

## **Part III Best practices and challenges**

### **Chapter 2**

#### **Prime Minister's Office**

Confronted with a national crisis of the novel coronavirus disease, the Prime Minister's Office took on the role of the command tower in the government's response to the emergency. How did the Prime Minister's Office respond to the crisis? Did it serve the function of leading the whole government's efforts? How should its relationship with the expert panel – or the relationship between politicians and scientists in dealing with the crisis – be evaluated?

This chapter will examine the organizational structure and governance of the Prime Minister's Office, in particular the prime minister's liaison meeting (as its brain) and the task force (its hands), the "Office for influenza response" that had been supposed to lead the Cabinet Secretariat's response to a pandemic, the "Office for COVID-19 Control" established from the Office for influenza response after the Act on Special Measures for Pandemic Influenza and Infectious Diseases Preparedness and Response was revised to deal with COVID-19, the "situation office" that took charge of the response in the initial phase, and the National Security Secretariat.

This chapter will then review the relationship between the Prime Minister's Office and the panel of experts advising the government. As a concrete case of crisis response led by the Prime Minister's Office, we will examine the operation to repatriate Japanese nationals from Wuhan, China; the decisions to postpone the state visit by Chinese President Xi Jinping and the 2020 Tokyo Olympic and Paralympic Games; the cancellation of large-scale public events and nationwide closure of schools; the declaration and lifting of the state of emergency; the "Abenomask" operation to distribute gauze masks to all households; and the "Go To" campaign. Finally, we will examine what were the best practice and problems in the actions taken by the Prime Minister's Office.

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### **1. Organizational structure and governance**

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#### **1.1. The prime minister's liaison meeting (the brain) and the task force (the hands)**

In declaring a state of emergency in a news conference on April 7, Prime Minister Shinzo Abe called the novel coronavirus disease the "biggest crisis" to hit Japan in its postwar history. It was the Prime Minister's Office that took on the role of the command tower in the government's response to the national-level crisis.

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Since immediately after China imposed the lockdown of Wuhan on January 23, 2020, the prime minister's liaison meeting was held almost daily at the Prime Minister's Office. The agenda of the first liaison meeting, held on the Sunday of January 26, was the repatriation of Japanese nationals stranded in Wuhan. Information from relevant ministries was relayed to the meeting and shared among the participants across ministerial divisions. Among the participants in the liaison meeting were Prime Minister Abe; key staff at Abe's office – Takaya Imai, executive secretary and special adviser to the prime minister, and secretaries Hirotsugu Shinkawa and Kozo Saeki; senior officials of the Cabinet Secretariat led by Chief Cabinet Secretary Yoshihide Suga and Deputy Chief Cabinet Secretary Kazuhiro Sugita; Health, Labor and Welfare Minister Katsunobu Kato; economy revitalization minister Yasutoshi Nishimura, who was put in charge of the COVID-19 response; Shigeru Kitamura, secretary general of the National Security Secretariat; Toshihiko Suzuki, administrative vice minister of the health ministry; Yasuhiro Suzuki, chief medical and global health officer at the ministry; Vice Foreign Minister Takeo Suzuki and Vice Defense Minister Kenichi Takahashi.

The meeting was held from around 5 p.m. every evening at the office of the prime minister. Initially, Yoshiki Okita, deputy chief Cabinet secretary for crisis management, presided over the conference and, after the special measures act was revised in March and the Office for Novel Coronavirus Disease Control (the "Office for COVID-19 Control") was set up at the Cabinet Secretariat, Hideki Tarumi, head of the office, took over that role. Here, the participants weighed the information gathered and assessed the situation, discussed the government's choices in its response, and decisions were made as the prime minister handed down his judgment. When its members could not reach a consensus, the prime minister occasionally wrapped up the discussions, leaving the final decision in the hands of his office.

The prime minister's liaison meeting was the "brain" that served as the command tower to draft and make decisions on the government's strategy and policy for its measures. From mid-March onward, the Prime Minister's Office also launched a task force to bridge the gap in the vertical division between government ministries and for coordinated actions between public and private sectors as well as the national and local governments. Hiroto Izumi, special adviser to the prime minister, was responsible for the logistics of the task force. The agenda of the task force ranged from securing hotel and other facilities to accommodate infected patients with mild symptoms, procuring masks and personal protective equipment, border control measures (especially tightening of quarantine measures), consolidating the domestic testing regime, and "future steps" to be taken against COVID-19 that Abe unveiled when he announced his resignation at the end of August.

Based on instructions from Prime Minister Abe and Chief Cabinet Secretary Suga, the task force mobilized staff from the Cabinet Secretariat and various ministries to put together new systems and schemes. It then ordered each of the ministries to carry out the policy measures thus designed, and monitored whether the measures were adequately implemented. Normally, the health ministry communicated with local

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governments in the form of administrative notices – with the ministry unilaterally issuing large numbers of policy and clerical notifications to the departments in charge of public health, medical services and social welfare at each local government – and coordination between the two sides was far from close. Officials of the Internal Affairs and Communications Ministry took part in the task force and worked to improve communication between the health ministry and local authorities.

These efforts had a certain effect for taking a whole-of-government approach to making policies, without being hampered by ministerial divisions, and for their speedy implementation. In short, they contributed to a flat decision-making process. At the prime minister's liaison meetings, the office of the prime minister took charge of making policy proposals and adjustments under Abe's leadership, and thus had the effect of expediting policy decisions and implementation. A key to crisis response is how to change the bureaucracy's normal decision-making mode to one geared to an emergency. The bureaucracy has an organizational culture in which officials tend to rigidly follow normal precedents even during a crisis. To manage a national-level crisis, you have to overcome that bureaucratic inertia and resistance to make flexible responses to the situation at hand.

In the face of a crisis, leaders have no choice but to make top-down decisions, because speedy information gathering, assessment of the situation and decision-making matter in responding to an emergency. In many phases of the government's response to the COVID-19 crisis, decisions of the Prime Minister's Office were made in a top-down way led by the prime minister and his office and the prime minister's liaison meeting (here, the Prime Minister's Office includes the Cabinet Secretariat, which supports its administrative duties). So much so that the messages sent out by the Prime Minister's Office carried weight. The public and the media closely watched each step taken by the office. Many of the measures thus taken came under criticism, and there were not a few instances in which its judgments and instructions were misunderstood.

However, no matter how flat or speedy you make the decision-making process of the command post, where you assign its secretariat function and how well those decisions actually function is a different question. The report by a government conference wrapping up its experience with the new-type influenza (A/H1N1) pandemic of 2009 called for clarifying the national government's decision-making process and who is responsible for what decisions, as well as building a system that made speedy and rational decisions based on an adequate grasp of the real situation in medical services and local governments on the frontlines of pandemic response as well as the opinions of experts.

In that respect, the government stumbled in its initial response, as it took time to determine who would assume the core secretariat functions.

