



Three Researchers Entrusted with the Nation's Fate: Document Novel Coronavirus “Expert Meeting”— Four Months of Struggling Against the People and the Government

Hirono Shinji, nonfiction writer

He has a quick pace.

Oshitani Hitoshi (61), Professor at the Tohoku University Graduate School of Medicine and the man who has continued to work these four months focused on Japan's COVID-19 measures, is said to have gone mountain climbing 100 days a year while as a student and member of the alpine club, and even today is said to do so 50 days a year. He is a good walker.

I finally caught him on May 21 at the Central Government Building No. 8, located diagonally across from the Prime Minister's Official Residence. Oshitani, who had just come out of the meeting room right after a meeting of the Advisory Committee on the Basic Action Policy that had finished the government's policy on the lifting of the state of emergency for 42 prefectures, stuck to his position of not carelessly commenting. But he spoke his true feelings at one of the questions.

“I don't think he should've said it. I told him not to.”

What I asked about was the estimate that Nishiura Hiroshi (42), Professor at the Hokkaido University Graduate School of Medicine and who leads the Counter-Cluster Measures Team of the Ministry of Health, Labour and Welfare (MHLW) together with Oshitani, had released, saying that if measures weren't taken, 420,000 would die. Nishiura had the attention of those around him with the nickname, the “80% uncle,” as the virus spread. However, as we entered a period where the number of infected persons visibly dwindled, this turned to criticism, saying that the statement was over-exaggerated or an inciting statement said with a political motive.

However, without giving a moment for me to ask about the reason, Oshitani said, “Next on the agenda...” in a small voice and he took a sharp turn, and quickly disappeared toward the elevator door.

The number of deceased in Japan remained in the low 900s by the end of May. This was three digits less than America and one digit less than Germany, on par with South Korea when comparing number of deaths per 100,000 people. Setting aside whether or not there was a collapse of the medical care system, the situation ended without reaching “triage,” the worst phase. We cannot



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even confront an unknown virus without the knowledge of experts. Standing on the front lines in Japan, Oshitani and Nishiura were always beset with the conflict of where to take their position on the border between science and politics.

Based on the analysis of cluster measures, the Expert Meeting on the Novel Coronavirus Disease Control compiled proposals, met, and finally the government makes decisions. This is the official stance, but meetings of experts took place frequently to respond to residents' anxiety, and soon, people started mistakenly thinking that the experts were making decisions.

Nishiura visualized the invisible virus for residents using mathematical modeling and analysis, and Oshitani came up with Japan's unique strategy of cluster measures. These two researchers soon became the targets for criticism.

Omi Shigeru (70), the vice chair of the Expert Meeting (Chair of the Advisory Committee on the Basic Action Policy), both held the mic as the role of expert coordinator and participated as the "temporary scientific advisor" at Prime Minister Abe Shinzo's press conferences.

Offices Within the MHLW

Until the end of May, there were two conference rooms, one each on the 11th and 12th floors of the Central Government Building No. 5 that faces Hibiya Park, just shy of 100 square meters each. They were the offices of the Counter-Cluster Measures Team of MHLW. This was a team of about thirty people in total, with the hybrid group of Tohoku, Niigata and Nagasaki Universities led by Oshitani taking on a strategy of epidemiological assessment and Nishiura's Hokkaido University group taking on a strategy of mathematical modeling and analysis.

It was expected that Kato Katsunobu, Minister of Health, Labour and Welfare, would function as chief for the Basic Policies for Novel Coronavirus Disease Control that were decided by the government on February 25. From there, professional contract tracers were dispatched to support areas where clusters were occurring. This was the preliminary "crisis management center" of experts placed within the Ministry.

