Jacinda Ardern before her inauguration as Prime Minister of New Zealand, October 26, 2017. Photo: Governor-General of New Zealand (CC BY 4.0)

New Zealand, COVID-19, and National Security: Lessons for Crisis Management

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The COVID-19 pandemic is the most recent example of a natural threat, a category that includes earthquakes, tsunamis, fires, and floods. States must regularly grapple with natural threats, along with man-made threats such as terrorism and wars. Such threats challenge the traditional definition of the concept of national security, especially in terms of how to properly address them, but they have not yet earned their rightful central place in national security doctrines. Disasters on a similar or even larger scale than those already witnessed are expected to take place in the future as a product of the current era, an "age of disruptions." New Zealand's management of the COVID-19 challenge is considered a global success story. As a case study, it highlights five central principles that together enable a model for emergency and crisis management: a shared objective; professional support; connecting communication; a comprehensive plan; and flexibility. These management principles emphasize the societal element as a central component in the struggle against an unfamiliar threat, particularly in a "reality of disruptions" that is marked by extreme uncertainty.

Keywords: COVID-19; resilience; leadership; management; crisis; emergency; national security; New Zealand

Introduction

More than a year has passed since COVID-19 appeared in Wuhan, China in December 2019, and was declared a global pandemic by the World Health Organization (March 11, 2021). By the end of December 2020 over 81 million people around the world had been infected by the virus, over 1.7 million people died, and over 5 million people recovered from the disease (Worldometer, n.d.). Numerous countries have already experienced second and third waves of the pandemic, and countries like the UK, Sweden, Spain, and Israel have reported cases of infection with new COVID-19 variants. In many countries, including Israel, COVID-19 created a multidimensional crisis—health, economic, societal, governance, and political—whose consequences will be felt for many years.

The significance and ramifications of the pandemic vary widely across countries as well as among communities, ethnic groups, age groups, and economic classes (Twigg, 2020). This disparity stems from each country's respective strengths and weaknesses, which are related to its basic characteristics, governance structure, the extent of its healthcare system, and its social and economic safety nets. It also reflects the respective social and cultural conventions in each country, the steps each country has taken to contain the disease, the lockdown policy implemented, the steps taken to treat those infected, and other measures to care for the population (Islam et al., 2020).

The COVID-19 crisis is a product of the environment in which we live, which is an unstable and unpredictable setting that does not evolve in linear fashion, in turn challenging efforts to foresee and plan (Uhl-Bien et al., 2007). As already noted in the professional literature two decades ago, contemporary conditions foster a reality in which crises and emergencies involve a wide range of issues—among them security, political, environmental, technological, and public health—resulting from both man-made and natural disruptions (Kersten, 2005; Paraskevas, 2006). A model for discerning and coping with a complex and unexpected reality that has also become popular for COVID-19 is a model developed in the United States military in the early 1990s to address the operating conditions that the army encountered when it arrived in Kosovo, Somalia, Afghanistan, and Iraq (Ben-Yosef, 2017). These conditions dictated a "reality"[1] that could not be defined in an unequivocal, unidimensional manner, instead representing volatility, uncertainty, complexity, and ambiguity (VUCA). Together they represent "the VUCA world" (Ben-Yosef, 2020), and as such, reflect an expected phenomenon that challenges state efforts and consequently finds them ill prepared. Some define this phenomenon as a "fundamental surprise,"[2] while others define it a "white swan."[3]

COVID-19 is not the only threat in the current era. It joins other global threats that nation-states have been forced to confront in recent decades, including terrorism, nuclear weapons, and global warming (Michlin-Shapir & Padan, 2019). These are global threats, cast by political sociologist Ulrich Beck as "risks," which depart from the "dangers" that characterized the 20th century—a conceptualization that led Beck to define the society of the 21st century as a "risk society." Risks are distinguished in their not being tangible threats (like one caused by a foreign army invading a given country); their occurrence can only be calculated using probabilistic tools, and they entail destructive consequences (Beck, 1992).

One can see COVID-19 as part of a wider category of threats that relate to the broader sense of national security. That is, national security no longer refers only to physical threats, but rather connotes the need to respond to a wide range of challenges in a variety of domains—e.g., economics, society, and the environment.

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security no longer refers only to physical threats, but rather connotes the need to respond to a wide range of challenges in a variety of domains—e.g., economics, society, and the environment—such as global warming, water scarcity, food security, pandemics, and more (Peri, 2019). Consequently, COVID-19 is also an opportunity to examine the claim that security is not a given, objective, external, and essential "reality," but rather a formulated product representing a social construct (Baldwin, 1997). The need to expand the security concept stems from the growing recognition that in "late modernity" (starting in the 1980s), people's sense of security was undermined for a variety of reasons. Changes in all areas of life are more rapid and profound than in the past. The "reality" has become more "liquid," and the main task of social institutions—creating and maintaining the social order—has become more challenging than in the past (Peri, 2019).

Tomas Pueyo summarizes the differences between countries that succeeded in "flattening the curve" of the pandemic, and those that did not. He argues that the practices that differentiated the former from the latter lie in the "non-pharmaceutical" interventions (Pueyo, 2020), including intensive testing systems; flight restrictions; epidemiological investigations; and quarantine policies.

Leadership is another significant non-pharmaceutical element in crisis management (Fink, 1986; Klann, 2003; Mitroff, 2004), evidenced in the COVID-19 events in the crisis of leadership. Some have argued that the worst influence on how some countries coped with COVID is the vacuum in leadership (Tourish, 2020). Leadership is considered a significant factor that distinguished between countries that succeed and those that fail to cope with the pandemic (Wilson, 2020). Countries such as Denmark, Finland, Norway, and Taiwan are among the former, while Belgium, France, Spain, the United Kingdom, the United States, and Israel, at the time of this writing, were among the latter.