## 1.2. From the “Office for influenza response” to the “Office for COVID-19 Control”

In the organization of the Prime Minister's Office and the Cabinet Secretariat, it was the Office for Pandemic Influenza and New Infectious Diseases Preparedness and Response, that was deemed the first to respond to an infectious disease crisis. Commonly known as the “Office for influenza response,” it had a staff of about 20 officials recruited mainly from the health ministry, and was headed alternately by an official from the health ministry (for two years) and one from the Ministry of Economy, Trade and Industry (for a year). With the exception of the Defense Ministry, the Self-Defense Forces, the National Police Agency and the Japan Coast Guard, it is deemed difficult to have elite personnel constantly assigned to positions in charge of an emergency situation. The head of the influenza office was one of such positions that received little attention in normal times. According to a high-ranking government official, the influenza office was doing the job of two offices combined with a bare minimum of manpower.<sup>1</sup>

The experience of the 2009 novel influenza case dictated that measures against infectious diseases should not be left in the hands of the health ministry alone but required comprehensive adjustments across several ministries. That was why the Office for influenza response was set up in the Cabinet Secretariat, instead of the health ministry. When a conference of Cabinet ministers involved in measures on novel influenza was held in September 2011,<sup>2</sup> the office was tasked to serve as its secretariat. In 2014, a new office was created for measures dealing with the Ebola virus disease outbreak, and the Coordination Office of Measures on Emerging Infectious Diseases was established in 2015. The Ebola disease office was abolished in April 2016, after the World Health Organization lifted the Public Health Emergency of International Concern over the Ebola virus in the previous month. The Coordination Office of Measures on Emerging Infectious Diseases is mainly responsible for working with the health ministry and the Foreign Ministry for international cooperation on infectious diseases that pose international threats, such as the Zika virus. The Office for influenza response was effectively put in charge of the duties of that office as well. However, the staff at the influenza office was never sufficiently prepared or trained, nor was its system fully designed to deal with infectious diseases or a pandemic.

When the novel coronavirus infections broke out, it was supposed to be the Office for influenza response that would immediately be put in charge of the government's response. However, things did not turn out that way.

The special measures act, which falls under the jurisdiction of the Office for influenza response, covers “pandemic influenza and new infectious diseases” – or a new strain of influenza, re-emerging influenza, as well as other new infectious diseases that are feared to spread quickly throughout the country. When a new infectious disease crisis breaks out, policy decisions on whether or not the Office for influenza response takes the frontline role in the government's response will depend on whether the infectious disease

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at hand is legally judged to be among the “pandemic influenza and new infectious diseases” under the special measures act and, if it was a “new infectious disease,” whether it is deemed under the act to have the potential to spread quickly across the country.

“Novel influenza”<sup>3</sup> and “re-emerging influenza”<sup>4</sup> as defined in the law refer to viruses that are transmittable from human to human and could cause grave effects as people in this country do not have the immunity against them. The “new infectious diseases”<sup>5</sup> here are ones that are unknown to humankind and spread through human-to-human infection.

The novel coronavirus (SARS-CoV-2) that causes COVID-19 is not an influenza virus. As of the second week of January, it was already known that the disease was caused by a novel coronavirus, whose gene arrangement was identified in an announcement by China. The Cabinet Legislation Bureau made a technical judgment that COVID-19 was not to be legally classified as a “new” infectious disease because its pathogen had already been identified. It is the Infectious Diseases Control Law, not the special measures act, that is primarily applied in managing an infectious disease crisis. For the above-mentioned reasons, COVID-19 was classified as a “designated infectious disease,” not a “new infectious disease.” Since it was not legally covered by the special measures act, the health ministry, not the influenza office of the Cabinet Secretariat, was put in charge of the government’s response from the outset.

Members of the Office for influenza response took the decision as meaning that COVID-19 was not a matter to be handled by them. Therefore, it effectively did not take any proactive action on the novel coronavirus – except to share information with the Foreign Ministry and the health ministry – until it was tasked to be in charge of the secretariat of the government’s COVID-19 headquarters set up on January 30. The office was indeed not engaged in any noticeable activity when the first domestic infection case was detected on January 15 or when the lockdown was imposed in Wuhan, China on January 23 – because COVID-19 was not deemed an infectious disease covered by the special measures act, which was under its jurisdiction. In normal times, the Office for influenza response, which was tasked to deal with pandemic influenza and new infectious diseases, kept influenza drugs such as Tamiflu in stock and held regular drills in accordance with the government’s action plan.

Holding drills is an important part of the preparedness against an emergency. The scenario of the drills held by the Office for influenza response in November 2019 has been made known.<sup>6</sup> The drills simulated changing the government’s basic response policy, setting up the government headquarters, and taking border control and other measures. However, the scenario was that only two infected persons from other countries entered Japan – who would then be handled by a medical institution designated for treating infectious disease patients. The office assumed a situation of extremely limited scale in holding the drills, and a health ministry official noted that the drills followed a rigid scenario based on the example of an avian influenza case that took place in the past.

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Drills should be held assuming a worst possible scenario. Even judging by the standards of natural disaster drills, the drills held by the Office for influenza response appear to have become a routine, nominal exercise. It is clearly useless to hold drills on “pandemic measures” by assuming the entry of one or two infected persons through the border, an expert said. A health ministry official, as if partly resigned to the poor situation, noted, “It might suffice if Cabinet ministers involved in pandemic response gathered once a year and shared the minimum awareness that a conference led by the prime minister would be launched if a pandemic takes place. Because officials at the ministries would have to prepare scenarios for the drills, the scenario-making process would raise the officials’ awareness.”

Whenever new infectious diseases such as the Ebola virus disease and the Zika virus disease broke out overseas, new offices were set up in the Cabinet Secretariat. However, these were only nominal steps that merely changed the names of the same functions, and assumed dealing with a threat of only limited scale. Then, suddenly, the novel coronavirus disease hit Japan. The Office for influenza response was neither prepared nor had the capability to combat the COVID-19 crisis.

Later on, with the expansion of domestic infections of the novel coronavirus, the special measures act was amended on March 13. The Office for influenza response played a central role in the efforts led by Kazuyuki Furuya, assistant chief Cabinet secretary (in charge of domestic affairs), to prepare the revision over the limited timeframe of two weeks.<sup>7</sup> Then on March 23, the Office for Novel Coronavirus Disease Control (the “Office for COVID-19 Control”) was established from the Office for influenza response. The Office for COVID-19 Control now had a sharply increased staff of approximately 70, and the position of its chief was upgraded from the councilor to vice minister-class. Under Nishimura, the minister in charge of the COVID-19 measures, Hideki Tarumi, former director-general of the health ministry’s Pharmaceutical Safety and Environmental Health Bureau, was tapped as the first chief of the office. Questions lingered as to whether the Office for COVID-19 Control was indeed a detached force of the health ministry – since many of its officials formerly belonged to the ministry – and whether it appropriately served the function as a command tower for the government’s response. However, the Cabinet Secretariat should be applauded for its efforts to amend the special measures act over a short period of time and flexibly build up the COVID-19 response regime. The Office for COVID-19 Control was finally at the center of the government’s response to the COVID-19 crisis, setting the regime for comprehensive policy adjustments in fighting the pandemic.

