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The National Struggle against the Coronavirus:
An Integrated, Multi-Phase Systemic Campaign
The INSS Strategic Framework

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The Institute for National Security Studies (INSS) strategic framework for a national struggle against the coronavirus was formulated by a research team including INSS Director Maj. Gen. (ret.) Amos Yadlin; a team of physicians coordinated by Col. (ret.) Dr. Ofir Cohen-Marom; an economic team led by Brig. Gen. (ret.) Dr. Sasson Hadad and Prof. Zvi Eckstein, head of the Aaron Institute for Economic Policy; an intelligence team led by Brig. Gen. (ret.) Itai Brun; a societal team led by Brig. Gen. (ret.) Dr. Meir Elran; and a strategic team headed by the authors of this document.

In public health terms, Israel has met most of the objectives required at this phase to contain the spread of the coronavirus in the country, but at the cost of severe damage to the economy. Therefore, this framework recommends that after the Passover holiday, the country begin to transition to the next phase: toward resuming economic activity, taking a gradual and differential approach – restarting prioritized activity of vital economic branches, while taking a calculated risk of a limited rise in the spread of the virus. Economic considerations will be at the lead, supported by the health care system, to keep health risks at bay and at an acceptable level. It is necessary to earmark the industries, enterprises, and businesses that are essential to the economy’s growth and formulate a suitable system for screening, monitoring, and testing of the contagion situation, so that workers and their surroundings can be “cleared.”

For the controlled release of groups of workers back to economic activity, there must be a package integrating differentiation by various categories with suitable testing and monitoring procedures: young people with no underlying chronic illnesses; people at low risk of serious COVID-19 illness; the “immune” population; essential workplaces in work-lockdown cycles; geography, i.e., low risk areas. Gradual release of workers will make it possible to reduce the severe damage to the economy, through learning by trial and error and reality checks, and collection of empirical data based on the situation on the ground (and not only mathematical models). Thus, assuming

the success of the recommended measures at a reasonable level of materialized risk that can be contained and controlled, it will be possible to advance to the next phases of restoring the economy and society to a situation of “living in the presence of corona.”

The corona pandemic has plunged Israel into a severe and complex national security crisis, which affects health, the economy, society, governance and leadership. This outbreak has unfolded against a background of huge uncertainty about the nature of the virus and the epidemic, as well as both short term and long term political effects of the crisis. The working assumption is the long term perseverance of the virus, which means the danger of further outbreaks.

Israel’s strategy for dealing with the virus has until now focused on a lockdown policy – in other words, sweeping social distancing – which led to a slowdown in the spread of the virus some two weeks after the steps were taken. This preserved a very large safety gap between the number of severely ill patients and the capacity of the health system to provide respiration and intensive care. However, the economic cost of this policy is untenable, with a loss of over 40 billion shekels a month in GDP, almost one and a half million people unemployed or on unpaid leave, the collapse of small businesses, and a heavy burden on households and society as a whole. Israel’s economic-social breathing space is limited, the costs are soaring, and recovery will be long, arduous, and complex.

Against this background, there are troubling signs of gaps in comprehensive long term national strategic thinking and serious delays in satisfactory planning of the next phases in the campaign against the epidemic, beyond the immediate action on the public health front to block greater contagion in the containment phase. The Ministry of Health bases its policy on a extreme threat (infection) scenario. Tests are fewer than required due to belated preparations and a rigid concept of focusing on people with symptoms – obstructs the ability to formulate a more credible picture of the situation, to validate or refute the benchmark scenario, and to conduct a balanced discussion of the competing alternatives.

Consequently, the management of the crisis and decision making in this context must be improved. First and foremost, decisions made by the Prime Minister and the director general of the Ministry of Health are not a substitute for discussions by the national security cabinet and for a national system-wide center to manage the crisis.

This framework, formulated at the Institute for National Security Studies (INSS), presents a strategic concept for coping with the corona crisis, intended to containing infection while facilitating rapid physical, economic, and social recovery and avoiding unbearable costs to Israel (in terms of mortality, collapse of the health system, breakdown of the economy, and

undermining the state's democratic governance). It looks to the future, and seeks to realize opportunities that emerge during the crisis and promote Israel's political and security objectives.