Oshitani evaluated this from the beginning. "Experts have finally been placed within the core of the government. This may be the first time this kind of crisis management has been done in Japan. [Omission] I think this may be something that Japan ought to aim for in the future." (May, 2020, *Nikkei Science*. A statement given at Wakita Takaji and Omi Shigeru's round-table talk held on February 26)

Okabe Nobuhiko, a member of the Expert Meeting who also served as chairman of the Pandemic Preparedness Plan Advisory Committee in 2009, evaluated it, saying, "Compared to 2009, it is an improvement that experts were included in the organization's chain of command in order to listen to judgement from the experts."

The officers who were in charge of crisis management from eleven years ago are no longer at the core of the organization. This is because the original administration, where committees were consulted and reports were received, did not keep up with the pandemic. As the interview

progressed, a forced smile was given with the comment, “It is a paper tiger.” One of the researchers who had been in and out of the rooms testified to this.

“Initially, we devoted an enormous amount of time to organizing information. From each local government’s website, what we could see was prefecture, age, and gender, so we searched for specific locations and occupations from articles in local newspapers, and input this into an excel file. This searching was carried out by highly skilled people with medical licenses. The fresh information found by the Institutes of Public Health should have been consolidated with the National Institute of Health Sciences, but handling rules for the information became a problem.”

They were forced to do manual labor that you wouldn’t expect someone in the central part of an organization to do.

Ambitions of a Theoretical Epidemiologist

I visited Nishiura, the other “conference room head,” as the morning sunlight filtered in to the conference on May 8, the day when the government began to quickly accelerate towards the lifting of the state of emergency. He sighed slightly over the decision to gradually relax the request for closure of businesses, but he immediately began to brokenly talk.

“Of course, there are exciting things in analyzing data, and it is a good experience for members of the lab. But if I’m honest, we are held liable even though we have no authority to make decisions in the middle of the pandemic. There is almost nothing good about being a part of the MHLW. However, I couldn’t just keep quiet and watch as the epidemic spread in this country which raised me and that was focused on conventional administrative responses.”

Nishiura was born in Osaka and raised in Kobe. The Great Hanshin Awaji Earthquake occurred in the winter when he was 17 (1995), a time when he was a young scientific boy who loved solar cars and robot contests. Touched by the doctors who put their heart into support activities in his town, which had been completely changed by the earthquake, he pursued a career in medicine.

While attending the Miyazaki Medical College (currently Miyazaki University School of Medicine), he participated in a polio eradication project in a developing country, and learned of the “basic reproduction number,” which refers to how many people an infection is spread to from one infected person. In other words, he encountered theoretical epidemiology, as he said in an interview posted on the Japan Science and Technology Agency website. Mathematical modeling and analysis is the study of how infectious diseases propagate and how quickly symptoms appear and the disease becomes serious in infected persons, with this process expressed using mathematical expressions. If applied, future predications can be made.

He is an energetic man. Theoretical epidemiology, a new study, is focused around Europe, and there aren’t any mentors in Japan. And so he entered the Imperial College London, where the first mentor was, as a visiting researcher, and from there, he wandered both in Japan and abroad to the University of Tübingen, Nagasaki University, the University of Utrecht, and the University of Hong Kong.

When the 2009 Novel influenza (A/H1N) became a pandemic while he was a postdoctoral research fellow at the University of Utrecht in 2009, he calculated the fatality rate of the virus at the 1957 influenza pandemic (Asian Flu) level, and demonstrated that the Narita Airport Quarantine Station would stop infections within Japan by half a day at most.

He assumed the role of Associate Professor at the University of Tokyo Graduate School of Medicine in 2013. He had a lab at Hokkaido University four years earlier. Professor Nakaya Tomoki (spatial epidemiology), Tohoku University The Graduate School of Environmental Studies, affirmed this, as she has had a close relationship with Nishiura since his days in Europe and she supported the Counter-Cluster Measures Team through a connection with Oshitani.

“Every summer for ten days, Dr. Nishiura would host a camp for free to teach math to applicants at the Institute of Statistical Mathematics in Tachikawa City, Tokyo. He is a wonderful person, becoming single-minded in his belief that his own research could benefit society.”

