

INSS Insight No. 1299, April 14, 2020

From Containment to Victory—from Lockdown “Slavery” to Economic Freedom

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The current phase of Israel’s battle against the coronavirus focuses on curbing the spread of the pandemic and “flattening the curve” of serious illness, to prevent overloading the health service—which could lead to its collapse and to very high mortality levels. Like the thinking underlying Israel’s national security concept, the defensive alone will not lead to victory. The policy proposed here is based on three principles that differentiate it from the policy of the containment phase: (a) The main effort will move from containing the pandemic at the expense of the economy to renewal of economic activity while preventing further outbreaks; (b) The method of imposing sweeping restrictions on the public as a whole will be replaced with differential moderation for population segments, according to their risk of serious morbidity (underlying chronic illnesses, age, place of residence); (c) Alongside the measures to protect vulnerable populations from infection and to prevent carriers and outbreak hotspots from infecting others, there will an increased effort to locate people who have naturally acquired immunity to the virus. The Israeli government should prepare for a gradual and controlled relaxation of restrictions on movement, work, and assembly, and plan the return to economic and social activity for populations with an acceptable risk level, within a reasonable time frame.

The current phase of Israel’s battle against the coronavirus focuses on curbing the spread of the pandemic and “flattening the curve” of serious illness, to prevent an overload of the health service, which could lead to its collapse and to very high mortality levels. The battle to contain the virus is currently based on a range of efforts and restrictions on both the medical and economic front. The government imposed a series of severe restrictions, including a full curfew on Passover eve. These measures were probably correct at the time and have apparently helped delay the spread of a virus that was conquering more and more sectors of Israel’s population and economy. However, as with the thinking underlying Israel’s national security concept, the defensive alone will not lead to victory. In the corona battle, the purpose of the counteroffensive is to repulse the virus, liberating and clearing parts of the population, towns, and economic and social sectors, toward a broad renewal of economic, business, civilian, and governance activity, at a tolerable cost in national and ethical terms.

The picture highlighted in the media over the past weeks focuses on stories about corona fatalities and the rate of contagion, but that is a weak basis for making decisions at the national level, first, because it deals with details rather than with the general situation, and second, because limited numbers of tests and the focus of these few tests mean that the picture is neither up-to-date nor comprehensive. The key element to be monitored is in fact the rate of increase in the number of seriously ill patients, versus available capacity for intensive care and ventilation. A more penetrating examination should go beyond the broad generalizations to a breakdown of the seriously ill by age, underlying medical conditions, morbidity hotspots, lifestyle (smoking, alcohol abuse), and the duration of ventilation required until recovery (or death).

If we continue with the efforts to curb the virus in order to reduce the infection rate (R_0) to below 1, then presumably we can destroy the virus, because if each carrier infects less than one other person, the rate of infection gradually declines to zero. Thus we could conduct thousands of tests to locate the virus in the population, and particularly in people with relevant symptoms, and immediately isolate everyone who tests positive. If the test shows that he is not a carrier, we will test him again if the symptoms of coughing or temperature reappear, or after his next exposure to a sick person who coughs near him. The problem is that this approach is not a viable strategic policy, for three reasons:

- a. The presence of the virus and the period of contagion could continue for months or even years, and quarantining the whole population for such a long time is unrealistic.
- b. Until the desired result is achieved, the economy will collapse, and with it businesses, social resilience, education, medical staff, and so on. In this situation, public health will also be affected, even if not directly by corona, and it will be a Pyrrhic victory for a country that commits economic suicide.
- c. Even if the virus is contained within Israel, it will quickly return once Ben Gurion Airport is reopened and flights from overseas resume. Then we will have to reinstate quarantines, and begin the cycle again.

Creative thinking identifies elements of the solution among the components of the problem. In a pandemic, the population is split into carriers who infect others, healthy people who may become infected, and those who recover. The current response concentrates on the threat, locating infected people, carriers, and sick, and that is also the focus of the testing effort, which is too restricted even just for this purpose. Just as the purpose of the defensive and containment phase of war is to limit the enemy's achievements and requires focus on its advancing forces, so the center of gravity of the counteroffensive phase is in fact our reserve forces—their strength and availability. The key to an escape from the straits to the

open terrain lies in factors that allow the renewal of economic and social activity with a tolerable level of risk even in the presence of the virus.