Among the countries that are considered the most effective and successful in the world in managing the struggle against COVID-19 is New Zealand. The purpose of this article is to examine the leadership qualities that have helped New Zealand to better contain the disruption stemming from the pandemic, to adapt to it faster, and to eradicate it in its territory. The article is divided into four parts: the first part includes background data on New Zealand and presents the approach that its government took in the struggle against COVID-19; the second part discusses the gender aspect behind how Prime Minister Jacinda Ardern managed the campaign; the third part analyzes the societal element to leadership in managing the fight against the pandemic—public trust—and designates it a central condition to enable success in the face of an unexpected and unfamiliar threat that requires changed public behavior; the fourth part, presenting the central argument of the article, describes five main principles for managing crises and emergencies that have guided the government of New Zealand in its struggle against the pandemic. The article shows that the most challenging course of action for New Zealand, as for other countries, was not in implementing classic practices of fighting infectious diseases, but rather in carrying out three main steps, societal in nature, required to transform public behavior: guiding the public toward lockdown, following the social restrictions guidelines, and imposing social isolation, in order to stop the chain of infection and prevent the spread of the virus. Changing the public's behavior requires partnership and compliance, and is achieved mainly by means of public trust in the leadership. The management principles discussed here succeeded in increasing public trust in the government of New Zealand, and hence effectively achieved the public's partnership and compliance.

1. New Zealand: General Background

New Zealand, established as a British colony in the 19th century, is divided into two main

islands—northern and southern. The capital is Wellington, and the largest and most populated city is Auckland, with 1.3 million residents. The population of New Zealand is close to 5 million people, with a multi-ethnic composition: 67.5 percent are of European origin; 14.6 percent are of Maori origin; and the rest are Polynesians and Asians. The Prime Minister, who is also the leader of the social-democratic Labor Party, is Jacinda Ardern. According to pre-COVID economic data, the GNP is estimated at $198 billion (a little over $40,000 per capita); the inflation rate, 3 percent; the unemployment rate, 3.7 percent; the debt-to-GDP ratio, 0.8 percent of GDP.[4] New Zealand's economy is based mainly on trade and export of agricultural products (12 percent), fishing, meat, mechanization, and textiles. Tourism is a central industry, representing 20.4 percent of total exports and 14.4 percent of the workforce (New Zealand, n.d.). New Zealand's success in managing the struggle against COVID-19 is evident in its economic indices: GDP is estimated to grow by 5.7 percent (in real terms) in the coming fiscal year—April 2021 to March 2022 (after a decline of 4.3 percent in 2020-2021). In the 2020-2021 fiscal year, unemployment rose to 6.8 percent, compared to 4.1 percent in the previous fiscal year. However, in 2021-2022, unemployment is expected to decline to 5.9 percent.[5]

"Go Hard, Go Early": New Zealand's Approach to the Fight against COVID-19

When COVID-19 hit, the state systems were relatively prepared. New Zealand had a plan, written in 2017, for coping with an epidemic ("Influenza Pandemic Plan"), and changes and adjustments to the emergency systems were made following failures in preparatory measures for a pandemic tested in November 2019. New Zealand is well-versed in emergencies associated with earthquakes (there are some 14,000 earthquakes per year, most of them light, but some are destructive).[6] Thus, on January 24, 2020, two days after the World Health Organization announced that there is evidence indicating person to person infection of the coronavirus in Wuhan, the government of New Zealand established an advisory team for the Ministry of Health to manage the struggle against COVID-19. The Director-General of the Ministry of Health and the person who managed the campaign in close cooperation with Prime Minister Ardern is Dr. Ashley Bloomfield, an epidemiologist by training.

New Zealand is an island country with low population density, and most people, even in cities, live in single-family homes. Low density allows it to maintain close control over the country's borders, and the fact that it was exposed to COVID-19 relatively late[7] gave it the opportunity to learn from other countries on how to manage the challenge. Michael Baker, professor of public health at the University of Otago in New Zealand and a senior epidemiologist who is part of the New Zealand Ministry of Health's COVID-19 advisory team, said:

> I was greatly influenced by the work of the World Health Organization task force in China, which stated that it had succeeded in stopping the virus and was even close to eradicating it…I was also impressed by the experience of other countries, especially Taiwan, that had succeeded in preventing the virus from entering their territory…. When we achieved control over the virus the first time we thought there was no need for masks, but the experience of others showed differently, which convinced us to include them in the set of guidelines. (Primor, 2020)

Although New Zealand's success in its campaign against COVID-19 has been attributed to its being a small and rural island country, facts suggest otherwise. In most cases, COVID-19 was spread around the world by tourists who entered countries by sea and by air, and not by land (Marmorek & Eyzaguirre, 2020). Hence,

the claim that low population density is what contributed to the success cannot be fully substantiated. New Zealand is among the countries in eastern Asia, such as Vietnam, South Korea, and Taiwan (and in contrast to Iceland) that have succeeded in flattening the curve and even eradicating the virus completely. Among OECD countries, New Zealand has the lowest mortality rate and lowest number of people who are COVID-19-positive (Figure 1).

New Zealand is among a group of countries, including Finland, Iceland, Germany, Taiwan, Norway, and Denmark, whose state leader is a woman. In all of them, there were fewer deaths from COVID-19, relatively speaking, and far fewer cases than in countries led by men.

The government of New Zealand acted quickly and adopted a cautious and strict, science-based approach, which was named the "elimination strategy." As early as March 25, the government declared a full country-wide lockdown for four weeks, with extensive restrictions, and another three weeks with looser restrictions.[8] The Ministry of Health operated on the assumption that there was a narrow window of opportunity to stop the spread of the virus, and therefore if it did not act quickly, early, and powerfully, the window would close and New Zealand would be forced to cope with serious health consequences and economic damage similar to other countries, such as Italy, Spain, the United Kingdom, and the United States. Consequently, the central components of the strategy for eliminating the virus included tight supervision of the borders, restriction of the entry of people who were infected with COVID-19 by placing them in quarantine for 14 days, and mandate to the authorities to monitor the population through tests and epidemiological investigations. Baker said: "The lockdown that we imposed was apparently the strictest in the world. It was based on the rigorous policy of Oxford University and proved to be very effective" (Primor, 2020). Up to the time of this writing, New Zealand imposed three lockdowns: the first, imposed on March 25, 2020, covered the entire country, and the second was imposed on Auckland on August 14 (based on the alert level system discussed below, with the country at level 2 and Auckland at level 4) and lasted three weeks. On February 17, 2021, New Zealand imposed a third lockdown on Auckland, after three unexplained cases of COVID-19 (a couple and their daughter) were discovered in the community. Auckland went to alert level 2 and the rest of New Zealand was declared alert level 1.