There aren't any places for many students to gather if you look at public health through the field of view of Japanese medical schools. Spreading the undeveloped field of mathematical modeling study to the world above all else. If this is ambition, then perhaps you can say that the Coronavirus Crisis is its greatest stage.

Raising Voices to Say, “What!”

At the beginning of February, when the state of the epidemic within Japan was predicted, Nishiura met with Health Minister Kato to receive the status of government offices that could handle data on infected persons, and he was shown the rooms on the *Diamond Princess*, where there was furious dedication to the response to the cruise ship in Yokohama Port that had experienced a mass infection.

“I made various estimates. Specifically, when I estimated the people who would show symptoms after they were determined to be negative when leaving the ship, my calculations happen to have been right. Through that, I earned trust, and came to frequently visit the Minister's office.”

Soon after, Nishiura became involved in the Counter-Cluster Measures Team, and was permitted to attend the Expert Meeting. He only returned to the home his family owned in Sapporo twice over a four-month period. He was exposed to enough pressure to gain more than 10 kg, working late at the MHLW and sleeping at business hotels.

I met Omi Shigeru (President of Japan Community Health care Organization (JCHO)), Vice Chair of the Novel Coronavirus Expert Meeting, on the evening of May 22.

The previous day, PM Abe and others suggested the possibility of a complete lifting of the state of emergency for Tokyo and the final five prefectures. Omi summarized the last four months as, “like a reckless sprint.”

The Expert Meeting was sometimes participated in not only by its twelve members made up of Omi, Oshitani, and others, but also by experts that were not official members like Nishiura. The arguments of international virology experts, clinicians, and those with different experience

sometimes got complicated. Omi said that, “We fought and argued. They argued, saying, ‘You should recommend this,’ or ‘There’s no evidence,’ and some raised their voices, saying, ‘What!’ It was a group with such a strong desire to be useful.”

Prior to the state of emergency being lifted, something was announced every dozen days or so on average – analysis and proposals six times, an observation three times, and a request once – and the press conference that centered around Omi held after these announcements would sometimes last more than two hours, and sometimes they would finish after midnight.

The first meeting was on February 26, nine days before the start of the Counter-Cluster Measures Team, but according to Omi, The MHLW had already consulted with him further back at the beginning of February.

“They asked if a certain idea was good, whether it was early in the morning or in the middle of the night. But they gradually sensed that rather than just having us respond to their questions, we would need to actively analyze data and make recommendations as experts or we couldn’t fulfill our roles.”

The Analysis of Current Conditions Written in a Blog

I reckon that the man with a quick pace, Oshitani Hitoshi of Tohoku University, was the one who was in top gear at the front. As a professional in epidemiological assessment, he looked at data on infected persons during this period, circulated his evaluations, and frequently exchanged emails with the MHLW’s Nishiura, all of which was later revealed in a conference report at a workshop of the Japanese Society of Public Health held on March 29, 2020.

Later, using all of his knowledge to discover a strategy that would produce results from cluster measures, he wrote in his lab’s blog every few days, discussing his analysis of current conditions thoroughly over five to ten pages. It was a solid discussion, simple enough for even an average person to understand, talking about concepts to confront this virus that was difficult to respond to, the risk of Japan becoming a second Wuhan with its fragile medical system, and more.

Omi, who had been friends with Oshitani for more than twenty years since meeting at the WHO Western Pacific Regional Office in Manila, Philippines, evaluated the pumped-up Oshitani this way.

“Before logic or a sense of responsibility, he seemed to be running at full speed with a desire to emotionally and physically do something. He worked, forgetting about food and sleep. He devoted everything to infectious diseases.”

According to *Pandemikku to tatakau (Fighting a Pandemic)*, co-authored with writer Sena Hideaki, Oshitani took his wife and two children with him and was transferred to Zambia for virus research for three years from 1991 when he was a postdoctoral research fellow at the National Sendai Hospital (currently Sendai Medical Center). He was blessed with his third child while there. He then studied abroad at the University of Texas after doing research in an environment where several thousand people die each year due to measles and cholera. This was because he strongly felt that it was necessary to pursue public health – not virology – to improve medical conditions.

