting their visas in abeyance and ceasing visa exemption privileges for them in stages.

However, the government deferred a decision to ban entry of people coming from major European countries such as Germany and France. It was still taking cautious steps – only adding some regions of northern Italy and other areas to the list of countries and areas to which its entry ban was applied on March 18. It was about one week later,

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on March 27, that Japan added the major European countries to the entry ban list.¹² On April 3, Japan put 47 countries and regions including not only China and South Korea but also the United States and Britain on the entry ban list.¹³

An expert on infectious diseases characterized Japan's fight on the "European front" by saying, "It was as if we were fighting with bamboo spears when incendiary bombs were falling from the sky."

The number of arrivals from China and South Korea, with which Japan had deep economic ties, had sharply plummeted in February and March. And then, beginning in April, Japan imposed tight restrictions on the entry of people from abroad. Virus molecule genome-based epidemiological studies by the National Institute of Infectious Diseases showed that while infections traceable to Wuhan, China were contained to a large extent, the COVID-19 infections escalated in Japan beginning in mid-March because of the inflow of returnees who had been infected in Europe and other areas. If a decision had been made even one week earlier to close Japan's doors – to ban entry of people from Europe – the nation would likely have been able to contain domestic infections traceable to Europe at much lower levels.

The government tightened protective measures at points of entry including quarantine. However, the entry ban came too late. One of the experts expressed regret that "we might have been able to do something much earlier, even by at least a week" if more attention was paid to the widening infections in Europe.

In fact, core members of the government also shared such a sense of regret. Some officials in the Prime Minister's Office at one point considered a ban on travel to Europe, but they balked at taking that step since the government had just met with strong public criticism for closing schools across the country at the end of February (See Part III, Chapter 2 for details).

2.2. Risk evaluation by public health experts

After the state of emergency was lifted, the panel of experts pointed out in its "situation analysis and recommendations" on May 29: "From now on, reopening travel by people to and from abroad can trigger a new round of expansion of infection." It then noted that the government needed to make clear its thoughts about reopening the nation's borders "as an exit strategy" and measures to prevent an escalation of infection as well as take the necessary steps, while paying close attention to the status of infection in other countries and international efforts aimed at normalizing people's cross-border travel.

As domestic infections surged from March, the spread of infection from cases traceable to travelers from abroad was observed. It was difficult to stop the entry of infected people due to the limitations of quarantine tests at airports – including carriers

with the virus in the incubation period.

Epidemiology experts made progress in evaluating the risk arising from relaxing the entry restrictions. If a decision was made to allow the entry of people from countries where the infection was expanding, it was impossible to completely block entry of infected cases even if quarantine was tightened at airports, all entrants were given PCR tests and requested to stay and wait for two weeks at hotels and other facilities.

A simulation by a team led by Hiroshi Nishiura, then professor at Hokkaido University Graduate School of Medicine, showed that if only 10 infected cases entered Japan from abroad on a certain day, a large-scale epidemic would occur three months later with a probability of 98.7 percent.¹⁴ That was because even high-accuracy PCR tests had a sensitivity of only about 70 percent and judged around 30 percent of infected cases as negative (false-negative). And there was the risk of secondary infection if restrictions on the movement of people in the waiting period were not tight enough.

Reopening Japan's borders as an "exit strategy," as referred to by the panel of experts, proved to be a difficult question that required a high-level political judgment – as to how Japan should restart its economy and diplomacy while condoning to a certain extent the intrusion of the novel coronavirus, which could not be completely eliminated, and in order to do that, to what extent the risk to people's lives and health could be accepted.