2. The Gender Aspect to Management of the Campaign

New Zealand is among a group of countries, including Finland, Iceland, Germany, Taiwan, Norway, and Denmark, whose state leader is a woman. In all of them, there were fewer deaths from COVID-19, relatively speaking, and

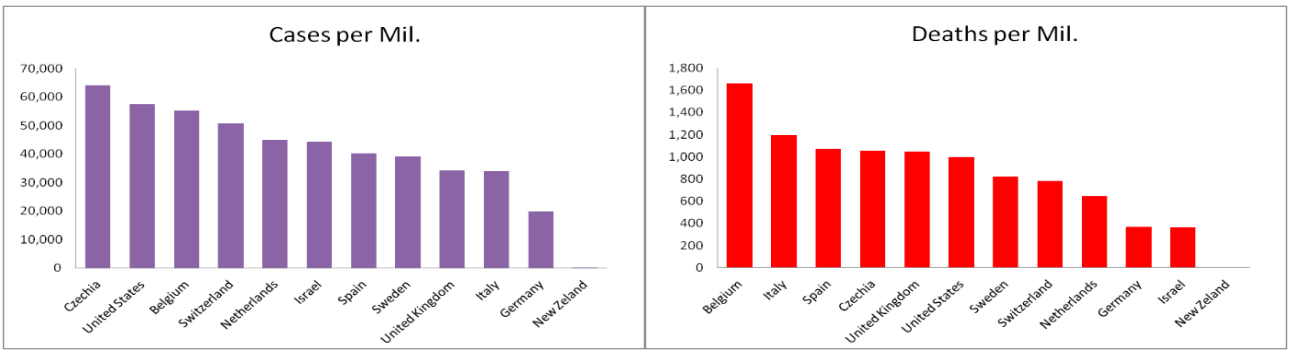

Figure 1. Comparison of mortality rates among OECD countries (as of December 29, 2020)

Source: World Health Organization, https://covid19.who.int/table

far fewer cases than in countries led by men (Figures 2 and 3).[9] Female leaders' success with COVID-19 invited diverse explanations. Some argue that female leaders have the necessary qualities for managing crises and emergencies (Taub, 2020; Kristof, 2020), and some suggest that their success in managing the pandemic is less connected to their gender and more to the kind of countries in which women are elected to leadership positions: countries whose population are more educated, with higher gender equality.[10] It is also argued that the public institutions in such countries are more effective (Lewis, 2020).

Nevertheless, the success of female leaders in the COVID-19 crisis is impressive, considering the fact that women make up 11 percent of all world leaders.[11] A study published recently by the *Harvard Business Review* (Zenger & Folkman, 2020), which examined 60,000 leaders (22,603 women and 40,187 men), strengthens the notion that women are better leaders in times of crisis. Mortality figures, morbidity, trust

	Country	Mortality rate per million	Total COVID-19 deaths	Active COVID-19 cases	Total number of COVID-19 cases	Population
	Finland	**98**	546	8,591	**35,137**	5,544,980
	Iceland	**82**	28	143	**5,726**	342,335
	Taiwan	**0.3**	7	127	**795**	23,838,108
	Norway	**79**	429	9,498	**47,585**	5,442,127
	New Zealand	**5**	25	49	**2,151**	5,002,100
	Denmark	**208**	1,204	39,781	**155,826**	5,802,284

Figure 2. COVID-19 figures in countries led by women

Source: https://www.worldometers.info/coronavirus/#countries (as of December 29, 2020)

	Country	Mortality rate per million	Total COVID-19 deaths	Active COVID-19 cases	Total number of COVID-19 cases	Population
	Canada	**399**	15,121	74,113	**555,207**	37,905,077
	United States	**1,034**	343,182	7,741,717	**19,781,718**	331,960,370
	France	**966**	63,109	2,308,815	**2,562,646**	65,344,969
	Italy	**1,198**	72,370	575,221	**2,056,277**	60,417,726
	United Kingdom	**1,045**	71,109	N/A	**2,329,730**	68,062,047
	Spain	**1,072**	50,122	N/A	**1,894,072**	46,763,749
	Israel	**357**	3,286	4,392	**411,677**	9,197,590

Figure 3. COVID-19 figures in countries led by men

Source: https://www.worldometers.info/coronavirus/#countries (as of December 29, 2020)

in the authorities, and additional parameters were found to be better in countries and authorities led by women.

One explanation for the success of women in managing emergencies and crises lies in the fact that in times of crisis, leaders need to serve as a "secure-base support" for those being led (Mayseless & Popper, 2019). Those who know how to provide a "secure base" are characterized by qualities such as containment, empathy, compassion, cooperation, transparency, and attentiveness. These qualities are especially important in times of crisis characterized by great uncertainty and confusion, as in the pandemic. The restrictions imposed on the public during COVID-19 created a sense of depression and stress and raised the need for a "mother figure," which is connected to the search for a "secure base" that provides, inter alia, consolation, compassion, containment, and empathy. These qualities are identified with the leadership of women more than men, and therefore some argue that they have been a key to the success in managing the pandemic-related exigencies (Taub, 2020). This stands in contrast with qualities such as centralization, decisiveness, and assertiveness, which are usually identified with male leadership and are found to be less suited to crisis situations (Lewis, 2020).

Looking at New Zealand as a case study, one can discern five central management principles that helped it contain the disruption and manage the fight against the spread of COVID-19 with greater skill and flexibility.

In the case of New Zealand, Ardern's ability to be attentive to the public and to express empathy has been an asset in her leadership style. This is known as the "politics of kindness," and Ardern made sure to integrate it well in her messaging to the public.[12] The world first met Ardern after the terrorist attack in Christchurch (March 2019). At that time she stood with the Muslim victims, expressed empathy with their pain, and declared that "New Zealand is their home. They are us." As will be demonstrated below, the drive to bring people together into "us" has been used by Ardern throughout the COVID crisis.