Doctors think about how to do their best for one person. In public health, we think about what is best for a group of humans. [...] What must we prioritize and consider now as a society, and how should we consider these problems within society? (from the aforementioned work)

Countermeasures necessary for public health – disclosing information publicly and refraining from traveling – often conflict with national interest. Sometimes, an opening must be found while maintaining dialogue with political power and the general public, and psychological and strategic considerations are also required.

Oshitani attracted attention in 2003 when he stood face to face with Severe Acute Respiratory Syndrome (SARS) as the person in charge of infectious diseases measures for the Asia region at the WHO.

The Front-line Commander who Stopped SARS

Pneumonia of unknown cause broke out in the Guangdong Province in China. Upon obtaining snippets of information in February, he got in to Beijing at once, being snapped at by officials who repeatedly said that the situation was “settled.” After resilient negotiations over the course of two weeks, he managed to hold a conference to share information, contingent upon keeping it private. According to *Sekai wo sukutta ishi* (Carlo Urbani dead fight—SARS doctor who saved the world) (NHK Publishing), it was confirmed that the number of infected persons was two times the original announcement at 700 and the number of deceased was five times as high at 25, and it was also confirmed that the x-rays of patients indicated signs of viral pneumonia, which differed from the authorities’ claims.

He also entered Vietnam to confirm the state of SARS having run rampant in a hospital in Hanoi, and then formed a countermeasure team upon returning to Manila.

When the WHO released an announcement of the containment of SARS outbreaks in July, ratings for Oshitani, who had played a key role in the field, soared both in Japan and abroad.

Newsweek (Japanese Edition) (October 20, 2004 edition) published an article entitled, “The Front-line Commander who Stopped SARS,” and *Bungeishunju* (January 2006 edition) also wrote that he was the, “secret weapon against the avian influenza,” placing Oshitani alongside the late Mrs. Ogata Sadako, the former United Nations High Commissioner for Refugees, and violinist Goto Midori in their special feature, “Twenty Japanese People Who Shine Around the World.” Oshitani, who was 44 at the time, was undoubtedly a young hero. This mirrors Nishiura, who has come under the spotlight this time at the age of 42.

As many of the SARS patients from 17 years ago became severely ill, it was possible to trace almost all sources of infection. In contrast to this, the troublesome thing about COVID-19 is that there are many asymptomatic infected persons. One of its characteristics is that infections spread while we are unaware of who spread it to who.

Based on data from the initial stage of the epidemic, Oshitani wrote on his blog on February 12 that, “The probability of an invisible chain of infections in Japan is increasing,” and on the

following day, three people emerged in succession in Tokyo and Wakayama Prefecture where the path of infection was unknown. From this day, the risk of a large-scale chain of infections spreading became clear, and on the following day, February 14, the government started the Expert Meeting.

The Birth of the “Hokkaido Model”

“Dr. Omi, something is strange.”

There was a report from Oshitani in mid-February, when a strategy was required that was different from authoritarian measures like the lockdown in Wuhan and stringent restrictions on going out.

“Even if we research the history of contact with infected persons, we can’t find any more infected persons who had close contact with those infected persons. An epidemic is occurring, even though only one person in five is infecting other people. This doesn’t make sense.”

A distinctive quality of epidemiological assessment, Oshitani’s area of expertise, is that it can expose common traits of infected persons even in stages where the mechanism wasn’t clear, leading to a prevention of future infections. Regarding this idea, Omi added the following.

“In Dr. Oshitani’s words, we ‘investigate looking backwards’. If multiple infected persons are found in a certain area, we ask not just about close contact with infected persons, but also we go ‘behind’ the infected persons, that is, we go back in the past and ask. Doing so means we will find a place from the infected persons’ past where there was a common risk of infection, and we look in to the people who went to that place. We are also proactively looking in to who had close contact with infected persons like in other countries, but as most have not been infected, it is inefficient.”