### **1.3. The “situation office” and the National Security Secretariat**

It was the lockdown of Wuhan, China, that forced the Prime Minister’s Office to take a serious look at COVID-19. Immediately after the Wuhan lockdown was enforced

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on January 23, the government set up a local response headquarters at the Japanese Embassy in Beijing, and Prime Minister Abe told a conference the following day of ministers involved in countermeasures for COVID-19 (which had been set up on January 21) to secure the safety of Japanese nationals stranded in Wuhan. Following the discussions at the prime minister's liaison meeting on January 26, Abe announced an operation to repatriate Japanese nationals from Wuhan. Repatriation of the Japanese and their families (including Chinese spouses) required an operation involving several ministries and departments, including the Foreign Policy Bureau and the Consular Affairs Bureau of the Foreign Ministry, the Land, Infrastructure, Transport and Tourism Ministry, responsible for aviation matters over flights to repatriate the Japanese, and the health ministry in charge of anti-infection measures. Therefore, the Prime Minister's Office assumed responsibility for adjusting the efforts by these ministries. But the Office for influenza response was not directly involved in the effort, and it was the Assistant Chief Cabinet Secretary Office (the "situation office") consisting of the assistant chief Cabinet secretary for situation response and crisis management and staff in charge of crisis control that took charge of that role.

There are three senior government positions in the Cabinet Secretariat responsible for security and crisis management: the special adviser to the prime minister for national security, secretary general of the National Security Secretariat, and deputy chief Cabinet secretary for crisis management. The situation office supports the deputy chief Cabinet secretary for crisis control,<sup>9</sup> who is responsible for devising strategy to deal with domestic and international crises, executing crisis response operations and protecting Japanese nationals in countries/areas where the crisis is taking place. During the 2014 Ebola virus disease outbreak, the situation office coordinated the crisis control measures taken in Japan. In the operation to repatriate Japanese from Wuhan on chartered flights, staff at the situation office provided care for the returnees back in Japan as part of their domestic crisis control operations. The office was put in charge of that task because the Cabinet Secretariat had to be made responsible for accommodation for the returnees, an operation that straddled the jurisdiction of several ministries.<sup>10</sup>

Since Prime Minister Abe's administration had dealt with a series of large natural disasters over the years, the situation office had built up know-how and expertise in dealing with such crises. However, an infectious disease crisis posed a different type of threat. In a natural disaster, damage reaches the maximum level the moment it hits, and the government makes an emergency response right from the outset. But in an infectious disease emergency, it is hard to predict how far the damage will expand. Such a crisis also requires an entirely different approach because the emergency could continue over an extended period.

A key part of the response to a natural disaster concerns providing care and material supplies for people evacuated to emergency shelters. In the operation to repatriate the Japanese from Wuhan, meanwhile, the situation office had to take charge of keeping the returnees in isolation for 14 days after their return, making sure that they would not leave the accommodation facilities – occasionally through persuasion – and

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even providing meals and taking care of their daily needs. These tasks overwhelmed the capacity of the situation office alone, and the staff at the office of Assistant Chief Cabinet Secretary Furuya were also mobilized for the operation.<sup>11</sup> Initially, the health ministry maintained that the returnees from Wuhan should be allowed to go home without being tested for the virus – on the grounds that the World Health Organization had not made any judgment on such matters. Prime Minister Abe, however, ordered thorough border control measures by isolating the returnees for 14 days – believed to be the incubation period for the virus. Therefore, the situation office, not the health ministry, effectively took care of the returnees over the isolation period.

The Cabinet Secretariat anticipated a scenario in its operations that the situation office would mainly take charge of the initial response, and then the Office for influenza response would take over to share information with the other ministries involved.<sup>12</sup> Therefore, at the outset, Yoshiki Okita, deputy chief Cabinet secretary for crisis management, presided over the meeting of key members of the government's COVID-19 headquarters as its chair, while Kazuyuki Furuya, assistant chief Cabinet secretary (in charge of domestic affairs) and Satoshi Maeda, assistant chief Cabinet secretary (in charge of situation response and crisis management) served as vice-chairs to make the policy coordination and adjustments.<sup>13</sup>

“We did not know what was happening or who was our opponent. If it was as if we were blind-folded in responding to the crisis,” a high-ranking official of the government said as he recalled the initial phase of the response to COVID-19 when the nature of the infectious disease or the exact situation of the infections were unknown.

It was significant that the deputy chief Cabinet for crisis management and the situation office – at core of the government's crisis control functions – took charge of the initial response to the unknown virus that originated in China. However, people in the top echelon of the government suspected from early on that this infectious disease crisis was going to be prolonged. They could not leave the government unprepared for natural disasters or the threat of ballistic missile launches by North Korea. From around mid-February, Deputy Chief Cabinet Secretary Okita and the situation office were returned to their original tasks of focusing on those crises.<sup>14</sup> In fact, North Korea fired ballistic missiles four times in March. The leading roles in responding to the COVID-19 crisis were taken over by Assistant Chief Cabinet Secretary Furuya and Yasuhiro Suzuki, chief medical and global health officer at the health ministry, and, beginning in late March, the Office for COVID-19 Control took charge of coordinating the government's policy for the novel coronavirus.

Along with the situation office, the National Security Secretariat plays a key role in the government's crisis management system. The NSS engages in planning and drafting of Japan's peacetime national security strategy, and serves as the secretariat for the National Security Council, the framework for the nation's decision-making in times of crisis.

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It was at the instruction of Deputy Chief Cabinet Secretary Kazuhiro Sugita that the NSS was put in charge of the response to COVID-19, mainly in the area of border control measures. Immigration control is the first line of defense against the influx of infectious disease from overseas, and the NSS was given the task on the grounds that decisions needed to be made from a strategic viewpoint because border control can affect Japan's relations with other countries. Also behind the decision was the plan to set up a new team at the NSS in April 2020 to handle economic security. An office was set up in October 2019 to prepare for its creation, and that office was formally reorganized into the new team. But in fact, the new economic security team was put in charge of border control measures even before it was formally launched. As was discussed in Part II, Chapter 9, reopening travel with other countries required comprehensive strategic adjustments at the NSS because it involved negotiations with the target countries and sorting out the problem of testing capacity at airports.

The COVID-19 crisis also made plain the fact that Japan relied heavily on China for the supply of the personal protective equipment that it used. That problem highlighted the need to review the global supply chain of goods and materials essential for people's health and medical services from the perspective of the nation's economic security – exactly a job for the newly created NSS economic team. As a senior NSS official put it, business at the economic team was suddenly thriving. The NSS also intervened when the talks between the Foreign Ministry and the health ministry hit a snag over negotiations with other countries concerning vaccines and medicines for COVID-19. “It looks like some kind of a process emerged in which each of the ministries agreed to give in now that the NSS was becoming involved,” the official noted.<sup>15</sup>

Thus the Prime Minister's Office acted energetically to fulfill its role as the command tower. However, the core secretariat function of those efforts was established through a series of trial and error, which resulted in some confusion in the process. The Office for influenza response at the Prime Minister's Office, which had been established to prepare for a pandemic crisis, was unable to act quickly in the initial response to COVID-19 because its staff reacted passively to the crisis based on their rigid interpretation of the law. In the first place, the Office for influenza response lacked the preparation or the capacity to deal “blind-folded” with the threat of the novel coronavirus. Therefore, the ranking officials at the Cabinet Secretariat took the initiative to build a system to manage the infectious disease crisis. The situation office, which had rich experience coping with natural disasters but little or no experience of responding to infectious disease emergencies, was temporarily mobilized to be in charge. But that was not sustainable as its own limitations were laid bare. Therefore, the National Security Secretariat, whose main mission is drafting the nation's medium to long-term strategies, had to be quickly involved to be in charge of border control measures and the procurement of goods and materials. The response by the Prime Minister's Office to the COVID-19 crisis was thus marked by emergency escape – or makeshift – steps.