The strategic concept underlying the framework posits a gradual transition from a sweeping policy that is largely dictated by relatively narrow healthcare considerations, to a balanced, differentiated policy that integrates health and economic aspects. Once control of the serious illness trajectory has been achieved and there is a sufficient safety margin to prevent overloaded hospital and ventilation capacity, economic activity must be gradually resumed, while continuing the policy of protective isolation of populations at high risk of severe illness, and closure and restrictions on areas at high risk for spreading the epidemic. This requires an integrated, multi-phase campaign that incorporates health, economic, and societal considerations; gradual and differentiated steps guided by a broad and reliable situational intelligence built on widespread and varied testing (virological and serological); screening; and monitoring technologies for rapid identification of infected people – breaking infection chains and at the same time “clearing” healthy and immune people, and releasing them for economic and social activity.

Managing the campaign against corona involves three main phases:

- a. Obstructing/braking the spread of the virus, with the emphasis on serious morbidity, while building up the necessary medical capabilities (hospitalization and ventilation capacity, reinforcement and expansion of medical staff, increased testing capacity), accompanied by an inevitable slowdown to the economy with damage to the national product and employment. Based on the risks, which are not the same for all population groups, at this stage it is already the time to consider moving from a sweeping policy to differentiated measures.
- b. Restoring the economy and daily life to function in the presence of the virus, gradually and with distinctions based on economic priorities and controlled health risks.
- c. Shaping a new “living with corona” routine, while managing the health risk until it recedes or a vaccine/treatment is found.

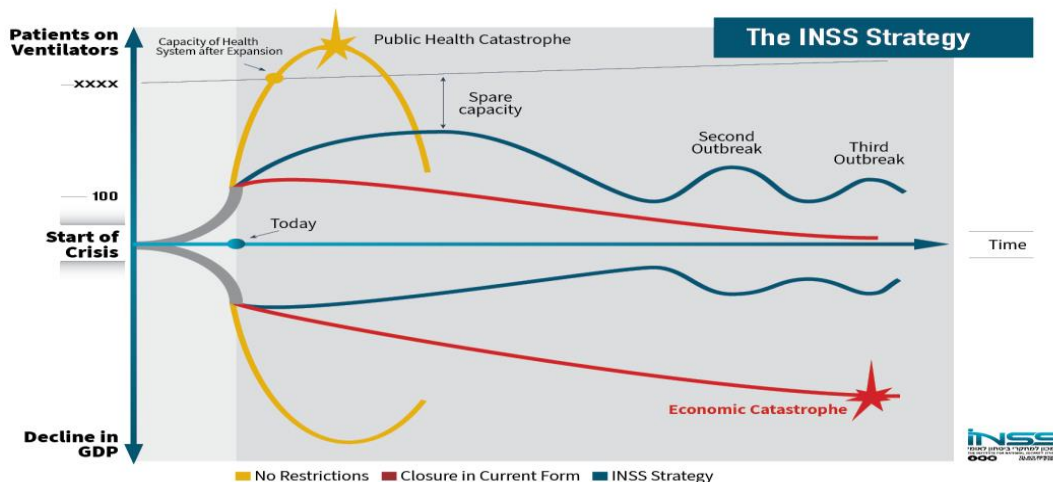
In public health terms, Israel has achieved most of the objectives required by the first blocking/braking phase: (i) curbing the spread of the virus and achieving a fixed daily infection growth rate rather than an exponential one (the aim: reducing the infection constant, which represents the average number of persons infected by each patient, to less than 1); (ii) a safety margin for the health system that allows it to respond to local outbreaks without the collapse of ventilation capacity; (iii) the ability to conduct a large and varied number of tests, in order to provide a clear picture of existing and emerging outbreak hotspots, to locate carriers, to clear those who are healthy, and to monitor areas of

outbreaks. This has not yet been achieved; (iv) the ability to enforce effective lockdown of outbreak hotspots and quarantine of people who have been in contact with patients or are showing symptoms – in this context it is essential to continue the involvement of the IDF; (v) the effective dissemination of information to maintain the public’s awareness of social distancing needs and rules of hygiene.

Against this background, we recommend that after the Passover holiday Israel should start to transition from the phase of blocking the spread of the virus – which inevitably involves serious damage to the economy – to the phase of gradual renewed economic activity, based on a differential approach – jumpstarting activity according to clear priorities, while taking a calculated risk of a limited rise in the spread of the virus. Economic considerations will be at the forefront, supported by medical measures, to keep health risks to a reasonable minimum through a combination of preventive measures, hygiene, and close observation, monitoring, and testing measures. In this context, it is necessary to earmark industries, enterprises, and businesses that are essential to economic growth, and to formulate a suitable system of tests so that workers and their surroundings can be “cleared.”