2.3. Foreign Minister Toshimitsu Motegi's initiative for reinvigorating the economy

Calls for reopening international travel were first raised by the business community. Looking back, a high-ranking official at the Ministry of Economy, Trade and Industry said the demands for reopening cross-border travel grew among business circles as a whole, instead of specific individual companies. Businesses endured the situation on the premise that travel would have to stop, but they definitely needed to make some business trips across national borders. In the manufacturing sector, especially semiconductor manufacturers, Japanese engineers often launched equipment and apparatuses on-site at their overseas plants by black-boxing sensitive technologies. In launching new facilities at their overseas plants, workers with expertise from Japan needed to be there. Even if local workers could run the existing production lines, it was difficult to trouble-shoot when problems occurred without the presence of staff from Japan. Both productivity and assembly yield were declining in the absence of locally stationed Japanese representatives. In China, there were companies whose system was such that they could not pay salaries to local employees unless Japanese representatives serving as CEO processed the payment. There were also fears that the management policy of joint ventures with local firms might be distorted if only the local partner was involved in the operation.

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As a senior METI official put it, “Some problems can be resolved over a videoconference but others cannot.” Japan closing its doors to overseas travel dealt a serious blow to many Japanese firms.

As China, South Korea and Europe reopened their borders, it was Foreign Minister Toshimitsu Motegi who responded to such calls from the business community and led the discussion within the government toward resuming international travel. Motegi had been appointed foreign minister in September 2019 after he helped lead the talks on the Comprehensive and Progressive Agreement for Trans-Pacific Partnership (or TPP11) to conclusion as minister for economic and fiscal policy/economic revitalization.

In late April, Motegi was telling people around him that both revitalization of the economy and efforts to prevent infection should proceed in a balanced manner. He repeatedly consulted with Prime Minister Abe over reopening international travel. He told a news conference on May 12, “Although restrictions on the movement of people are continuing, discussions should be held on how to relax these measures as the infection comes under control.” On May 15, as the state of emergency was still in place, Motegi said that Japan needed to first put domestic infection under control in order to resume cross-border travel, but added that he would like to consider “what kind of approach would be possible” toward reopening international travel by more closely examining the situation in other countries and comprehensively weighing various information as to “whether travel abroad would be safe or not.”

Later, Japan gradually reopened international travel – starting with business travel to and from countries where COVID-19 infections had calmed down to a certain extent. In that process, the government explored concrete steps to reopen the cross-border traffic of people along the lines set by Motegi. The lifting of the state of emergency throughout the country on May 25 removed a key obstacle to Japan restarting international travel.

3. Reopening travel with Asia-Pacific countries and regions

On June 18, Prime Minister Abe told a news conference that as the first step, Japan would start talks with Thailand, Vietnam, Australia and New Zealand – where COVID-19 infections had subsided – to gradually reopen cross-border travel for business purposes. “In this world where globalization has deepened so much, to keep our borders closed would cause tremendous damage to the economy and society. ... That would be fatal to Japan among others as an island nation dependent on international trade,” Abe said as he emphasized the importance for Japan of reopening international travel. Each of the four countries Japan selected as the first candidates for opening its doors had a lower rate of COVID-19 deaths in proportion to the population than Japan.

Materials prepared for the 38th meeting of the government's COVID-19

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response headquarters, held prior to the news conference, included a two-page document entitled “Gradual steps toward reopening international travel.” It succinctly mentioned the following: creating an exceptional framework for entry and departure of people necessary for business activities; trying a system that requires additional epidemic-prevention steps as a condition (for reopening cross-border travel) while maintaining the existing protective measures at points of entry; and the candidate countries/regions and types of people to be covered by the scheme. The document was drawn up by the National Security Secretariat (NSS), which since January had been put in charge of border control measures for COVID-19, including the entry ban.

3.1. The role of the National Security Secretariat

Why was the NSS, which serves as the command tower for diplomatic and security policies, put in charge of the overall adjustment of government policies on border control measures?

When Japan carried out the operation to repatriate the Japanese stranded in Wuhan in late January, the Cabinet Secretariat set up a regime led by Deputy Chief Cabinet Secretary Kazuhiro Sugita, in which Yoshiki Okita, deputy chief Cabinet secretary for crisis management; Kazuyuki Furuya, assistant chief Cabinet secretary (in charge of domestic politics); Satoshi Maeda, assistant chief Cabinet secretary (in charge of situation response and crisis management); and the “situation” office, would work closely with top officials at the Foreign Ministry, the health ministry and other concerned government organizations.