According to medical experts, there are people among us who have recovered from the virus, even if they had no symptoms, and are carrying COVID-19 antibodies. True, the virus has not been studied exhaustively, and the parameters of the immunity created as a result of exposure to it are not clear, but is highly likely that as with other infectious diseases, people will develop antibodies after recovering, and this immunity will certainly be effective for the year following the illness. If we could achieve natural immunity of 80 percent of the Israeli population, then we would enjoy “herd immunity,” where the chances of infection are marginal, because such a large segment of the population is immune to the pathogen. These people could help in the development of vaccines in the long term, but even more important, in the short term the risk of their reinfection is low, and in time the risk of their infecting others will also decrease. As the rate of immunity grows, Israel can use them as the foundation of a strategic national reserve for the renewal of economic activity, leading to victory. In order to achieve this potential, large scale reliable testing must be developed in order to locate the immune population, find the antibodies, and increase the reliability of the risk assessment to these people and from them to others.

There is a large and even more available reserve in population segments whose risk of serious morbidity is relatively low, and they can therefore be allowed to resume activity at an acceptable risk level, without risking a leap in the number of seriously ill patients and demand for ventilators. The release of younger groups, together with extensive health questionnaires, fast and widespread virological tests (to locate the virus), and serological tests (to locate antibodies), along with ongoing precautionary measures and correct hygiene in workplaces and the public space will facilitate the gradual renewal of economic activity, with a controlled, low risk to health.

The policy proposed here is based on three principles that differentiate it from the policy of the containment phase: (a) The main effort will move from curbing the epidemic at the expense of the economy to renewal of economic activity while preventing further outbreaks; (b) The approach of imposing sweeping restrictions on the whole public will be replaced with differential moderation among population segments according to their risk of serious morbidity (underlying conditions, age, place of residence); (c) Alongside the measures to protect vulnerable populations from infection and to prevent carriers and outbreak hotspots from infecting others, there will an increased effort to locate populations that have acquired natural immunity to the virus.

The proposed policy involves preparing for a gradual, controlled return to activity of young and healthy people where, according to the data, it can be assumed that even if they do

become infected, they will have only mild or even no symptoms. A very small proportion of them will become moderately ill, and even fewer will become seriously ill and require ventilation. The health system will be able to cope with such small numbers relatively easily, and the chances those infected of receiving optimal care will even be somewhat better than in a situation where the health system is overloaded.

To illustrate this, consider a possible gradual easing of the lockdown. In the first phase, all immune people will be released to full activity, under strict rules of hygiene and caution (social distancing, masks, disinfection, and so on). The next phase is the release of workers in industries essential to the Israeli economy who are at low risk of serious morbidity and are not in contact with high risk populations (the elderly and people with underlying medical conditions). The third phase is the release of the general population by geographical area, that is, from places with a large population of immune or low risk groups (young communities). A further phase will be the gradual return of children to schools, again with control of their contact with high risk populations. The final phase will be the release of high risk groups, when most of the population will be immune, so that even if they fall ill and need hospitalization and ventilation, there will be ample preparation time, and in any case most facilities by then will be available for them.

When preparing the gradual exit from the lockdown, it is vital to make use of credible morbidity statistics and undertake screening to help examine the underlying assumptions of the policy. In the current situation, morbidity hotspots can provide information on the following issues: the infection rate (R_0), percentage of asymptomatic cases, severity of the illness by age group, duration by age group, plus perhaps data on herd immunity. The information is expected to support the assumption that in young people the illness is mild, and justify a policy whereby young people are the first to be released from lockdown and returned to work with safety measures in place.

It currently appears that the political echelons are being asked to make decisions on the basis of sweeping analyses covering the population as a whole, thus missing the potential of distinguishing between different levels of morbidity in different sections of the public. In addition to the “baseline” of morbidity trends under the current policy, it is important to present an economic forecast for continuation of the current restrictions for the long term, in order to avoid a policy that saves the public from outbreaks of COVID-19 but destroys the economy and creates massive public health problems from other causes. In order to promote responsible decisions regarding differentiated and gradual relaxation of restrictions on low risk populations, decision makers must be shown a weighted calculation of the additional marginal risk expected due to renewal of activity at each phase, as well as the desired benefits to the economy.

The government of Israel must prepare for the gradual and controlled relaxation of restrictions on movement, work, and assembly, and renewal of Israeli economic and social activity for populations with an acceptable risk level, within a reasonable time. This policy will also provide at least a window of hope for Israel’s citizens, in the shadow of so many harsh and frightening forecasts, mainly intended to motivate compliance with the instructions and prevent complacency, and perhaps for other evident reasons. While the current restrictions are justified, the public should be told how long they might continue, in order to reduce uncertainty through level-headed and optimistic conduct in a spirit of appropriate leadership in the face of the difficulties. The more clearly the government describes the road ahead of us, the better the country and its citizens can forge ahead. After the Passover seder night of curfew and the restrictions of the subsequent days, we can proceed to renewed, differentiated, and responsible liberty, based on balanced risk management: maybe not the full exodus today, but at least during the Passover season of spring.

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