#### 1.4. Politicians and scientists

In the fight against a virus, an “invisible enemy,” each country needs to mobilize all of its medical and scientific resources. Politicians need to respect the wisdom and experience of the experts in these fields and take measures to combat infections from the virus based on scientific grounds.

However, science does not resolve all of the uncertainties over virus infections in a pandemic. Scientists are expected to judge whether the risk is within the allowable range based on scientific rationality, and make an accurate assessment of the uncertainty even if the truth turns out to be inconvenient for politicians.

On the other hand, politicians have the duty to attend to the social and political interests of the nation as a whole, including people's lives and health, their livelihood and the economy, as well as subjective aspects – meaning people's sense of security and expectations.

Thus, in a crisis, the policy objectives of politicians and scientists do not necessarily align with each other. Therefore, whether the politicians and the scientists can build mutual trust and engage in candid dialogue in a national-level crisis is a key factor that makes or breaks a nation's efforts to manage the crisis. The analysis and recommendations made by experts are, after all, pieces of advice to contribute to the decision-making by politicians. The final decision rests with the politicians, not the experts.

In its response to the latest crisis, the Prime Minister's Office effectively transferred a group of experts in infectious diseases, who had been gathered for an advisory board at the health ministry, to the jurisdiction of the government's COVID-19 headquarters set up at the Cabinet Secretariat,<sup>16</sup> so that the government could proactively reflect the experts' opinions in its decision-making and pursue policy measures against the novel coronavirus based on scientific grounds. Particularly, in declaring a state of emergency based on the special measures act on April 7, and in setting the standard for reducing people's contact with others – as Prime Minister Abe asked the public to reduce such contacts by “at least 70 percent and as close as possible to 80 percent” – the Prime Minister's Office respected the views of the experts to a significant degree, despite the associated political risk, and sought to strike a balance between minimizing the risk of expanding infections and maintaining economic activities. This was a symbolic example of collaboration between politics and science functioning well in the fight against COVID-19 (See Part III, Chapter 5).

On the other hand, the Prime Minister's Office made some decisions without heeding the experts, such as in calling for the nationwide closure of schools at the end of February and distributing gauze masks to all households, while leaving the job of risk communication with the public – the government's task in the first place – in the hands

of members of the Expert Meeting on the Novel Coronavirus Disease Control. And as public unease and discontent grew with the self-restraint of their activities over an extended period as well as the economic damage, gaps and tensions began to grow between the two parties. A senior official in the Cabinet Secretariat confided that the presence of the experts was appreciated but sometimes felt “unwelcome.”<sup>17</sup> The expert panel was abolished on June 24 and reorganized to explore a new role.

There are times when science and politics collide with each other, and gaps emerge between safety and the sense of security. The COVID-19 crisis exposed many problems to be resolved in how politicians harmonize the differences and make final decisions.

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## **2. Examining the decisions driven by the Prime Minister's Office**

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In responding to COVID-19, the Prime Minister's Office took the initiative to make a judgement on various issues in which the government had to deal with an unprecedented emergency and the complicated interests of multiple ministries involved had to be sorted out. In this section, we explore its judgment-making process in a few symbolic cases.

### **2.1. Repatriation of Japanese stranded in Wuhan: First operation driven by the Prime Minister's Office**

The administration of Prime Minister Abe strengthened the policy-making process led by the Prime Minister's Office. That function was first put to the test in the operation to repatriate the Japanese stranded in Wuhan from late January. Initially, the health ministry was hesitant about isolating the returnees – restricting their movements for an extended period – on the grounds that the WHO had yet to make a sufficiently proven judgment on the human-to-human infections of the novel coronavirus. Therefore, the health ministry was planning to allow the returnees to go home upon their arrival at the airport on chartered flights. But the plan was reversed by the Prime Minister's Office, which decided to ask for a 14-day isolation for all returnees. The situation office of the Cabinet Secretariat was put in charge of arranging for accommodation for the returnees (including Hotel Mikazuki in Katsuura, Chiba Prefecture and the dormitory of the National Tax College in Wako, Saitama Prefecture), as well as attending to the daily needs of returnees. This decision proved effective in preventing the spread of the infection into Japan, and contributed to assuring the public against the threat of COVID-19.

## **2.2. Chinese President Xi Jinping's state visit and the Tokyo Olympic and Paralympic Games: "Diplomacy of waiting"**

When the first confirmed case of infection aboard the cruise ship Diamond Princess was reported on Feb. 5, a senior official of the Cabinet Secretariat expressed concern that an explosive growth in infections would endanger the planned state visit by Chinese President Xi Jinping, which would also make it uncertain whether the Tokyo Olympic Games would be held as scheduled.<sup>18</sup> The remark, as recounted by the official himself, suggests that the leadership at the Prime Minister's Office was seriously worried as early as this point that the Abe administration's biggest political challenge and events of 2020 could be derailed: the COVID-19 crisis might seriously affect the Tokyo Olympic and Paralympic Games, the events that could potentially symbolize the start of the Reiwa Era, and the visit of Xi as the second state guest of the new era following U.S. President Donald Trump.

Aides to the prime minister were no doubt worried that how the government responded to COVID-19, or the spread of the infection itself, would impact that political agenda and timetable. But also behind the government's initial decision to ban the entry only of holders of Hubei province (which includes Wuhan) passports (extended later to cover Zhejiang province) – instead of China as a whole – was its policy of minimizing restrictions on international travel based on International Health Regulations. It was also technically possible to limit the travel ban to people from the areas in China where infection was growing, because Chinese passports were issued by each of its provinces.

"It was impossible for us to send a message to China" about postponing Xi's state visit, "so we had to wait for them to start saying it. The February 28 visit by Yang Jiechi, a Politburo member of the Chinese Communist Party, was exactly such an occasion," said a staff member at the Prime Minister's Office. The time spent before China's overture was necessary for Japan's diplomacy of "waiting" to become ripe.

Meanwhile, calls for postponing the Tokyo Olympic and Paralympic Games were growing from among organizing committees and athletes' associations in the United States and other countries. Some of the key officials at the Prime Minister's Office hesitated to make the decision to put off the Tokyo Games – and Prime Minister Abe himself held out hope for holding the games until the last minute, according to people who gave interviews for this report. That, however, does not mean that the Prime Minister's Office intentionally neglected or diluted measures to combat COVID-19, including border control measures and PCR tests, to avoid affecting the timetable for those events.