Protecting Japanese nationals overseas is one of the key missions of the deputy chief Cabinet secretary for crisis management. At the same time, crisis management is the main job of the official in this position. North Korea launched ballistic missiles more than 10 times in 2019 and four times in March 2020 alone. The deputy chief Cabinet secretary for crisis management and the situation office need to flexibly deal with these emergencies.

While the operation to repatriate the Japanese from Wuhan was led by the deputy chief Cabinet secretary for crisis management and the situation office, the government also explored ways to prevent the intrusion of the novel coronavirus from Wuhan, including entry restrictions and related legal measures. It was the NSS, headed by Secretary General Shigeru Kitamura, that was instructed to look into border control measures at the prime minister's liaison conference in late January.

COVID-19 was an unknown infectious disease that broke out in China. Collecting information on what it really was and what was happening at the scene of the outbreak, drafting the strategy and policy for protective measures at points of entry on the basis of precise analysis of intelligence and assessment of the circumstances related to

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the diplomatic and security relationship between Japan and other countries, and promptly deciding on measures to be recommended to Chief Cabinet Secretary Yoshihide Suga and Prime Minister Abe through consultations with the concerned government bodies such as the Foreign Ministry and the health ministry – the NSS undertook the job of overall adjustment of these tasks related to border control measures.

Border control measures are an issue that concerns the security and mobility of the public. Within the NSS, the economic team to be established on April 1 (then a group to prepare for the establishment of the team) was put in charge of border control measures. The economic team of the NSS was expected not only to be in charge of economic security but also responsible for incorporating security-related matters into the nation's legal system.

In the small hours of January 31, the WHO declared the novel coronavirus outbreak a Public Health Emergency of International Concern (PHEIC). In response, at the second meeting of the government's COVID-19 headquarters held around noon the same day, Prime Minister Abe instructed the ministers concerned to take thorough steps to prohibit the entry of people infected with the virus, and to look into ways of applying the immigration control act for a more effective border control even when the entrants' infection was not confirmed – given that some carriers of the virus had been found to show no symptoms. At the third meeting of the headquarters held from 6:10 p.m. to 6:25 p.m. that day, NSS chief Kitamura explained the policy of banning the entry of foreigners who had a record of staying in China's Hubei Province under the provisions of the immigration control act, and said, "As soon as possible after this meeting, I would like the agenda to be circulated among the ministers who are members of the Cabinet ministers' meeting on emergencies under the National Security Council to reach a decision, and then have the agenda circulated among the Cabinet ministers to receive the Cabinet's approval. I would then like to enforce [the entry ban] beginning February 1."

For the first time in history, a Cabinet ministers' meeting on emergencies under the National Security Council was organized (although the agenda was only circulated among members of the meeting without physically gathering the members). This meeting is designed to strengthen Japan's response to serious emergencies that demand highly political judgment and is composed of the prime minister, the chief Cabinet secretary and Cabinet ministers designated by the prime minister in advance depending on the type of emergency. Emergencies originally anticipated for discussion at the meeting included intrusion into territorial waters, illegal landing, terrorism using radioactive materials, and the arrival of a massive number of refugees.

Thus far there was close coordination between the NSS and the Justice Ministry's Immigration Services Agency. Justice Minister Masako Mori had already made up her mind to utilize Article 5, Section 1 and Clause 14 of the immigration control act to ban entry into Japan of foreigners who had stayed in Hubei, where the infection was rampant, within the past 14 days and foreigners who had Chinese passports issued by the province. In postwar Japan, there had only been two cases in which Japan banned entry on the basis

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of the immigration control act – both individuals suspected of such offenses as terrorism. Justice Minister Mori's decision was an extremely unusual step in that it was not targeted at particular individuals but all foreigners who had stayed in certain countries or regions designated by the minister. Therefore, the NSS decided to hold a Cabinet ministers' meeting on emergencies – a “decision-making body with considerable weight” – and to have it endorse Mori's decision based on the immigration control act.¹⁵

Later, following Cabinet approval, the entry ban went into force on February 1. The fact that two meetings of the government's COVID-19 headquarters were held on one day, that the agenda was circulated among members of a Cabinet ministers' meeting on emergencies on the evening of the day to reach a decision, and that the Cabinet then granted formal approval, testified to how tense the situation was.