A breakthrough quickly came into view in four days from the start of the Counter-Cluster Measures Team on February 25.

A person is 18.7 times more likely to become infected in an enclosed environment compared to other environments.

Nishiura, who performed an analysis on what was to become the base of the now common knowledge “3Cs” (closed spaces, crowded places and close-contact settings), talks about this.

“We began looking in to the common traits of the first domestic transmissions: first a bus in Nara Prefecture and then a fitness club in Ichikawa City (Chiba Prefecture). We were certain that transmission was occurring indoors where ventilation was poor.”

What was found through backwards investigation were clusters in an exhibition hall in Kitami City in Hokkaido and in a live music club in Osaka.

These places could be supervised but what Oshitani and others feared were infected persons where the path of infection was unknown. They were called, “sporadic cases.” It was suspected that there were many undetected infected persons behind this.

Experts from the National Institute of Infectious Diseases flew to Hokkaido, where ten symptomatic people were confirmed in one day on February 18, but the spread of infections was actually widely distributed in Kitami City in the north, Shinhidaka Town in the south, Akkeshi

Town in the east, and more. It was assumed that there was a large-scale cluster that had originated with the Sapporo Snow Festival, but a common place or person of contact did not stand out.

At the end of the discussions on the night of Thursday the 27th, the third day since they started, Oshitani made a hypothesis: “A large-scale cluster is occurring among young persons who are less likely to become severely ill.” Oshitani said that there was no other explanation.

Healthy but infected people in their teens up to their 50s carried the virus from Sapporo to the edges of the prefecture, and it was there that infected elderly people fell ill and were first detected. What if we see many seriously ill or deceased people in facilities for senior citizens in the countryside with few doctors and hospital beds... Fearing this, both Oshitani and Nishiura advised Hokkaido Governor Suzuki Naomichi (39) to announce a state of emergency before the weekend. Governor Suzuki, who took their advice, announced the state of emergency on the following day, and called on the residents in Hokkaido to refrain from leaving their homes for the weekend, from February 29 to March 1. Declaring himself responsible for the consequences, the young governor gained support from residents. After the meeting following the Expert Meeting on March 19, Nishiura mentioned that, “After the declaration, a decline in infected persons was obvious. I think this “Hokkaido Model” initiative was successful.”

Nishiura’s Estimates that Influenced Prefectural Governors

Nishiura initially remained behind the scenes. But he soon began to stand out.

On March 19, Osaka Governor Yoshimura Hirofumi requested that residents refrain from coming and going to and from Hyogo Prefecture during the three-day weekend. This was based on Nishiura’s estimates. His estimates projected that the number of infected persons in the two prefectures would reach 586 by March 27 and 3,374 by April 3. The Tokyo Metropolitan Government was also notified of a similar estimate.

Nishiura sat at the same table as Tokyo Governor Koike Yuriko during a meeting on March 30. From his seat, Nishiura showed that there were signs of an exponential increase in cases in Tokyo and that around 30% of sporadic cases were suspected of being from infections in hostess bars, bars, and other night spots, and so Koike once again requested that people refrain from going out at night.

This was the day that the death of comedian Shimura Ken was announced and before long, the lights of night spots in the Kabukicho and Roppongi nightlife districts of Tokyo were quickly extinguished.

“I think they were surprised by our notification, which was like a memo, but the governments of Osaka and Tokyo both responded. The Osaka Mayor’s remarks became a big news story and they were very angry within the MHLW. Further study was necessary in setting the basic reproduction number to the same 2.5 as the epidemic in Germany. However, as we had mathematical modeling and analysis, we were able to show where it would go ahead of time.”

It is easy to gain the support of an incumbent governor for crisis management. Video meetings

that Koike began to hold online were soon mocked as being a promotion for the Tokyo gubernatorial election, and Nishiura often came to be invited as a guest to these meetings. Up until this point, the concerns of scientists and politicians were the same.