### **2.3. Calls for self-restraint on large-scale events and nationwide closure of schools: “Have you already made the decision?”**

In mid-February, novel coronavirus infections – believed to have been transmitted by tourists from overseas who came to see the annual snow festival in Sapporo – spread rapidly all over Hokkaido, generating infection clusters even in areas far from Sapporo. After brothers who attend an elementary school in the town of Nakafurano were found to have been infected on February 21, Hokkaido Governor Naomichi Suzuki requested the local board of education on February 26 to close all elementary and junior high schools, and two days later, the prefectural government declared its own “state of emergency.” And as local governments took these steps to address people’s unease about COVID-19 infections, the Prime Minister’s Office was growing jittery that the national government had to take some action.<sup>19</sup>

What prompted the national government action was the statement made by the panel of experts on February 24 that the nation was at a critical juncture over the next week or two as to whether infections would rapidly expand or could be contained. Two days later, Prime Minister Abe told the 14th session of the government’s COVID-19 headquarters that it would request organizers of national-level sports and cultural events attracting large numbers of people in the following two weeks to either cancel, postpone or scale down the events, given the risk that such events could cause large-scale infection.<sup>20</sup>

Then Prime Minister Abe decided on calling for a nationwide closure of schools. At the 15th session of the government headquarters held on February 27, Abe called on all elementary, junior high and high schools as well as special education schools across the country to temporarily close beginning the following week through the spring vacation period.<sup>21</sup> That decision came out of the blue for the Education, Culture, Sports, Science and Technology Ministry, and very few people at the center of government were in fact involved in making the decision. By the day before Abe made the announcement, government officials were said to have reached a rough consensus that the decision to close schools would be left up to each local authority. It was people close to the prime minister who changed the course in favor of a uniform closure of schools nationwide.

On the afternoon of February 27, Prime Minister Abe called up education minister Koichi Hagiuda and vice education minister Makoto Fujiwara to the Prime Minister’s Office. When Hagiuda asked Abe if he had already made the decision, and Abe nodded, the education minister further asked him if the decision covered all schools nationwide. The prime minister told Hagiuda that with the situation as it was, the government could not close schools in Tokyo alone.<sup>22</sup>

At the time, when a lot about the novel coronavirus was still unknown, the decision was made without consulting the panel of experts as to what effects the nationwide closure of schools would have in containing COVID-19 infections. Many

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parents, especially single parents, were left discontent and bewildered that they had to take time off from their jobs as they needed to take care of their children at home now that schools were closed. The education ministry was also kept busy responding to inquiries from education officials across the country.

At the same time, not a few parents were feeling uneasy about their children going to school as infections were spreading throughout Japan. Among government officials, Prime Minister Abe was most seriously concerned about the possibility of infection clusters emerging at schools and causing a panic, and the subsequent risk of the children infecting their elderly relatives at home. “Protect the children,” Abe is said to have told a senior education ministry official when he relayed the decision to request the nationwide closure of schools. As a consequence, large-scale infection clusters originating at schools and spreading among elderly residents did not emerge, and the prime minister’s decision was favorably accepted by the public.<sup>25</sup>

Education minister Hagiuda said as he recalled the decision at the end of February, “As of now (in late September), it is not yet clear whether the decision to close schools nationwide was right or wrong. But I believe that the decision radically changed people’s awareness. After that, people began to think wearing masks was a must, and many other countries took steps to close their schools.”<sup>26</sup>

### **2.4. Declaration of a state of emergency: the prime minister’s most difficult decision**

Looking back on the Japanese government’s response to COVID-19, Prime Minister Shinzo Abe said that by far the most difficult decision was declaring the state of emergency. “We had a lot of debate. There were significant calls for caution out of consideration for the economy. Since (Tokyo) Governor Yuriko Koike used the term ‘lockdown,’ we needed to correct the misunderstanding. We had to wipe that off once and for all. Under the special measures act, [government measures to contain the infections] would be useless without the cooperation of all the people. To make sure that the measures would be effective, we needed to synchronize our efforts with the public’s sentiments. That was the difficult part,” Abe told an interview for this report.<sup>27</sup>

According to a senior official in the Cabinet Secretariat, Abe began to weigh declaring a state of emergency around the time he announced on March 24 that the Tokyo Olympic and Paralympic Games would be postponed for a year. A major turning point for the decision, said Nishimura, minister in charge of the COVID-19 response, was Governor Koike’s reference the previous day, on March 3, to the possibility of a “lockdown.” The Prime Minister’s Office became concerned that people panicked in fear of a lockdown might rush out of Tokyo and consequently spread the infection to other parts of the country. A state of emergency would not impose a lockdown as enforced in Europe and North America. The government needed to prepare to explain and get the

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public to understand that they would be able to lead a normal life in Tokyo even under a state of emergency.<sup>28</sup> “We needed time to tell people and have them understand that it was not going to be a lockdown and they could lead a normal life in Tokyo, but that they would be asked to voluntarily refrain from some activities and close the shops. I think that as a result, the declaration of the state of emergency was delayed,” Nishimura said.<sup>29</sup>

Abe and Nishimura spent the weekend of March 28 and 29 coordinating the policy for a state of emergency. Beginning March 30, Nishimura discussed with the experts on concrete adjustments for issuing the declaration. On April 1, the panel of experts reported that the “doubling time” in the spread of COVID-19 infections, the days it took for the cumulative number of people infected to double, was reaching levels close to European and North American countries severely hit by the pandemic. That was the final straw that changed gears for declaring the state of emergency.<sup>30</sup>

Along with balancing efforts to contain the infection with maintaining social and economic activities, struggles at the Prime Minister's Office included adjusting the powers with prefectural governors. Under the special measures act, the power to issue requests for people to stay home and suspend their business activities belongs to prefectural governors.<sup>31</sup> This hampered the adjustments between the national government and the Tokyo Metropolitan Government. Nishimura anticipated that after the state of emergency was declared, the government would first ask people to stay home and then, after changes in the trend of infections were monitored, businesses would be requested to close their shops if necessary. Koike, meanwhile, was increasingly alarmed that Tokyo was at a critical stage before infections would surge out of control, and that the issue at hand directly concerned the lives of Tokyoites. Since she had been given daily reports that the medical service system in the capital was under increasingly serious strain of dealing with COVID-19,<sup>32</sup> the governor believed that businesses should be urged to close simultaneously with the declaration of the state of emergency. After Koike abruptly declared that her office would make such requests for businesses in Tokyo, the national government had to hold talks with the metropolitan government. Although the two parties struggled to bridge their differences, Koike and key members of the Prime Minister's Office finally reached a compromise that restaurants and “izakaya” bars would be called on to shorten their business hours<sup>33</sup> (see Part III, Chapter 7).

According to Prime Minister Abe, there were significant calls for caution against declaring a state of emergency at the time, out of concern over the effects on the economy. Chief Cabinet Secretary Suga was the key figure who raised such alarm, worried that the economy, in particular economically weak members of society, would face enormous damage. Suga, who campaigned for raising the nation's minimum legal wages, was “consistently concerned about the damage to the economy,” said a senior official in the Cabinet Secretariat.<sup>34</sup> On the other hand, Nishimura was among those who pushed for declaring a state of emergency, mirroring the expert panel's grave assessment of the situation of COVID-19 infections.

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The measures to contain COVID-19 infections needed to be packaged with measures to shore up the economy. At the Prime Minister's Office, Abe and his aides, Suga, Furuya, assistant chief Cabinet secretary for domestic affairs, Nishimura and the staff at the "Office for COVID-19 Control" primarily took charge of making the adjustments. Before the state of emergency was declared, Furuya's office, the Finance Ministry, the Ministry of Economy, Trade and Industry, the ruling coalition parties and others pitched various proposals for the economic package. Earlier, the measures against infections and the economic measures had been discussed on different tracks. It was just a few days before the state of emergency was declared that Prime Minister Abe decided to combine those measures in a package.<sup>35</sup>

The declaration of the state of emergency was the first case in which the Prime Minister's Office pursued a major strategic approach. For the first time, the framework of the two-front approach of dealing with both the infectious disease crisis and the economy was established. However, those measures had each been prepared on different tracks, and creating a function to integrate those efforts was delayed. The division of power and responsibility between the national government and prefectural governors was left unclear under the special measures act, hampering the adjustments between the Prime Minister's Office and the Tokyo Metropolitan Government. Still, the government managed to declare the state of emergency at the last possible timing in cooperation with the expert panel, and was able to package measures to contain infections with the steps to support the economy at the final stage.