Starting on January 31, the National Security Council gradually expanded the list of countries and regions to which Japan's entry ban was applied by holding the Cabinet ministers' meeting on emergencies. By July 22, the meeting had been held 15 times to cope with issues related to COVID-19¹⁶ and the entry ban applied to a total of 146 countries and regions. Protective measures at points of entry became a major item on the NSS's agenda, along with such matters as ballistic missile launches by North Korea.

Earlier, the NSS had maintained close ties primarily with the Defense Ministry and the Foreign Ministry, but it began to cooperate with a broader range of government bodies after it was put in charge of the border control measures related to COVID-19. There is a document entitled “A request for cooperation concerning phased measures aimed at reopening international travel,” which the government submitted to the Japan Business Federation (Keidanren). On the document, the name of Toshihiko Fujii, head of the NSS's economic group, comes first, followed by the names of senior officials at the Immigration Services Agency, the Foreign Ministry, the health ministry, METI and the transport ministry. Division chiefs of these organizations also held daily consultations and built a relationship of mutual trust.¹⁷

In Europe, which is in effect contiguous with the Middle East, and in the United States, which is contiguous with Central and South America, border control is directly linked to economic and security issues. In Japan, an island country, the priority of border control was low on the policy agenda. However, through protective measures at points of entry to defend Japan against the invisible menace of the novel coronavirus, the Japanese government came to address the “movement of people” as a security issue. The government section that tackled the problem was the NSS's economic team, which is in charge of economic security. The NSS reinforced border control measures by holding a series of discussions involving various government bodies and adopted standards and negotiation policy on reopening international travel. Through such efforts, the NSS's economic team, which was officially created on April 1, irrevocably established its recognition within the government. “Although the NSS's economic team was a newcomer, its traction within the whole government no doubt increased,” said a senior official in the Cabinet Secretariat as he commented on the NSS.

3.2. Negotiations for reopening international travel

On June 18, Prime Minister Abe announced that Japan would start talks with Vietnam, Thailand, Australia and New Zealand for reopening mutual travel with these countries. The government set three conditions in choosing the countries with which to resume cross-border travel – that the number of accumulated new infections in the country over the past week was less than 0.5 per 100,000 population; that there were business travel needs with the country; and that the volume of mutual traffic of people would not be too large. Although Japan chose the four countries on the basis of these conditions, the announcement was made without prior adjustments with the governments of those countries – meaning that Japan merely expressed its intentions to begin negotiating with them. At that point, the number of COVID-19 deaths per 1 million population was about seven in Japan, zero in Vietnam, about one in Thailand, four in Australia and about five in New Zealand.

Two miscalculations surfaced as Japan proceeded with talks with each of these countries.

The first miscalculation was that novel coronavirus infections began to spread again in Australia and New Zealand, where the infection had earlier subsided. On May 5, the two countries announced that they would consider putting a trans-Tasman “travel bubble” into operation to reopen their borders with each other. A travel bubble is a system in which neighboring countries that managed to contain the infection enter into the same “bubble” and reopen mutual traffic of people without restrictions such as self-isolation requirements after entry. The phrase is said to have originated from the words of New Zealand Prime Minister Jacinda Ardern, who used a softer expression “Stay in your bubble” instead of “Stay home” in calling on people to stay with their family when she announced the start of a lockdown in March. In Australia, however, infection traced to a family who returned from abroad began to spread again in mid-May in the state of Victoria in southeastern Australia, where the state capital Melbourne is located. Both the number of infected cases and deaths in the second wave that hit beginning in July sharply increased compared with the first wave. The death toll per 1 million people rose to about eight at the end of July – and surged to 24 at the end of August.

In New Zealand's capital Auckland, community-acquired infection was confirmed on August 11 – for the first time in 102 days. The next day, Prime Minister Ardern imposed restrictions on people's movement in the capital, which contained the resurgence of infection to some extent. However, the New Zealand government postponed general elections scheduled for September to October. Relaxing border control was feared to lead to the second intrusion of the virus and resurgence of infections, possibly further affecting the schedule of the elections. Although both Australia and New Zealand had succeeded in containing the infection, even they could not create a “bubble.”