3. The Societal Element in Managing COVID-19: Public Trust

New Zealand's leadership ostensibly operated against the coronavirus by implementing classic practices used against viruses. Similar to other countries, it stopped tourism from abroad; purchased personal protective equipment for essential workers; carried out large-scale testing of the population; led effective epidemiological investigations; and adopted policies of lockdown and quarantine for those testing positive for COVID-19. However, the most challenging course of action for New Zealand, as for other countries, was in carrying out three additional steps: guiding the public in lockdowns; making sure that there is high compliance with health restrictions; and maintaining physical/social isolation in order to stop the chain of infection. The difference between the former five organizational steps and the latter three societal steps is related to the need to change the public's behavior, which stems from the nature of the contagion.

Changing public behavior requires partnership and compliance, which are influenced mainly by the level of public trust in the leadership. The government of New Zealand enhanced the public trust in it and thus succeeded in mobilizing public partnership and compliance. According to theories of social identity regarding leadership, if the public believes that its leaders are working to serve shared interests, then transformative collective action is facilitated (Reicher & Hopkins, 2005). This transformative collective action was considered an imperative to overcome the pandemic, and thus played a vital role in shaping actions to build public confidence in the leadership. Public opinion polls conducted

in New Zealand in June and August 2020, after the first lockdown and in the peak months of the first wave of COVID-19, show that Ardern and her government received the public's trust from the early stage of the crisis (Figure 4). On October 18, when national elections were held in New Zealand, Ardern's Labor Party won a majority of 64 out of 120 seats in parliament. This was a major victory, and the first since 1996.

The New Zealand government's COVID-19 campaign was not perfect. There was much concern about protective equipment for essential services and medical staff, as well as many disagreements about the border restrictions, how the government supported businesses, workers, and the groups that are dependent on welfare. In a related context, the Minister of Health resigned on July 2, after having twice violated the health guidelines.

4. Universal Principles for Emergency and Crisis Management

The "all-hazards" approach to a mass disaster holds that preparedness for emergencies should be designed in such a manner that plans can provide a basic response to a wide variety of threats. According to this approach, the source of the disaster is less important than its consequences, and therefore there is no need to develop separate response plans to different threats (Gregory, 2015). The response commonly contains four components that characterize the "management cycle" (Khan et al., 2008): 1) preparedness before the event; 2) response to the event: primary, secondary, and tertiary; 3) recovery of infrastructure and people; 4) mitigation/prevention. The "all-hazards" approach gives priority to preparedness, since advance preparedness greatly helps mitigate the damage and contributes to increasing the systemic capacity to cope with the challenge (Collins, 2000 in Elran, 2021).

According to Elran (2021), a resilience doctrine[13] in reference to the theory of crisis management is based on the assumption that disasters happen and will continue to occur,

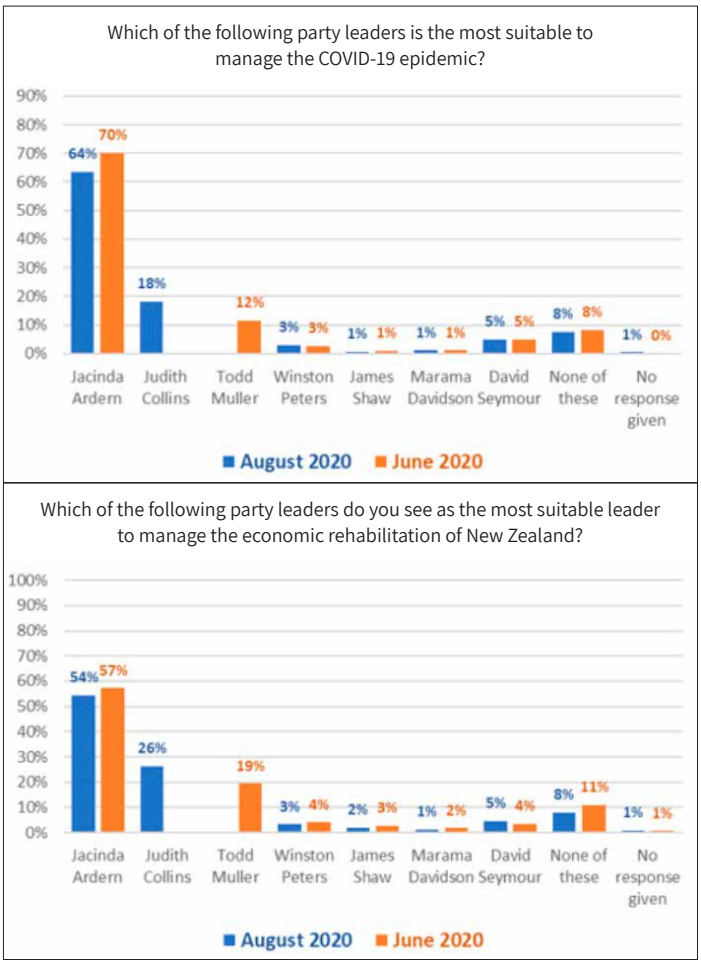

Figure 4. New Zealand public opinion, June and August 2020

Source: https://www.horizonpoll.co.nz/page/593/ardern-seen

despite prevention and mitigation efforts. Systems that adopt a resilience doctrine as part of their prior preparedness for mass disasters usually adopt one of three approaches: the broad approach, which calls for a preliminary holistic strengthening of the social, economic, and infrastructural components of the system; the functional approach, which focuses on large-scale prior investment in organizational, infrastructural, and social aspects of preparedness for successful coping with disruptions; and the narrow approach, which focuses on preparing the specific tools that enable the management of the system in times of crisis/emergency.