### **2.5. Lifting of the state of emergency: "Negotiations" between the Prime Minister's Office and the expert panel**

When the state of emergency was declared, the Prime Minister's Office and the experts shared a sense of crisis over the expansion of COVID-19 infections, and pursued the same objective of containing the infections. As the government explored lifting the state of emergency, however, gaps and differences began to emerge with greater frequency between the Prime Minister's Office and members of the Expert Meeting on the Novel Coronavirus Disease Control. The confrontation between the experts of infectious diseases – who pursued thorough measures to contain the infections as close as possible to zero – and the Prime Minister's Office – increasingly concerned over the economic damage from extending the state of emergency – deepened over when and under what criteria the state of emergency should be lifted.

The focus of exchanges between the Prime Minister's Office and the experts was the criteria for lifting the state of emergency. As for the epidemiological situation of the infections, the experts insisted that the emergency should be lifted if the cumulative number of new infections over the latest two weeks fell below 0.5 per 100,000 population. The Prime Minister's Office, however, felt that the criteria was too stringent – a senior

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official recalled feeling that the state of emergency would never be lifted if the views of the experts were followed<sup>36</sup> – and was strongly worried that the economy would sustain irreversible damage if the state of emergency were to continue much longer.

The “negotiation” (as one member of the expert panel put it) between the Prime Minister’s Office and the experts came to a compromise as the criteria was eased to the cumulative number of new cases over the past one week falling below 0.5 per 100,000 population. A “proviso” attached to their agreement said that “comprehensive judgment will be made” in view of the emergence of infection clusters and hospital-acquired infections, as well as the outbreak of new cases whose infection routes were not known, “even if the number of new infections remained above that level.” The Prime Minister’s Office accepted some of the experts’ arguments, but the compromise also reflected its intentions to leave room for political decisions – in the form of “comprehensive” judgment that was not bound by fixed numerical standards. This was yet another example of the Prime Minister’s Office managing to push through its position in the COVID-19 response.

### **2.6. Distribution of gauze masks to all households: “Abenomask”**

Distribution of a pair of gauze masks to all households across Japan – which came to be known as “Abenomask” after Prime Minister Abe announced it at the April 1 meeting of the government headquarters – was a measure decided by people close to the prime minister without sufficient prior consultation with the health ministry or METI. Behind the measure was the acute shortage of disposable masks on store shelves over the past few months. In the final week of January, roughly 900 million masks in stock in Japan were sold out. The government called on Japanese manufacturers to shift their production to surgical masks, but the products that were delivered from their plants in China did not fully reach the shelves at retail stores as some of the products were held back in the distribution process.

Therefore, in March, close aides to the prime minister came up with the idea that importing gauze masks in large volumes and distributing them to the people would bring down the prices of masks and increase their distribution in the market. Thus was the measure for distributing gauze masks to all households adopted. As Prime Minister Abe told the government’s COVID-19 headquarters, the government first delivered surgical masks to medical institutions and gauze masks to welfare facilities for the elderly and people with disabilities as well as elementary and junior high schools across the country.<sup>38</sup>

In addition to the priority distribution of masks to medical institutions and other facilities, the aides to the prime minister anticipated that the distribution of gauze masks to households would adjust the domestic supply and demand.<sup>39</sup> At the April 28 session of the Lower House Budget Committee, Abe said that distribution of the gauze masks was

“effective in containing surging demand for masks” and that “there was indeed a certain impact on the mask market, and some people in the business appreciate that the measure had the effect of causing the mask prices to collapse.” Abe went on to note that Takahisa Takahara, president of Unicharm Corp., which the government had asked to increase its mask production, told him that the distribution of gauze masks to households, along with the increased output by Japanese firms, would hopefully deal with the surging demand for masks. “I’m hoping that such effects will begin to emerge,” the prime minister told the Diet.

However, the distribution of gauze masks to all households met with criticism from the public and opposition parties. Many people charged that the government should prioritize the delivery of cash handouts instead.<sup>40</sup> “It’s called the Abenomask on the internet. It’s the worst example of an impulsive, makeshift policy measure,” said Koichi Matsudaira of the Constitutional Democratic Party of Japan as he lashed out against the measure during the April 2 plenary session of the Lower House. Furthermore, distribution of the masks took so much time. At the May 20 session of the Lower House Cabinet Committee, CDP lawmaker Yuki Waseda said, “Many people tell me that they no longer want the Abenomask at all, because there is already an adequate supply of masks.” (See Part III, Chapter 8)

The “Abenomask” was yet another example of policy measures adopted as part of a top-down decision at the Prime Minister’s Office. It is certain that the measure was aimed at lowering the prices of masks amid tight supply and demand (as Abe put it in the Diet) – and it did have such an effect to an extent. Evaluation of the measure would have been far different if the masks were delivered to the households by mid- to late-April, when people needed masks most acutely. The greatest problem was that the measure was announced prior to the emergency economic package and the cash handout to people unveiled a week later, on April 7, as if the mask distribution were a measure intended for political surprise separate from the government’s whole COVID-19 efforts. That gave the impression that the first step the government was taking to support people hit by the crisis was to distribute a pair of gauze masks to each household. The measure was full of problems in terms of policy communication. “Some members of the office of the prime minister charged ahead. That was a failure,” a staff member of the Prime Minister’s Office said in looking back on the measure.<sup>41</sup>

## **2.7. The “Go To” campaign**

The strong policy intention of the Prime Minister’s Office is reflected in its pursuit, from the early stage of the COVID-19 crisis, of containing the infection and minimizing the economic damage at the same time, or its policy of seeking to protect both people’s lives and livelihood.

The panel of experts had no objections to trying to protect both people's lives and livelihood. Rather, the experts included economists in the panel so that they could better pursue the twin objectives by incorporating their knowledge and models into the panel's discussions. However, how to reconcile the two objectives – which can be mutually contradictory because they are both justifiable – belongs to the sphere of high-level political judgment. This time, the Prime Minister's Office made that sort of political call.

The emphasis on the economy became evident in the dispute between the Prime Minister's Office and the expert panel over the criteria for lifting the state of emergency as part of the decision-making process that began right after the Golden Week holidays in early May to explore ending the state of emergency. It was demonstrated even more clearly as the government launched the "Go To" campaign in the summer.

The tourism, passenger transport and restaurant/bar sectors suffered particularly serious damage to their businesses during the state of emergency. Even after the state of emergency was lifted, demand for travel and dining out remained depressed as people's worries over the spread of infections failed to dissipate, and the Prime Minister's Office was increasingly concerned that the Japanese economy would fall into a critical condition unless some measures were taken to stimulate such demands. Thus the preparations began in late May – after the state of emergency was lifted across the country – for the Go To campaign to boost domestic consumer demand. The campaign consisted of four areas – "Travel" to stimulate tourism demand; "Eat" to support restaurants and bars; "Event" to promote cultural/arts/sports events; and "shopping streets." The Land, Infrastructure, Transport and Tourism Ministry, the Agriculture, Forestry and Fisheries Ministry, and METI each took charge of the measures for the sectors under their respective jurisdiction, and ¥1.6794 trillion was set aside in the first supplementary budget in fiscal 2020 to pay for the campaign.