Nishiura immediately became a political icon. The person by his side who was most worried about this may have been Oshitani.

This concern was becoming a reality when the contradictions between public health and the economy started to come to the surface.

“Today, a ‘COVID-19 cluster measures expert’ will hold a public meeting to explain cluster measures in detail [...] to the media.”

This notice reached reporters of the MHLW press club after 8 am on April 14, one week after the state of emergency. The announcement said the meeting would be held 24 hours later, but the venue was full to capacity as the announcement said the “80% uncle” would come.

Interference from MHLW Leadership

What Nishiura made clear with his estimate was that, “if no measures are taken to reduce contact between people, there is a risk of critically ill patients in Japan rising to 850,000 and around half of those, 420,000, could die.”

Nishiura claimed that the name “cluster measures expert” was actually because this wasn’t an action as part of the Counter-Cluster Measures Team, but evening editions of various newspapers from that day communicated the estimate as an official opinion of the MHLW Counter-Cluster Measures Team (*The Nikkei*). In response to this, Chief Cabinet Secretary Suga Yoshihide warned at a meeting the following day that this was not an official opinion.

Why did he make his estimate public? Nishiura revealed a conflict.

“If we don’t release the possibility of how many people could die if we don’t take any measures, then we can’t communicate just how serious of an infectious disease this is. Of course, I explained the contents at the MHLW, and communicated this to Minister Kato. However, leaders at the MHLW took warning, learning that I was going to say this publicly. The night before and the morning of the announcement, Suzuki Yasuhiro, Chief Medical and Global Health Officer of MHLW and other leaders confirmed that I was going to make the announcement as an individual and not as part of the Counter-Cluster Measures Team.”

Even though the objective was for the country to learn of the need for countermeasures, if excessive anxiety spread among residents and the economy cooled down, then residents would require politicians and the government to take responsibility. Would they accept this responsibility? Both Minister Kato and Chief Suzuki would not make that decision.

Before this response, Nishiura’s sense of isolation deepened, feeling that he had to do this on his own. It was Oshitani who became serious about this.

“Dr. Oshitani strongly questioned me [Nishiura] on announcing the estimate of 420,000 people alone. He said, ‘You can’t be burdened with this on your own.’”

Stepping Forward with Determination

It was actually Oshitani who gave Nishiura the nickname, “the 80% uncle.” He was backing up Nishiura’s estimate of an 80% reduction, understanding the argument. But Oshitani said the predication for number of deaths was different. He said, “This is a heavy number that ought to be said by the prime minister,” and, “If we can’t control the virus, then this country is done for, but even this is best left unsaid.”

“I thought that, even if I have to take the blame myself, if it helps control the epidemic even a little then we ought to actively assess the damages, and because of this, there was a considerable difference in the line of thinking between me and Dr. Oshitani.”

There was another reason why Oshitani ignored this and stepped forward.

We have to go back one month.

As we entered March, the number of infected persons clearly began to increase in urban areas where the number of people returning to Japan had increased.

“We needed to issue a warning in Tokyo and Osaka at that time. Most of the people returning to Japan were returning to the Tokyo metropolitan area centered around Tokyo or the Kinki area around Osaka. So it was obvious that the number of infected persons would initially increase in Tokyo and Osaka.”

What Nishiura would later regret was the surge of Japanese people returning to Japan at Haneda, Narita and Kansai Airports wanting to avoid lockdowns in Europe and America. A large-scale epidemic in Europe had occurred, first in Italy and then in Spain, Germany and the United Kingdom. He says that we may have been able to somewhat prevent the spread of infections in April if we had further emphasized warnings for those returning to Japan at the March 19 meeting.

As consultations from those returning home, shipments of test specimens, and phone consultations was increasing, untraceable sporadic cases were discovered one after the next at public health centers. Operations at public health centers were overwhelmed and they stopped keeping up with the cluster investigations they were responsible for.

It had come time to switch to the method of reducing contact for the whole population by 80%, and there was harsh criticism with this point, saying that, “Cluster measures had failed.”