The COVID-19 crisis should be characterized as an atypical natural mass disaster (Elran, 2021). Countries that succeeded in their

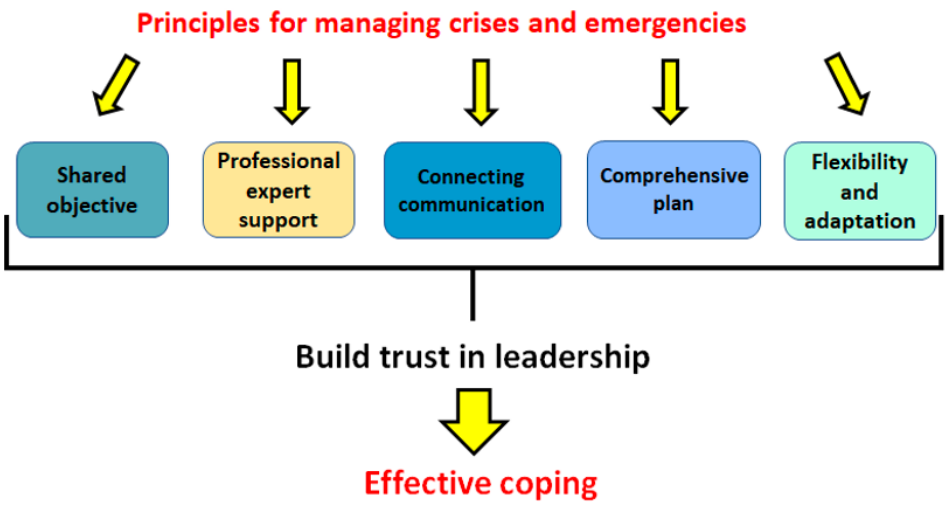

Figure 5. Principles for managing emergency and crisis situations: Building public trust in leadership
Source: (Padan, 2020)

coronavirus campaigns (such as Taiwan) are those that managed to contain the crisis. They commonly responded to the "disruption" in a flexible manner, and maintained functional continuity notwithstanding. These countries are defined as more resilient than others (Marmorek & Eyzaguirre, 2020). Looking at New Zealand as a case study, one can discern five central management principles that helped it contain the disruption and manage the fight against the spread of COVID-19 with greater skill and flexibility (Figure 5).

Defining a shared objective: A successful struggle such as the one waged against COVID-19 involves the ability of the leadership to focus on the need to increase the public's involvement in the collective challenges that emerge from the hazard (Wilson, 2020). To achieve this, it is necessary to define a shared objective (Grint, 2020). Ardern and her government managed to define a shared objective that was phrased simply: curbing the spread of COVID-19. The ensuing targets were formalized accordingly—saving lives and minimizing harm to livelihood.[14] When addressing the public, Ardern repeatedly used the terms: "we, us, all New Zealanders, a team of 5 million." With these semantics, Ardern approached her people as a unified group, with a shared fate, irrespective of gender, socioeconomic status, or ethnic group. Designating the "us" helped to foster national pride among citizens struggling together against the pandemic disrupting their lives, and at the same time contrasted "us" with "them," thus differentiating New Zealanders from the citizens of other countries. The appeal to the public to come together against the pandemic was intentional and consistent (New Zealand Government, n.d.) and proved to be effective for maintaining public support in the struggle against COVID.

While not every citizen can directly contribute to the struggle, as not every citizen can help secure the country's borders or treat COVID-19 patients in hospitals, there was a constant appeal to citizens to search for what they can do to stop the spread of the virus. By this appeal Ardern succeeded in mobilizing the public and deepening its commitment to the shared goal. Citizens saw themselves as part of a broad solution and considered the restrictions they needed to impose on themselves as part of their contribution to the campaign. Closely related to framing the struggle against COVID-19 as a joint venture, Ardern attributed the country's success to the public and not to herself or to the government alone. At the end of the first lockdown she asserted, "While the job is not

done, there is no denying this is a milestone. Thank you, New Zealand" (BBC News, 2020). At the end of the second lockdown, she proclaimed: "We can let ourselves once again feel pride…that *we* managed to get to that position *together*" (Peñaloza, 2020, emphasis added).

The lesson learned from using this management principle is that defining a shared objective helps enlist the public in coping with the crisis as a unified group with a shared fate and enables its mobilization for the necessary steps to this end. Implementing this management principle in a time of crisis helps increase the public's trust in its leadership.

Professional expert support: The government campaign against COVID-19 was accompanied by an advisory team from the Ministry of Health that included 12 experts (New Zealand Ministry of Health, n.d.). The government's willingness to listen to the data and the scientific advice provided by the team augmented the decision making process and differentiated New Zealand from countries that tended to ignore professional advice, consequently failing to stop the spread of the coronavirus. The advantages of using expert recommendations are many: experts provide backing for leaders' claims that there is indeed a crisis at hand; they increase the public's sense that leaders are relying on objective criteria and consequently that it is not a matter of manipulation or conspiracy; and they sharpen the message that there is a real need for changing the public behavior. Studies indicate that arrogance, hubris, and a refusal to listen are critical factors leading to dysfunctionality of political leaders (Tourish, 2018).

The Prime Minister consulted with experts not only for guidance in the government's decision making process, but also to convey her messages to the public. In her public speeches during the first lockdown, at her side was the Chief Executive of the Ministry of Health, Dr. Bloomfield, and every medical question asked by journalists was answered by Dr. Bloomfield. As such, Ardern was the one to ensure that the public received the most accurate response, while using medical expertise to support the strategy that her government adopted and strengthen her message to the public (Kohlenbach, 2020). Ardern and Bloomfield's joint appearance defined Ardern's leadership style to be participatory and authentic in nature. As suggested (Northouse, 2016), leadership is not in the hands of one person or another but is best shared among a group or network of people who interact with each other. Furthermore, leadership expresses clarity regarding values and beliefs of leaders who identify with their position, while acting in accordance with "practice what you preach" (Morris, 2020; Shamir & Eilam, 2005).

The lesson here is clear: Listening to relevant experts is a vital asset for leaders in crisis management. Implementing this principle helps enhance public's trust in leadership.