Whether the timing was appropriate for launching the Go To campaign, as well as whether sufficient steps were taken to ensure against increasing the infections, needs to be continuously monitored.

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### **3. Best practices and challenges**

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A senior official in the Cabinet Secretariat acknowledged that the Prime Minister's Office, when it was confronted with the novel coronavirus disease, did not have a foundation on which to build a command tower function in dealing with the pandemic – indicating that it had not been prepared for such a crisis. The Prime Minister's Office explored its response to COVID-19 through trial and error, hastily setting up a liaison meeting with the prime minister and the task force. The Office for influenza

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response, which was supposed to serve as the secretariat in these efforts, did not fulfill its function in practice.

Still, the Prime Minister's Office somehow managed to respond to the crisis within the framework of the special measures act, making quick decisions that exceeded the realm of policy coordination. Efforts over the years since the administrative reforms under the administration of Prime Minister Ryutaro Hashimoto to develop and consolidate the functions of the Prime Minister's Office have borne fruit. What is most important in surviving a national crisis is to deal with the emergency in a whole-of-government approach, and the biggest obstacles to such an approach are the government's vertical divisions along ministerial lines and the organizational culture that breeds such divisions. Policy decisions led by the Prime Minister's Office, including building the command tower function, are essential to controlling a national-level crisis.

The greatest miscalculation in the government's response to COVID-19 was that the health ministry, which oversees the fight against infectious diseases and was supposed to effectively serve as the secretariat for a command tower in dealing with the novel coronavirus, lacked sufficient preparedness for a pandemic. The ministry was not adequately prepared in terms of manpower and expertise, data, training, the crisis management system or in anticipating the "worst-case scenario." That was evident from the recognition that health minister Katsunobu Kato relayed to Chief Cabinet Secretary Yoshihide Suga that his ministry was "not up to the task" in dealing with the Diamond Princess situation.<sup>42</sup>

In trying to make up for the limitations of the health ministry's capabilities, the Prime Minister's Office flexibly mobilized its task force to secure surge capacity in responding to COVID-19.

It is time to review once again whether Japan's central bureaucracy and its legal systems are adequately prepared for an emergency.

What were the best practices in the response by the Prime Minister's Office to COVID-19?

First, it basically respected the opinions of experts in adopting government measures both when it declared and lifted the state of emergency. Members of the expert panel also contributed their expertise in infectious diseases to assist the assessments made by the Prime Minister's Office. They also served their mission with a strong sense of responsibility toward society.

It is undeniable that various problems existed in the collaboration between the Prime Minister's Office and the experts (see Part III, Chapter 5). But in the face of the difficult challenge of how to make the most of scientific advice to political leaders in times of a national crisis, Japan's politicians and scientists who responded to the COVID-19 crisis explored a partnership through trial and error. It was quite rare that politicians

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and scientists in Japan were able to build such a practical united front in fighting a national crisis.

Cooperation between the Prime Minister's Office and experts does not simply mean politicians accepting advice from the experts. As seen in the discussions over the criteria for lifting the state of emergency, the Prime Minister's Office and members of the expert panel engaged in tense "negotiations." In making its decisions, the Prime Minister's Office has to listen open-heartedly to the views of the experts, while the experts should not hesitate in exploring ways to contribute their knowledge and expertise to the making of government policies and measures. "Negotiation" is an inevitable process of exchanging the interests and wisdom of both parties. The Prime Minister's Office was also aided by the broad international perspectives and rich practical experience of Shigeru Omi, deputy chief of the expert panel (who was later tapped as chair of the government's Novel Coronavirus Disease Control Subcommittee).

Omi himself said as he recalled his own experience, "The national government was doing all it could. It was doing the best it could in dealing with the cruise ship [Diamond Princess] situation. An important task of the government is to respond to individual problems that emerge each day. Medium- to long-term policies and risk communication are also important, but the government is responsible for putting out the fire when it breaks out. That's where we are different. In that respect, I believe the government was doing the best it could. I think a fair evaluation should be made of that point." (See the special interview with Shigeru Omi)

Second, the Prime Minister's Office, confronted with the unanticipated crisis of a pandemic, managed to build a command tower function through trial and error, setting up liaison meetings with the prime minister and the task force. It promptly amended the special measures act and endeavored to control the crisis under the rule of law. As health minister Kato explained in his interview for this report, the government took a "soft" approach in attempting to contain the infection, declaring the state of emergency under a democratic scheme while protecting human rights. The Prime Minister's Office mobilized "all resources available" (according to Chief Cabinet Secretary Suga), reinforcing insufficient manpower at the health ministry by sending in large numbers of help from other ministries to secure the surge capacity to respond to the emergency. It also helped that many of the staff at the Prime Minister's Office had built up rich experience and knowledge in dealing with emergencies under Abe's long-running administration, although responses to natural disasters and pandemic differ in various respects.

Third was the operation to repatriate Japanese stranded in Wuhan under the lockdown. The prompt actions and smooth negotiation with Chinese authorities in arranging for chartered flights out of Wuhan were enabled by the initiatives taken by the Prime Minister's Office.

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COVID-19 was a crisis that hit the whole world simultaneously, which raised the most serious crisis management challenge for the government – how to secure the lives and health of Japanese trapped overseas as countries across the globe restricted cross-border travel. In dealing with that challenge, Japan's favorable relations with both the United States and China even as U.S.-China confrontation intensified, and in particular the government's success in stabilizing and maintaining diplomatic relations with Beijing, contributed to a smooth operation to fly the Japanese out of Wuhan. When you have to deal with the rest of the world in a global crisis, you can't rely solely on the functions and processes of international organizations. Relations with individual countries, especially diplomatic ties with major powers matter a great deal. The government should be applauded for the successful implementation of this operation, especially as it was among the first actions taken in response to COVID-19.

On the other hand, the COVID-19 crisis exposed many problems in the government's response.

First was a lack of preparedness. The Prime Minister's Office had neglected to anticipate all possible patterns in the onslaught of a pandemic, including the "worst-case scenario."<sup>44</sup> In the first place, it had not anticipated that a full-scale pandemic would hit Japan. Neither its action plan nor training was practical. It should have prepared a "worst-case scenario" assuming the outbreak of an infectious disease that was hard to eliminate because it was transmitted even by asymptomatic carriers – like the novel coronavirus.

In this crisis, you have to prepare for the anticipated future waves of large-scale infection. Since an infectious disease is invisible, it is hard to have an image of its damage. To fight an infectious disease crisis, people at large need to change their own behavior. This is a type of crisis in which an individual's own behavior could ruin his or her own life. Controlling the crisis required the government to supply financial and fiscal support such as cash handouts and special loans to protect people's livelihood while urging them to join a change in public behavior. The conventional ways of crisis management may still work to some extent, but most of the measures needed to combat this type of crisis are new to the government. It needs to prepare for managing the worst possible case of a pandemic crisis.