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Japan's talks with the two countries came to a standstill.

The second miscalculation was that as each of the countries groped for ways to strike a balance between infection prevention and reopening economic and social activities, their governments did not have a system in which their different arms cooperated to jointly explore reopening the cross-border traffic of people – as Japan did under the command of the NSS. Only after approaching the countries to propose starting talks, the Japanese government found out that its counterparts lacked a body to serve as the command tower for coordinating the efforts of various sections of the government. There were questions that needed to be sorted out, including what tests should be trusted to unmistakably determine that the tested persons were negative for the virus and how strictly should self-isolation after entry and measures to track people's movement be enforced. Different countries had different ideas about to what extent private rights should be restricted.

Efforts to reopen international travel as advocated by Foreign Minister Motegi did not make smooth progress. The government had prepared two frameworks. One was the “business track” which would allow people like executives and engineers on short business trips to engage in business activities within a limited sphere of movement even while they were undergoing the 14-day self-isolation. The other was the “residence track” which would allow long-stay people like locally stationed business representatives of Japanese companies and foreign “technical trainees” in Japan to enter and depart although they would be required to go through a 14-day self-isolation after entry or return. Negotiations for the business track turned out to be difficult, but as to the residence track, talks with Thailand and Vietnam went well and registration of people who wanted to take part started on July 29.

That did not mean, however, that long-stay people were easier to accept than people on a short business trip.

One of the difficult issues that confronted the government was how to deal with the re-entry of foreigners with residency status in Japan who left the country with a re-entry permit. Among foreigners who have residency status in Japan, people belonging to any of the following four categories – permanent residents, long-term residents, spouses of Japanese nationals and spouses of permanent residents – totaled some 1.2 million before the COVID-19 crisis. About 100,000 of them left Japan after the spread of infection in the country. If these 100,000 people moved to Europe, China, South Korea and other countries to which Japan's entry ban was applied, they would be unable to return to Japan. People who obtained residency status in Japan because they liked the country could not come back to their jobs at companies or universities in Japan, while international schools and foreign cuisine restaurants could not be reopened because they were unable to return. Some executives of foreign-owned companies who had to temporarily go back to their home countries to attend family funerals found themselves unable to re-enter Japan. Among other countries, it is the standard practice to give the same treatment to people with a re-entry permit as their own nationals. The question over

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re-entry of foreigners with a residency status in Japan developed into a diplomatic row, over which Japan came under criticism from Western countries that said the issue was a human rights problem.

Why did the government not allow the re-entry of foreigners with residency status?

As mentioned earlier, the government, vis-a-vis countries where COVID-19 infections expanded, was to adopt the following process: the government upgrades the level of information on the danger of an infectious disease to Level 3 – advice not to travel to the particular country or region (cease travel advisory) – from Level 2 – advice to refrain from non-essential travel. Then a Cabinet ministers' meeting on emergencies under the National Security Council decides to apply the entry ban to the country/region, and the government's COVID-19 headquarters announces the decision. Regarding countries where infections subsided, the NSS was considering downgrading the information on the danger of an infectious disease to Level 2. If people coming from Level-2 countries entered or re-entered Japan, quarantine tests would not be needed although they would still be required to go through a 14-day self-isolation. However, a mass re-entry of up to 100,000 people – even from countries or regions where the infections had subsided – carried the risk of bringing asymptomatic carriers or patients with mild symptoms in massive numbers to Japan (and without going through quarantine tests). That prospect reminded officials of how in March domestic infections spread by way of Japanese who returned from trips to Europe in large numbers.

As a result, downgrading of the information on the danger of an infectious disease with regard to those countries did not materialize. Then the business track and the residence track were considered as schemes to reopen international travel while maintaining existing protective measures at points of entry. Later, beginning July 29, re-entry of foreigners with re-entry permits to Japan came to be accepted in a phased manner. What made that possible was an improved quarantine testing capacity.