Decisions must be made on the basis of a combined health and economic forecast, along with a professional analysis of the required economic measures, their value to the economy, the population segments required to renew activity, an analysis of the marginal health risks of a differential return to activity, the medical steps required to reduce these risks, the predicted weighted balance of benefit versus medical risk, and planned ways to respond to a higher than expected morbidity risk.

The upper level of the figure below charts a morbidity forecast (seriously ill and ventilated patients) versus intensive care and ventilation capacity in the health system. The lower level charts a weighted forecast of the economic and social cost to society. The areas referred to in both forecasts – morbidity and the state of the economy – must be monitored and managed while maintaining a safety margin from collapse.



We recommend a policy of controlled differentiation, so that people can be released for work based on the following possible categories: (i) the 20-44 age group, with no underlying medical conditions, at low risk of serious morbidity and mortality, and essential to the economy; precautions must be taken to prevent inter-generational infection with older populations (e.g., parents); (ii) identification of “immune” groups by more extensive serological tests, once conditions allow. This group will lead the renewal of economic activity as well as relatively low-risk social activity that requires fewer restrictions; (iii) work-lockdown cycles – 5 days of work and 9 days of lockdown – to reduce the infection rate to below 1 until the virus disappears; (iv) geography: release for work in areas that are determined to be at very low risk of infection. Release will be conditional on the ability to identify new cases quickly and isolate them. As of now, a number of cities have been marked as high risk hotspots for the continued spread of infection (mainly due to population density and large numbers of infected), including Bnei Brak, Modiin Illit, Elad, Beit Shemesh, and Migdal HaEmek. In these areas the lockdown will continue to be enforced even when controlled release starts in other areas.

We recommend building an option that integrates all types of differentiation, based on learning by trial and error, and the collection of empirical data amassed from the situation on the ground (and not only from mathematical models). Thus, assuming the success of the recommended measures at a reasonable level of risk that can be contained and controlled, it will be possible to advance to the next phases.

Measures to Restore Economic Activity under Corona Conditions:

- a. The primary goal in renewing economic activity is to increase the domestic product. Since there is a delay in attaining clear GDP data, particularly when segmented by industry, the objectives for management and measurement will be employment by area and industry. Preference will be given to essential industries and those with a high level of product per worker.
- b. Employment targets will be defined for the return of salaried workers and self-employed on a monthly basis from the end of May 2020. The target is to widen the release to work until the end of July, apart from areas where there is a high potential for further outbreaks. In an epidemic that is characterized by a critical time dimension, it is essential to set goals where at least monthly data can be obtained. (Potential sources of data are the National Insurance Institute and employment data from private companies. The Central Bureau of Statistics can process the data and produce a report on employment by industry, and this process must be as rapid as possible.)
- c. The measures required to achieve these objectives and restore the economy to activity will be an important part of the 2020 budget. At the same time, preparations must be made for the 2021 budget.

- d. It is vital to ensure that all those currently working, particularly in essential jobs (the security system, health, finance, food supply, and the respective support systems) operate subject to the strictest rules of hygiene and are regularly tested, in order to avoid the creation of new outbreak hotspots. The goal is for all essential workers to be defined as neither infected nor infectious, as quickly as possible and on a regular basis.
- e. Within regions – the workforce will be gradually released, as required by the industry. Priorities will depend on the degree to which the industry is essential, the number of workers involved, and the level of risk to them and from them.
- f. Industries will be released on the recommendation of the Ministries of Finance and the Economy, based on their contribution to GDP, while checking the risk of serious morbidity (shopping malls, markets, and entertainment venues will be released last).
- g. In industries where restrictions are lifted, the option of state funded unpaid leave will also be canceled. However, assistance will continue for the unemployed and for businesses that are in financial distress. We also recommend flexibility regarding the allotted period to receive unemployment benefits, in addition to wages for workers in urgent jobs, such as help for populations in distress – the elderly, nursing patients, residents of disadvantaged youth villages, children in distress. This should cover up to 90 percent of their wages before unemployment.
- h. Agreement with the public sector regarding its contribution to the economic-social effort. This contribution corresponds to the extent of the damage to the income of workers in the private sector.