The second problem is that, on the flip side of the policy initiatives driven by the Prime Minister's Office, communication with each of the ministries and their departments that carry out the measures proved insufficient, and gaps emerged in the actual execution of measures. For example, the call for closing schools nationwide was made in a top-down decision by Prime Minister Abe and his office without prior consultation with either the experts or the education ministry. The move caused a lot of confusion among people involved in school education because the measure was applied to schools throughout Japan – even though COVID-19 infections at that point were still limited to certain regions of the country, and there were not enough scientific grounds showing such a step would be effective in containing infections.

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Under the School Education Law, the decision to close schools rests with the parties that set up those schools, and the prime minister's call to shut them down was made in the form of a nonbinding "request." But confusion ensued because it was taken as an instruction from the top government leader. Prime Minister Abe made the top-down decision for the nationwide closure of schools with an intention to protect children and prevent infections spreading to their elderly relatives. But the decision was problematic in that it was implemented without fine-tuning its details, such as what to do with after-school care for children (matters under the health ministry's jurisdiction) once the schools were closed or support for food delivery service firms that suffered losses from the suspension of school lunches.

Right after the measure was carried out as a top-down decision, the government came under severe public criticism for the closure of schools nationwide (although a majority of the public opinion later came to accept the move as "inevitable"). Later on, some officials in the Prime Minister's Office, concerned with the rapid growth of infections in Europe, considered banning travel to European countries, mainly targeting university students on vacation before graduation. However, that idea was quietly pushed aside as it was deemed that the public would not accept any further restrictions on their activities. The hasty top-down decision in calling for a nationwide closure of schools was accompanied by a heavy political cost, which led the government to miss an opportunity to prevent an influx of infection from Europe. "We should have taken the step to prohibit travel to Europe at the time. We regret that the most," said a staff member in the Prime Minister's Office.

Abenomask became a target of people's ridicule because of the poor methods of public communication over the measure. The objectives of the measure were never fully understood by people irritated about COVID-19, and instead provided useful ammunition for criticizing Abe's administration. Playing up the top-down decision by the Prime Minister's Office had the effect contrary to that which was intended, and ate up the resources of the administration.

Quick decision-making is needed in dealing with a crisis. Unlike decisions made in normal times on the basis of precedents, leaders are often required to make top-down judgments on difficult issues. But as a side effect of the speedy decision-making process, such decisions always carry the risk of causing confusion and objections among the parties who normally would have been consulted in advance. The decision calling for the nationwide closure of schools was problematic in that it lacked adequate communication between the Prime Minister's Office and the expert panel – the officials did not consult the experts about the decision. Politicians do have the option of making political decisions that do not follow the advice of experts. Such decisions do need to be made on occasion. But in doing so, both parties need to engage in even more careful dialogue.

In making a top-down policy decision led by the Prime Minister's Office, officials need to realize both its benefits and possible side effects, and take careful steps to ensure smooth cooperation and implementation of the decision by providing adequate

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explanation, even after the fact, to the parties involved and minimizing the execution and public relations risks.

### Notes

1. Interview with a high-ranking government official
2. This was renamed conference of ministers related to countermeasures for pandemic influenza and new infectious diseases with the 2012 enactment of the Act on Special Measures for Pandemic Influenza and New Infectious Diseases Preparedness and Response.
3. Article 6, Clause 7 of the Infectious Diseases Control Law
4. Re-emerging influenza is a term that refers to types of influenza, like the Spanish flu, that once spread on a global scale but have since not seen an outbreak over a long period (“Article-by-article explanation: The Act on Special Measures for Pandemic Influenza and New Infectious Diseases Preparedness and Response” Chuohoki, 2013)
5. Article 6, Clause 9 of the Infectious Diseases Control Law
6. [https://www.cas.go.jp/seisaku/ful/pdf/191108\\_00\\_kunren.pdf](https://www.cas.go.jp/seisaku/ful/pdf/191108_00_kunren.pdf)
7. Interview with a Cabinet Secretariat official
8. Hideki Tarumi was appointed administrative vice minister of health, labor and welfare on September 14 after serving as head of the Cabinet Secretariat's Office for COVID-19 Control.
9. Article 15, Clause 2 of the Cabinet Act: The deputy chief Cabinet secretary for crisis control assists the chief Cabinet secretary and deputy chief Cabinet secretaries and administers the tasks cited in Article 12, Clause 2-1 to 2-6 that concern crisis management (responding to and preventing an emergency situation that causes or could potentially cause grave damage to people's lives, health and properties, except for matters that concern national defense).
10. Interview with a senior Foreign Ministry official
11. Interview with a senior Cabinet Secretariat official
12. Interview with a senior Cabinet Secretariat official
13. January 30, 2020 decision by the chief of the government's COVID-19 headquarters “About the designation of official positions that serve as key members of the headquarters on response to the novel coronavirus
14. Interview with a high-ranking government official
15. Interview with a senior official of the National Security Secretariat
16. Decision was made at the 9th meeting of the government's COVID-19 headquarters on February 14 to launch the Expert Meeting on the Novel Coronavirus Disease Control, with the first meeting of the expert panel held on February 16.
17. Interview with a senior Cabinet Secretariat official
18. Interview with a senior Cabinet Secretariat official
19. Interview with a senior Cabinet Secretariat official
20. [https://www.kantei.go.jp/jp/98\\_abe/actions/202002/26corona.html](https://www.kantei.go.jp/jp/98_abe/actions/202002/26corona.html)
21. [https://www.kantei.go.jp/jp/98\\_abe/actions/202002/27corona.html](https://www.kantei.go.jp/jp/98_abe/actions/202002/27corona.html)
22. Interview with a staff member in the Prime Minister's Office
23. Interview with Prime Minister Shinzo Abe (September 11): Interview with education minister Koichi Hagiuda (September 24)
24. Interview with a staff member of the Prime Minister's Office
25. In a public opinion survey released by the Yomiuri Shimbun on March 22, 64 percent of the respondents said they thought the government's request for a temporary closure of elementary to high schools nationwide through the spring vacation was appropriate, outnumbering the 28 percent who said they did not think so. A March 22 opinion survey by TV Asahi's Hodo Station news program also showed that 62 percent of respondents gave a positive evaluation to the government's request for school closure, compared with 27 percent who did not support the move.
26. Interview with education minister Hagiuda (September 24)
27. Interview with Prime Minister Abe (September 11)

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28. Special interview with Yasutoshi Nishimura, minister in charge of the government's COVID-19 response (September 15)
29. See Part II, Chapter 4 for details
30. Interview with a senior health ministry official
31. Article 45 of the special measures law
32. News conference by Tokyo Governor Yuriko Koike (April 10)
33. Interview with a staff member in the Prime Minister's Office. For more details of the process, see Part II, Chapter 4.
34. Interview with a senior Cabinet Secretariat official
35. Interview with a senior Cabinet Secretariat official
36. Interview with a senior Cabinet Secretariat official
37. See Part II, Chapter 5 for details.
38. Remark by Prime Minister Abe at the 25th meeting of the government's COVID-19 headquarters (April 1)
39. Interview with a staff member in the Prime Minister's Office
40. Huffington Post (April 1), "Prime Minister Abe announces distribution of a pair of gauze masks to all households: People say they want uniform distribution of cash"
41. Interview with a staff member in the Prime Minister's Office
42. Interview with a senior Cabinet Secretariat official
43. See Part III, Chapter 1 for details