3.3. Quarantine capacity underpinning border control

A high-ranking official in the Cabinet Secretariat said, “To what extent borders can be opened is a function of testing capacity.”

If a massive number of tests are carried out at points of entry and test results are quickly known, surveillance of inbound travelers at quarantine sites and submission of “negative” certificates by departing Japanese can be quickly done. From February 1, when the government began imposing an entry ban on travelers coming from Wuhan, to September 20, quarantine workers tested more than 190,000 people, 880 being found to be positive at points of entry.¹⁸ In the early stage, however, the capacity at quarantine stations to hold PCR tests was strained by the need to test returning Japanese and there

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was little room to test foreigners who were entering or departing. The limited testing capacity at quarantine stations became a bottleneck.

Thanks to the government policy of promoting inbound tourism, which had been pushed by Chief Cabinet Secretary Yoshihide Suga, some 32 million foreign travelers visited Japan in 2019, roughly three times the 2013 figure. In March, however, when countries all over the world closed their borders and Japan started to impose a full-scale entry ban, the number plummeted by 90 percent on the previous year. April saw the number drop by 99.9 percent to slightly less than 3,000.¹⁹

Strengthening quarantine operations would be indispensable as Japan reopened to international travel, but the response to the novel coronavirus exposed the weakness of the health ministry's policy execution performance, including PCR tests. The ministry lacked enough capacity to carry out such tasks as quarantine, restriction of suspected patients' activities, isolation of entrants to prove them negative – all specified by law and falling under the health ministry's jurisdiction.

Quarantine stations suddenly came to play the role of first responder like the military, police and fire departments. However, the load of the task might have been too heavy for the health ministry alone to carry out. In view of this situation, a task force was launched at the core of the government to reinforce quarantine capacity as part of the border control measures. In accordance with the standard set by the NSS, the task force was to provide powerful support to the execution of protective measures at points of entry. Thanks to the task force, the testing system at quarantine stations improved and testing means and capacity expanded by leaps and bounds.

Introduction of quantitative antigen tests – using saliva as a specimen – served as a breakthrough.

Since the operation to repatriate Japanese from Wuhan, quarantine stations employed PCR tests based on wiping liquids from the nose and the pharynx to test entrants from areas where infection was prevalent, including Europe. This type of test takes some time before the results are obtained. Since a certain number of test specimens must be collected to fill a fixed batch, an entrant who is the first person from whom a specimen is taken must wait until a certain number of samples are collected. In addition, it takes the entrant some time before his or her test result is made known. If passengers come to Japan aboard a flight arriving at night, they had to stay up to two nights and three days near the airport to wait for test results. In the case of a quantitative antigen test, however, analysis alone takes about 30 minutes. About an hour is enough to obtain test results, including the time for transporting the specimen. The test's accuracy (sensitivity and specificity), about which some concern has been expressed, was confirmed to be equal to that of the PCR tests for both infected patients with symptoms and asymptomatic carriers.²⁰

Unlike the PCR tests of the wiping liquids type, the test does not require a doctor or a nurse to wear personal protection equipment, insert a swab into the nose and the

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pharynx and take the liquids – all the while being worried about the possibility of being infected. It only requires the person being tested to spit saliva into a container. Lumipulse SARS-CoV-2Ag, a kit developed by Fujirebio Inc., was granted approval under the Pharmaceutical Affairs Law on June 19 and was covered by public health insurance beginning June 25. The quantitative antigen test was introduced at Haneda Airport and Narita Airport's No. 2 Terminal on July 29, at Kansai International Airport on August 1 and Narita Airport's No. 1 Terminal on August 3.

On July 29, when the antigen test was first introduced, the procedures for foreign residents who had re-entry permits and were returning to Japan and the residence track for businesspeople traveling between Japan and Thailand or Vietnam started.

Health minister Katsunobu Kato said, “At the outset, the quarantine system was built in haste. Now I found that a reasonably adequate system was being built. Since the business track will also be put to operation, we will make preparations for that.”²¹

On August 28, when Prime Minister Abe abruptly announced his resignation, the government's COVID-19 headquarters released a document entitled “Further efforts to deal with the novel coronavirus,” which made it clear that the government would push to improve testing capacity and the system related to international travel. It was decided that a system would be built at an early juncture to enable people departing from Japan for business purposes to quickly obtain test certificates at city medical institutions.