Nishiura said that, “We were aware of the problem that we didn’t have a voice.”

“Saying we failed was a misunderstanding. The policy was switched to the state of emergency on April 7. In urban areas where the number of infected persons had increased, we changed from cluster measures to methods for reducing contact by 80%. But neither the Minister nor the Chief Medical Officer made these scientific explanations public. There was no role of scientific advisor set up in Japan to offer opinions to the government as a representative of the scientific world.”

As April began, Nishiura invited familiar researchers in risk communication and launched a “cluster measures expert” twitter account (@ClusterJapan), adding people from advertising agencies to the team. Oshitani was against this.

“He said that scientists must stick to analysis, and that speaking out was a mistake by nature. Oshitani, standing at the front, kept from making reference to political scope. In and of itself, that’s true. This is because the opinions of scientists are on the side of something to be adopted. But having been asked about my ability as a scientist, I decided to step out on my own for just a moment as a desperate measure. I said, ‘Here we go.’”

Though he was against it, Oshitani gave his own message seeking cooperation in reducing contact with a stern expression in a video posted to the “cluster measures expert” account on April 8.

Nishiura said that while Oshitani said that estimates should not be given until the end, he was more concerned about Nishiura, who was the center of criticism, than Nishiura was himself.

Oshitani’s name was also in the announcement for the public meeting, but he was absent as he also had a meeting with the WHO. From then on, Oshitani turned down most requests from the media to appear, and for a short while, he distanced himself from the offices of the MHLW Counter-Cluster Measures Team.

Inspired by Kobayashi Hideo’s Book

Rather than just having us respond to questions, we actively analyze data and make recommendations as experts.

This was decided by the members of the Expert Meeting themselves, but at the same time, the burden weighed heavily on them. In particular, the total hours at work increased for Omi, who was in a managerial role.

On May 14, when the state of emergency was lifted for 39 prefectures, Omi’s actions included the Expert Meeting (approx. 1 hour and 45 minutes) from 8:30 a.m., the Advisory Committee on the Basic Action Policy (approx. 2 hours and 15 minutes) from 10:30 a.m., squeezing in his participation in PM Abe’s press conference in the evening (approx. 1 hour), and a press conference as the Expert Meeting from 8:45 p.m. (approx. 2 hours).

In the dark alleyway between the MHLW building and the Bar Association Building, 70-year old Omi got into a taxi after 11 p.m., carrying a bag stuffed full of documents. I don’t know anyone who’s put their heart into sharing this much as the chairman of a committee or commission.

Looking back, Omi says the following.

“I knew that if I shared while out in front, there was a risk that I would be punished for standing out too much. But as a pro, I have the responsibility to actively share. This is because I made up my mind to always decide to ‘cross the Rubicon’, having discussions until late at night as I was troubled in the midst of the tense situation every day.”

He finished by deliberately saying, “Huh?” while pointing, and what suddenly made his mood brighter was a portrait of Kobayashi Hideo, author and literary critic (1902–1983), which decorated the reception room at the headquarters of Bungeishunju where we spoke.

“When I was around 20, I think somewhere around Idabashi, I saw Mr. Kobayashi get into a taxi once. This was when I was worried about my career path and happen to have been influenced

by *Mushi no seishin* (*The Spirit of Unselfishness*). I still remember well how he sort of looked in my direction...”

The Difficulty of Communication

Omi, who was born in Tokyo, had a crane operator at an iron and steel company for a father. After he came back from one year of studying abroad in America, he set his sights on the University of Tokyo in his third year in high school, but this was also the year of the Yasuda Auditorium Dispute (a conflict in the University of Tokyo), and missing his chance to take the entrance exam, he went to Keio University. Wishing to be a diplomat, he chose the law department, but among students at the time, there was a sense of public workers being “enemies on the side of power,” and he struggled with whether this was a job he should or shouldn’t take. He got a hold of *Mushi no seishin* around that time. Later, he considered becoming a doctor, immediately submitted his notice of withdrawal from school, studied very hard, and passed the test to become an inaugural student at Jichi Medical University.