Connecting communication: This management principle entails three components: knowledge and data; ongoing and frequent communication with the public; and clarity and simplicity. The knowledge and data component refers to provision of ongoing transparent, up-to-date information to the public in times of crisis that outlines the dynamic picture, what patterns of actions are being taken, and why specifically these measures have been selected. This is a necessary process that enables the public to try to meet the defined objective. Ardern laid out all of the information concerning COVID-19 for the public and did not hold back on detailing the hazards and warnings—from the scientific facts to the decisions that were taken. As early as March 16 (before announcing the first lockdown) Ardern warned the public about the economic impact of the pandemic, and stated that this would be more severe than the global economic crisis of 2008 (Roy & Graham-McLay, 2020). She also made clear that the government was doing everything it could to mitigate the economic hardships, and that the recovery would be

slow. Three days later, in a Facebook broadcast, Ardern announced the economic civilian support package, which included subsidized salaries for workers, unemployment insurance, and government grants for businesses (Ardern, 2020).

On March 25, announcing the first lockdown, Ardern warned that if the public does not comply with the guidelines and the lockdown is not enforced quickly, tens of thousands of New Zealanders could die from the disease. She added that even after the lockdown began, the situation in the country would get much worse before it got better ("Prime Minister," 2020). In this way Ardern conveyed severe messages to the public, while asserting that the government realizes the difficult impact of the steps taken to eliminate the pandemic, and that it would do everything to ease the situation by providing economic aid. Such tough (but credible) messages prompted the public to take collective action and build its trust in the leadership (Wilson, 2020). Such an approach also helps mitigate the tension (and sometimes anxiety) among the public in dynamic and crisis situations (Heifetz, 1994). Findings from studies examining emergencies show that mitigating tension and anxiety, or managing public emotions, is a critical role of leadership in guiding people through crises (Padan, 2017; Mastracci et al., 2014). An example of conveying a tough message to the public while connecting it to the broader context appeared in Ardern's announcement on the first lockdown: "Everything you will all give up for the next few weeks, all of the lost contact with others, all of the isolation, and difficult time entertaining children – it will literally save lives. Thousands of lives."[15] Ardern conveyed empathy regarding the restrictions and sacrifices while at the same time indicating that there is a specific reason for all this ("saving lives"). She gave the public direction, meaning, and empathy, and thus helped mobilize it toward the shared effort. This approach corresponds with the motivating language theory, which, using a mix of words and intonation, enables conveying tough messages without causing panic (Mayfield & Mayfield, 2018).

That said, there is no need to overburden the public with overly complex explanations and technical data that can create an opposite reaction and increase anxiety, and in certain cases cause citizens to feel that the struggle against the pandemic is beyond their capability and they are not qualified to contribute to it. Furthermore, crisis management must always consider the cognitive element, which includes appropriate terminology to frame the issues at hand. Adapted conceptualization, especially in appeals that seek to inspire the public to cooperate, is an important part of building a systemic-organizational infrastructure for emergencies: it helps increase the public's vigilance and involvement and its mobilization toward the collective effort (Padan, 2020).

The second component of connecting communication is associated with frequent, ongoing contact with the public. The New Zealand Ministry of Health provided daily updates to the public on cases of infection; published personal stories about those who had died from the disease; published the locations and accessibility of testing centers; updated the public on the findings of new studies about COVID-19; published guidelines and restrictions for the public; updated the results of epidemiological investigations; and much more. The updates, guidelines, and restrictions for the public were conveyed on various platforms and were updated and highlighted continuously, thereby enhancing the public association with the leadership. There are many examples for this: in the first lockdown media updates were provided daily at 1:00 PM by the Prime Minister and the Chief Executive of the Ministry of Health; special websites were created with information on COVID-19 and on the guidelines for the public, including for children; and the Prime Minister addressed the nation in a speech from her office, the first time in 40 years that a prime minister addressed the public from this official

venue. This of course was not a coincidence, as the leader's location granted the event a standing of national importance.

The government of New Zealand was also active on the social networks: live, informal updates were broadcast on Facebook. Ardern, who appeared in these broadcasts from her home, addressed families and children and expressed her feelings for them. She held interviews on Facebook with experts and professionals from diverse fields, such as with a psychologist who offered ideas for coping with stress (Ardern & Latta, 2020), or with a business mentor to explore how people can support their business (Ardern & Hamilton, 2020). This was a platform for the Prime Minister to help cultivate relevant knowledge for the public and help them cope with the crisis, while strengthening the sense that the leadership is working for the people's benefit. Ardern also allowed citizens to pose questions, including personal ones. Overall these broadcasts served to strengthen the public security against dysfunctional leadership (Tourish, 2020), and indeed bolstered the public's trust in the leadership. Appearing on the social network has another advantage: it helps mitigate the impact of viral fake news, which can increase public anxiety and cause it to develop apathy toward the pandemic, or alternatively, to ridicule the emergency situation.

The third component of connecting communication is clarity and simplicity: in all cases related to COVID-19 guidelines and restrictions, the government of New Zealand made sure to convey messages to the public that were accessible and comprehensible. This was the case concerning both messages on guidelines and restrictions, as well as messages associated with diverse issues of public interest, based on frequent mapping of public needs. Furthermore, the graphics the government used in the messaging campaign, on billboards, in official national events, on the internet, in local councils, in governmental institutions, and in business organizations, were all uniform and concise. This uniformity was expressed in the design, font size, and colors selected (e.g., bright yellow and not threatening red). Billboards contained universal and national symbols that all New Zealanders could identify with, such as the kiwi, the national bird. This was designed to appeal to the unifying national sentiment and to solicit national pride by using national symbols. The human figures shown on posters demonstrating social distancing were not identified ethnically or nationally. Here again the goal was to create broad citizen identification with the messages.

Several lessons can be learned from the principle of connecting communication: When it is managed and carried out by an integrative system, it can build the foundations for the entire public's understanding of the challenging situation, and consequently encourage civilian involvement, provide credible knowledge and information, and convey this transparently to the public so as to increase the compliance with government guidelines. Overall this approach builds trust that corresponds with the public's day-to-day needs and the challenges that are addressed as part of the leadership's agenda. All these together help enhance the public's trust in its political leadership, and consequently its commitment to the shared objective and the joint effort (Wilson, 2020).