The third phase includes socially differentiated measures for “living with corona,” led by: differentiated openings based on population types and areas of lockdown, based on learning by trial and error (maintaining a safety margin between the high morbidity forecast and ventilation capacity) and a dynamic approach to opening and closing. Communities where there is an active spread of the virus and groups that are particularly vulnerable to serious illness will remain in strict isolation, while it will be possible to ease the lockdown on other population groups, although even in these cases – with constant review. Children and young parents up to the age of 44 at a very low risk level will be released to a “living with corona” routine, subject to their observing suitable rules of conduct and hygiene. For example, if we move to a framework of one week work and one week lockdown, it will be possible for children in pre-school and elementary school to return to their frameworks – half the children attending one week, while their parents are at work, while the other half remain at home with their parents during the lockdown week. It will be important to maintain social distancing, to wear masks and gloves in the public space, to observe the rules for public transport, and to distinguish between levels of risk for serious illness among

educational staff. Distance learning can continue for secondary schools, universities, colleges, training centers, and so on.

Measures at the societal level should evaluate specific considerations. (i) The main risk of the differentiated approach lies in the inevitable fluctuations (and consequential changes regarding different groups). This could reduce the public's alertness and adherence to guidelines. The recommendation is therefore to adopt measured steps, at intervals of at least two weeks between each phase, which will also enable evidence of the effects of the relaxed lockdowns. (ii) In an era of differentiated release, the effort to provide information is essential but also more complex than during a sweeping lockdown. Information must be adapted for different groups, with the emphasis on self-discipline based on trust of the authorities, more than enforcement. Information must be disseminated by professionals, according to the needs of each group. (iii) The situation of weak population groups is expected to worsen, in both economic and health terms, increasing the risk to them – and consequently to the general public. It is therefore essential to have specific plans for each such group and to ensure they are fully implemented, with the cooperation of local authorities and social welfare associations.

In any event, particularly vulnerable populations will remain in strict lockdown, and it is important to prepare suitable aid packages and care measures. At the same time, it is essential to invest in preparing for a second outbreak of the virus (autumn 2020) and/or the possibility that the virus will mutate and become even more lethal.

Organizational Recommendations

1. Since the coronavirus crisis has serious implications for national security, it must be handled by a small cabinet, comprising seven ministers: Finance, Health, Defense, Welfare, Internal Security, Education, and Justice.
2. The immediate crisis must be managed in tandem with planning for the future phases of the campaign. Under the cabinet there should be a team of chief executives and experts, coordinated by the National Security Advisor or an appointed senior coordinator. If a national emergency government is established, the team should be led by the Deputy Prime Minister, who will coordinate the activity of government ministries in the campaign against corona.
3. The National Security Council will prepare the discussions for the cabinet and the team of experts. The National Management Center will draw up a picture of the overall crisis situation weighted by three factors: (i) forecasted high morbidity at least two weeks in advance; (ii) the economy – forecasts of GDP, employment, business collapses, economic opportunities; (iii) societal wellbeing and social resilience.

4. The cabinet will instruct the teams engaged in managing the current phase and those that are planning future phases. As required, the cabinet will guide the formation of special task forces for specific topics, such as: examining the increase in the effectiveness of tests and adapting them to the renewal of economic activity; education; welfare, societal resilience and ability to recover; realization of technological opportunities and innovation.
5. A professional head must be appointed for the government spokesperson's office, who enjoys full public trust, knows how to involve the public in the considerations behind decisions, and can guide it on the long term rules of conduct for living with corona.
6. The defense establishment is the strongest executive arm in the country, with the most practice at managing extensive and complex national security crises. So far its contribution and participation in the crisis have been limited, but it must be integrated deeply in the process of drawing up and implementing a response to the crisis, far more than just enforcing lockdowns and providing aid in coronavirus hotspots. The defense establishment must continue to be involved in helping institutions that care for weak population groups and need logistical and technological assistance. It can draw on budgets and human resources, make strategic and operational plans, and take control of the operation of systems relevant to coping with emergencies on the home front. It can serve as the spearhead of the campaign and show the way forward to long term and positive "living with corona," using methods such as a broad controlled pilot plan for renewing the activity of certain social and economic frameworks.
7. The coming days should be used to prepare a specific, actual plan for the first phase of exiting the lockdown on a differential economic and geographic basis, so that it can be implemented immediately following the Passover holiday.