The format for test certificates is not unified because different medical institutions use different formats. Regarding a standard for certifying tests, a framework should be established first in Japan, and then how to create an international framework should be studied. At a videoconference with health ministers of other G7 countries, Kato raised this issue and said that he obtained the understanding of his counterparts.²² In addition, the Common Project, a global non-profit organization supported by the Rockefeller Foundation, and the World Economic Forum are jointly developing CommonPass, an electronic certificate that can be used worldwide. This represents an effort to prepare health data in the form of test results in a universal format and manage the data on a computer app, so as to facilitate people's smooth entry and departure.

Quarantine stations, which serve as a first responder, require weapons, protective equipment (PPE) and logistics to support them. In preventing the penetration of infection and reopening global economic and social activities, the supply of PPEs to quarantine station workers and innovation in testing technologies and test certification will become important. This was one of the lessons learned in the border control measures to combat the novel coronavirus.

4. Summary

Confronted with COVID-19, an unknown enemy whose infection spread even

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through asymptomatic carriers and patients with mild symptoms, every country closed its borders – a strategy that had long been deemed “prohibited.” The movement of people gradually resumed between China and South Korea, as well as among European countries, as their infection risk equalized. In Japan, infection spread through the penetration of cases from abroad, in particular Europe, and the government was forced to declare a state of emergency. Later, it searched for ways to reopen its borders in stages on the basis of risk evaluation by experts on public health, so that it could stop infection from spreading and protect people's health and lives while at the same time restarting international social and economic activities in a balanced manner.

It was Foreign Minister Motegi, who had experience as minister in charge of economic matters, who led the discussion on the issue within the government. In addition, it was the National Security Secretariat, particularly its economic team, that undertook the task of overall adjustment within the government, based on the approach that border control was an issue that concerned people's mobility and security. The NSS, which halted cross-border travel by expanding the list of areas to which Japan's entry ban was applied on the basis of the immigration control act, also played a leading role in setting the standard for selecting countries to which Japan would reopen its borders and in working out the basic policy for negotiations with them.

Reopening international travel was a difficult issue that required highly political judgment on the question of how Japan should restart its social/economic activities and diplomacy while accepting to a certain degree the penetration of the novel coronavirus – which could not be fully eradicated – and to what extent Japan could accept the risk to people's lives and health in order to achieve that goal. In holding negotiations with other countries, Japan was at the mercy of the resurgence of infection in those countries and their systems of policy adjustment.

While Japan aimed for reopening international travel under two frameworks (the business track and the residence track), re-entry of foreigners with residency status in Japan also became an issue. In all the attempts mentioned above, the testing capacity at points of entry posed a problem. It was the quarantine stations as first responders that desperately underpinned the task of border control. Introduction of a new technique called quantitative antigen testing improved quarantine capabilities in leaps and bounds.

Hitoshi Oshitani, professor at Tohoku University, stressed the importance of keeping a risk management cycle in operation in coping with the novel coronavirus.²³ Nobody knows the optimum solution for the COVID-19 crisis and a new risk that has not been experienced before may arise. Moreover, measures against the disease change in accordance with accumulation of knowledge and information as well as improvement in treatment methods in addition to the epidemic situation and response capacity.

Protective measures at points of entry and reopening international travel are two sides of the same coin in that they concern the question of how to control borders. What is needed in pushing for reopening international travel while the situation and prospects

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of the infection remain unclear are as accurate as possible situational analysis and risk evaluation, execution of measures based on prompt decision-making and logistics that support the execution.

In Japan's border control, it can be said that the Prime Minister's Office, the National Security Secretariat (and the National Security Council), Foreign Minister Motegi, the Foreign Ministry, the health ministry and quarantine authorities closely cooperated and maintained a risk management cycle in operation to cope with the situation. At the 43rd meeting of the government's COVID-19 headquarters on September 25, the new Prime Minister Yoshihide Suga emphatically said restarting international travel would be indispensable in resuscitating the economy and that his Cabinet would try to reopen cross-border traffic as much as possible while holding thorough tests for the virus.