After graduation, he worked as a hospital doctor in the Izu Seven Islands (Izu Islands) for nine years, and by the time he was 40, he was working at the Who Western Pacific Regional Office in Manila after working at the MHLW. His desire to be a diplomat had come true.

His career also included working as the Regional Director for ten years starting at age 50, and in 2006, he ran and lost in the election for Director-General at WHO headquarters.

The division of the Expert Meeting was based on Omi’s experience at the WHO.

“For SARS, I accepted interviews almost daily from the AP, Reuters, and other media. In no time, the WHO’s analysis and recommendations had spread around the world. From this experience, there was this idea that cooperating with the media was important. But it was difficult this time. I sometimes felt the difficulty of risk communication because I couldn’t accurately convey our intentions.”

At a press conference on March 2, Omi separated out everyone in their teens, 20s, and 30s and called on them to not go to high risk places. It was also pointed out that the reason why he cited teenagers as having few cases of severe illness was, “Only to justify the prime minister’s school closure measures for elementary, junior high, and high schools” (Masuzoe Yoichi, scholar in international politics and former Tokyo governor).

When the state of emergency was issued on April 7, PM Abe touted that, “[all of us strive to reduce opportunities for people-to-people contact by] at least 70% or ideally 80%” in regards to the goal of reducing contact, but advocate Nishiura’s story had been that 80% was absolutely necessary right from the start.

Omi, who was also present, added that at 70%, it would take longer for the new cases to decrease, but it was not made clear the kind of dialogue that was had between Abe and the administration regarding how the minimum had slipped to 70%.

Regarding the public release of the proceedings, Omi only said that it was something for the government to decide at the May 29 meeting.

“Indeed, I sometimes felt that an idea had been created, or we may have created it ourselves, that perhaps the experts had decided all of the country’s measures through meeting actively, or perhaps it was the experts’ responsibility for measures that weren’t going well.”

He continued, saying, “It is different from normal times.”

Looking back, he says that, “This came from the belief that experts ought to take a little step forward and speak to society precisely because it is a national crisis. However, I wondered if this was really a little step forward or several steps forward, and it was a time for learning many things.”

Different from Normal Science

Incidentally, at a conference held on May 1, ally Oshitani insisted on the importance of correcting the course, saying that, “Experts should give recommendations to the politicians and it is the government that should make judgements and share the information.”

When asked about Nishiura’s estimate of 420,000 dead, Omi put forward the following.

“I think that, in a matter of speaking, mathematical modeling and analysis is just one of many means. Even though saying 420,000 doesn’t mean that he was saying that 420,000 will die, people reacted by saying, ‘That many will die?’. Surely there are people who believe that the experts are responsible if, as a result, stores close, income dries up, and people lose their jobs. But if experts fear this but do not share any information, then infections will spread. Measures against infectious diseases are different from normal science, and it is difficult.”

Say nothing and wait for results or change the future by moving into action. It was four months of exploring residents’ reactions. But only one thing was added.

“We had never shown Japan’s infectious diseases measures through this much data until now. I think that this was a new endeavor. Of course, there were also times when our feelings were more accurate.”

There is more than one response to infectious diseases measures. Because of this, the readiness of politicians to accept responsibility for having focused on the worst case scenario will surely be called into question in regards to policy decisions directed at the second wave.

Translated from “Kokka no Meibun wo takusareta Sannin no kenkyusha: Dokyumento Kansensho ‘Senmonka Kaigi’—Kokumin to Seifu wo aiteni funtoshita yonkagetsu (Three Researchers Entrusted with the Nation’s Fate: Document Novel Coronavirus “Expert Meeting” – Four Months of Struggling Against the People and the Government),” Bungeishunju, July 2020, pp. 162-174. (Courtesy of Bungeishunju, Ltd.) [October 2020]

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