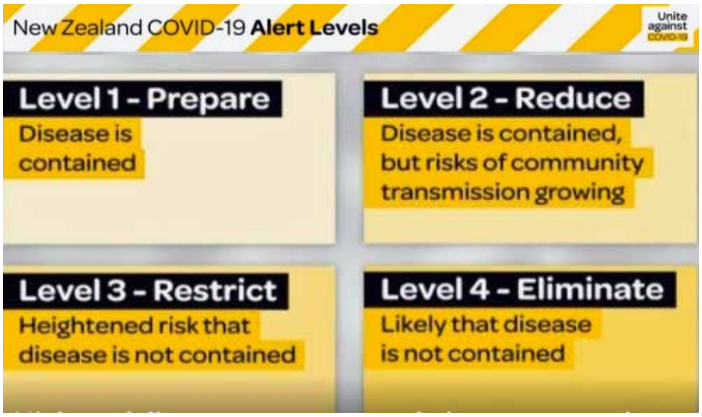

Figure 6: **New Zealand's alert system**
Source: New Zealand government website, https://covid19.govt.nz/alert-system/

Comprehensive plan: On March 21, the Prime Minister announced a four-level plan for the campaign against the spread of the pandemic[16] (Figure 6). This plan was designed to enable the government to integrate its activities to curb infection and was used as a management tool. Each stage in the plan, defined as an alert level, was defined with precision and detailed what the guidelines are and what measures were being taken, what each person is expected to do at home, and how the guidelines will be enforced in accordance with the level of morbidity in the country. The various levels presented to the public create a clear picture, and being well defined, made it easier for the public to cope with the challenges. The four levels are: 1) Prepare[17]: COVID-19 is contained inside New Zealand; 2) Reduce: COVID-19 is contained in New Zealand, but there is a risk of community transmission of the virus; 3) Restrict: there is a higher risk that COVID-19 is not contained inside New Zealand; 4) Eliminate: it is likely that COVID-19 is not contained inside New Zealand. Note that the names of the four levels encourage active engagement, so that all citizens become partners.

The publication of the plan helped order the leadership's decision making process. The plan enabled preparations and further planning for the government and for organizations and families. It enabled all public sectors and people to know what is permitted and what is prohibited, what their responsibilities are, including what are the boundaries in which they can operate. In this way, the plan helped stabilize the state system and created a degree of certainty within the uncertainty that prevailed among the public during the pandemic. The plan also provided transparency regarding the criteria guiding the decision making process; enabled individuals and communities to know what they need to do in order to save lives; and enabled the various organizations responsible for implementing the government's guidelines to carry out their tasks more precisely. Finally, the plan enabled a shared language with the public, leading to clearer communication with it.

The four-level plan, in addition to its being a framework for preparedness and action, serves as a tool for making sense of the event for the public, which is known as a central practice of leadership (Smircich & Morgan, 1982). This adds another important element beyond transparency and preparedness. The sense-making process enables easing the complexity that exists in the world into a situation that can be understood in words and that serves as a springboard for action (Weick, 2008). For example, the terms of the plan—such as "alert levels," or "bubble," meant to define those people that one can come into contact with—were adopted almost immediately and became part of the New Zealand lexicon. These semantics all helped ease the day-to-day complexity involved in changing behavior in the presence of the pandemic and make it more understandable for the public, and thus contribute to the shared mission.

The lesson is that applying an organized comprehensive plan and creating a shared language as a management tool for decision making facilitates planning and preparedness, enables a degree of certainty, and helps build the public trust in its leadership, as they all provide transparency about the leadership's decision making process.

Flexibility and adaptation: Listening to the people closely involved with the plan or process is critical for mapping failures or mishaps as early as possible. Another condition in this context is the need to demonstrate flexibility (toward the population, regulations, or practices) in order to be able to adjust or change them as needed. There are several examples where the government of New Zealand demonstrated flexibility and adaptation (which can be also defined as agility): the first is related to the notion of *differentiation*: the government rationally turned the public into a partner in the processes of introducing local solutions adapted to the local context, and

thus achieved greater compliance with the guidelines. During the transition from level 2 to level 3 in the four-level plan, the government announced that social gatherings would be limited to 10 people—including funerals and ethnic community gatherings, such as those of the Maori people. Maori leaders, church leaders, and other community figures expressed their concern, as they believed that restricting gatherings might offend the community. Holding religious ceremonies helps support the community in times of emergency, and certainly in a situation of prolonged stress (Lahav, 2020); it enhances the sense among people are they are "not alone," which is a formative component of the community's social capital (Padan & Elran, 2018). The Maori appeal was positively accepted by the government, which consequently amended the guidelines on gatherings and allowed (even at the third level) religious gatherings in groups of up to 50 people, within health guidelines.[18]

Recruiting influential public leaders is another example of flexibility and adaptation. Before the publication of the four-level plan, Ardern carried out frequent consultations with business leaders, in order to receive their support for the plan as a whole and for the comprehensive national lockdown (Trevett, 2020). Also, the inclusion of business leaders in the decision making helped recruit this important sector's support for the process as partners, ensuring that the severe measures would prevent serious economic harm later on.

The "bubble" method is a third example. The government understood that coping with COVID-19 trickles down to the community level, and thus created the "bubble method" (Donnell, 2020), which defined a specific group of family members and friends with whom, and only with whom, it was permitted to meet during the lockdown. Since in New Zealand there are many indigenous families with many children, the bubbles were not limited by number of people included in them, but were fixed in a way that forbids breaking the framework of the bubble. The bubble method was found to be effective for controlling the spread of the virus, as it creates a closed circle of interactions, allowing for easy tracking of chains of transmission and beyond that enabled a balance between the need to reduce exposure to COVID-19 and the human need for social interaction.

The lesson learned is that flexibility increases civilian commitment to the shared objective and strengthens the public's sense that the leadership is working for the citizens, thereby reinforcing the public's trust. Flexible management mechanisms show the public that the government is committed to the shared purpose that it has proclaimed and places importance on the existence of ongoing dialogue with the public by open channels of listening. This principle also illustrates that solutions formulated in collaboration with civilians (business leaders, indigenous peoples, and more) have greater prospects of success.