At home, a state of emergency was declared to call for restricting people's movement in order to stop the infection from expanding – and lifted. In border control, you have to grapple with the issue in the context of international politics as well as the economy and national security. Japan as an “island nation dependent on international trade” (as Prime Minister Abe put it in his news conference) is now confronted with the tough question of border control, which the nation has thus far pushed to the sidelines.

Notes

1. Shigeru Omi, “WHO wo Yuku (Walking Through the WHO),” Igaku Shoin, 2011. Read also a special interview with Omi at the end of the report.
2. WHO Regional Office for the Western Pacific (WPRO), “Considerations to relax border restrictions in the Western Pacific Region” (June 29, 2020)
3. The EC Council, June 30, “Council agrees to start lifting travel restrictions for residents of some third countries”
4. The Robert Koch Institute, April 9, “Robert Koch-Institut startet bundesweite Antikörper-Studien, Wie viele Menschen sind immun gegen das neue Coronavirus?”
5. World Economic Forum, June 19, “What is an immunity passport and could it work?”
6. The WHO, April 24, “Immunity passports” in the context of COVID-19
7. For details, see Part II, Chapter 2.
8. Narita International Airport Corp., August 29, 2020 “May 2020 Airport Operation Situation.” Cargo airplanes' departures and arrivals, however, registered record figures. Behind this was the fact that airlines flew passenger planes for the purpose of transporting cargo, including medical supplies and other materials.
9. Specially designated ports and airports are facilities where people suspected of infection stay and wait for a certain period of time for the purpose of preventing infectious diseases and the spread of infection, increasing the efficiency of quarantine through centralized placement of quarantine officials. The government's action plan on pandemic influenza and new infectious diseases designated Narita, Haneda, Kansai, Chubu and Fukuoka airports to handle people arriving on passenger airlines and Yokohama, Kobe, Moji and Hakata ports to handle those arriving on passenger ships. (For reference, the subcommittee on new types of influenza at the Health Science Council's infectious diseases division, September 13, 2019, “On Specially designated ports, etc. for quarantine against influenza, etc. (draft)”
10. For details, see Part II, Chapter 2
11. The Health, Labor and Welfare Ministry, March 17. “Petition by the Expert Meeting on the Novel

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- Coronavirus Disease Control to the Health, Labor and Welfare Ministry”
12. The Justice Ministry, March 26, “New steps related to protection measures at points of entry”
 13. The Justice Ministry, April 1, “Efforts concerning the novel coronavirus and a request for self-restraint on traveling abroad.”
 14. m3.com, June 2, a special public lecture by Professor Hiroshi Nishiura, “Risk arising from relaxing restrictions on entry. A simulation”
 15. Interview with a high-ranking official in the Cabinet Secretariat
 16. Fifteen times – on January 31, February 6, February 26, March 5, March 10, March 18, March 23, March 26, April 1, April 27, May 14, May 25, June 29 and July 22. It is said that the agenda was circulated among members of the meeting but without their physical presence in meetings. On June 18, a Cabinet ministers’ meeting on emergencies was held and the government issued the same day “Phased measures aimed at reopening international travel.”
 17. Interview with a high-ranking official in the Cabinet Secretariat.
 18. “The current situation of the novel coronavirus and the response by the Health, Labor and Welfare Ministry” (the September 20 edition)
 19. The Japan National Tourism Organization, “Inbound Visitor Trends”
 20. The website of the health ministry, “On tests related to the novel coronavirus”
 21. Interview with health minister Katsunobu Kato on September 8, 2020
 22. Interview with health minister Kato on September 8, 2020
 23. m3.com, August 21, 2020, “Social consensus called for on an acceptable level of risk from the novel coronavirus,” public lecture by Professor Hitoshi Oshitani of Tohoku University at the 94th meeting of the Japanese Association for Infectious Diseases, “[The problem] will not be solved in a few months.”