A premise of this article is that a crucial element in the success of the struggle against an unexpected and unfamiliar threat, such as COVID-19, is changing the behavioral conduct of the public. This change can be attained if there is public trust in leadership.

Conclusion

Around the world, the COVID-19 pandemic has strengthened the public sense that we live in a "risk society" that is increasingly preoccupied with the future, safety, security, and risk. This is a result of socio-technological disasters (the Chernobyl disaster in 1986 or the Bhopal disaster in India in 1984) and socio-environmental threats (e.g., fires and floods). The public demands a voice in decisions concerning the expected potential risks and the way to cope with them. It seems that scientists and experts (similar to public health experts in the COVID-19 crisis) no longer have a monopoly on knowledge and truth. This article illustrates that the transition from dangers to risks (such as experienced in

the COVID-19 crisis) challenges the state order not only because it punctures the traditional definition of national security in terms of the inherent threats, but also in the framework of how to achieve national security. The management principles detailed in this article emphasize the social component as a central factor in the struggle against an unfamiliar threat spreading in the "VUCA world"—a factor that has not received prominence in the field of national security discourse. For example, the principle of support by professional experts was one of Ardern's ways of coping with the component of ambiguity. Principles such as connecting communication with its three components and the comprehensive plan helped the government cope with the element of uncertainty and the complexity that characterizes the contemporary world.

Prof. Eyal Leshem, an expert on infectious diseases at Sheba Medical Center and an advisor to the World Health Organization, has referred to the question how certain countries (including New Zealand) "cleansed themselves" of COVID-19, while others (including Israel) have not succeeded in doing so by suggesting the following: "This is a social failure of all of us. We did not find the magnanimity and the trust in the authorities to obey the guidelines" ("Countries Cleansed," 2020). This statement is especially important because it does not address the medical or the health practice as "the missing link" in achieving the needed control of the pandemic, but rather points at the societal factor. A premise of this article is that a crucial element in the success of the struggle against an unexpected and unfamiliar threat, such as COVID-19, is changing the behavioral conduct of the public. This change can be attained if there is public trust in leadership. Exploring New Zealand as a case study helps shed light on this significant factor, as each of the five management principles discussed in this article increased the New Zealand public's trust in the leadership and hence raised its commitment to the shared goal and joint effort, consequently helping the government cope with the pandemic more effectively. These principles emphasize that the key to success in the struggle against an unfamiliar threat lies in the public's cooperation and relies on the ability of state authorities, as well as leadership, to earn this trust.

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Notes

1 The concept of "reality" that appears in the article is not something objective, but rather a product of social construction (Berger & Luckman, 1966).

2 "Fundamental surprise" is a concept developed by Zvi Lanir to describe a situation in which there is an unbridgeable gap between "reality" and our perception of it, which leads to events that undermine the foundations of the overall system ("Fundamental Surprise," n.d.).

3 "White swan" is a concept developed by Nassim Taleb in order to describe a phenomenon that all of us should have known was likely to occur in the global age ("Taleb Says," 2020).

4 For the sake of comparison, in Israel the rate is 1.5 percent of GDP.

5 For comparison: in March 2021 the Bank of Israel published the updated annual report for the year 2020. According to the report, Israel's GDP growth in 2020 has declined by 2.5 percent, while the unemployment rate for the year reached 15.7 percent of the workforce (including furlough), its highest level in 50 years.

6 For example, the earthquake in Christchurch on February 22, 2011, which took the lives of 181 people and injured around 2,000.

7 The COVID-19 outbreak outside of China began on January 22, 2020. On February 26, New Zealand reported the first case in its territory (brought by a citizen who had returned from Iran).

8 Most tourism in New Zealand is from China and Europe. Given the significant contribution of tourism to the economy, the spread of COVID-19 in New Zealand could have brought disaster. Therefore, a policy of flattening the curve was not enough for New Zealand, and it adopted a more aggressive policy of eliminating the virus.

9 Vietnam and Singapore, countries that have succeeded in flattening the curve, are led by men (Kwan et al., 2020).

10 According to the global gender index report published in 2020 by the World Economic Forum 2020 (World Forum Agenda, 2019), Iceland, Norway, and Finland are characterized by the highest degree of gender equality. At the same time, the COVID-19 mortality rate per capita in these countries is low (Kwan et al, 2020).

11 See UN Women, https://bit.ly/3qWLtWc

12 Ardern asked residents to be nice to one another and to offer help to neighbors during the Easter holiday. In one of her daily media appearances, she announced that the Easter bunny (which gives out presents to children on Easter) is an essential worker. In relating to this bunny, seemingly a marginal issue for a prime minister to address, Ardern conveyed a message of understanding and partnership with the challenges that the lockdown posed for families, including

parents' need to entertain their children during the lockdown. See https://bit.ly/39OGqSf

13 Resilience has many definitions. According to one, resilience is "the ability of an individual, community, or country to behave in an adaptive manner during a crisis or following a disruption, in order to return to a prior or improved level of function" (Padan & Gal, 2020).

14 "Minimize harm to lives…minimize harm to livelihoods" ("Prime Minister," 2020).

15 Jacinda Ardern's full lockdown speech, see: https://www.newsroom.co.nz/pm-jacinda-arderns-full-lockdown-speech

16 In an interview, Prof. Michael Baker, a senior epidemiologist who is part of the New Zealand Ministry of Health's COVID-19 advisory team, said that the country had adopted the four-stage program of Singapore and adapted it.

17 The semantics of the levels are gender-free and apply both to the singular and the plural. The language of the appeal is important and serves as another mechanism for enlisting the population.

18 It was very important to negotiate with the Maori people in New Zealand, as the COVID-19 crisis's economic impact on the indigenous population was unprecedented—the likelihood of their losing their employment and harming their ability to pay taxes and register to receive government grants was twice as high as that of the country's citizens of European ancestry. See: https://bit.ly/3fWOWSK