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Article



Governmental Response to Crises and Its Implications for Street-Level Implementation: Policy Ambiguity, Risk, and Discretion during the COVID-19 Pandemic

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ABSTRACT *What are the implications of governmental responses to crises for street-level implementation? The COVID-19 pandemic presents a unique opportunity to compare the formal role that decision-makers require of street-level bureaucrats (SLBs) during a crisis. Textual analysis of 36 legislative documents and emergency regulations in Israel indicates that the additional duties assigned to police officers, teachers, and physicians reflect three interrelated changes in street-level implementation: increased policy ambiguity, higher risk exposure, and expanded discretion. Decision-makers' expectations of SLBs during a crisis highlight the inherent limit of policy-as-written to account for the operational, action-imperative essence of on-the-ground service delivery.*

Note: In the interests of space, street-level theory and the pandemic context underpinning the articles for this Special Issue are discussed in detail in the Introduction to the Issue.

Keywords: street-level bureaucrats; crisis; discretion; risk; COVID-19

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1. Introduction

It is now well-accepted that the relationships between policy decision-makers and street-level bureaucrats (SLBs), who represent two ends of the government, are complicated. In general, decision-makers aim to control and reduce street-level discretion (Lipsky 2010), while often limiting SLBs' resources (Lavee 2020), mainly, but not solely, by increasing regulation and red tape (Shim et al. 2017). Moreover, street-level implementation is challenged by the inherent ambiguity of policy-as-designed because "policy as written often fails to teach implementers what they need to know to *do* policy" (Hill 2006, p. 265). Moreover, intensified ambiguity of formal policy decisions during recent years makes it almost impossible to translate formal policy decisions into implementation approved by both SLBs and decision-makers (Lipsky 2010; Gofen 2014). Crises further intensify the already complicated relationships between policy decision-makers and SLBs, because clear, comprehensive information from the government to its workforce is crucial during a crisis (French 2011), especially for SLBs, whose work efficacy and understanding of the new conditions imposed by the crisis depend upon information provided by higher-ups (Weick 2012). Indeed, during a crisis "[g]overnment officials must use available information and guidelines in order to develop policies that will maximize positive social and economic return in their communities while being sensitive to public concerns regarding factors that were considered during policy formulation" (French and Raymond 2009, p. 829).

In general, the duties and responsibilities that decision-makers require SLBs to carry out are stated in formal policy decisions, referred to as policy-as-designed or policy-as-written, and distinguished from SLBs' actual actions, referred to as policy-as-practiced (Hill 2006; Gofen 2014). Notably, street-level scholarship often focuses on policy-as-written as a given starting point, and its ambiguity and implications for street-level implementation are well-documented (Gofen et al. 2014; Gassner and Gofen 2018, 2019; Davidovitz and Cohen 2020). Nevertheless, the street-level perspective on formal policy decisions is understudied.

To better understand the official role expected from SLBs during crises, as the state representatives at the frontlines, this study explores the implications of governmental responses to crises for street-level implementation. Drawing on the Israeli governmental response to the COVID-19 pandemic, our analysis explores the official expectations of SLBs as reflected in formal policy decisions aimed at addressing the pandemic. Data draws on 36 legislative documents from the Israeli Ministry of Health. Specifically, the Public Health Order ("Tzav Briut Ha'am"), including emergency regulations related to the coronavirus. To allow for a comprehensive understanding, the analysis explores and compares SLBs from three different professions, whose daily work was affected by the pandemic, and who are considered classic professional SLBs (Lipsky 2010), namely, physicians, police officers, and teachers.

The findings uncover that the governmental response entails requiring additional duties from SLBs, which imply three main consequences for street-level implementation: that is, increased policy ambiguity, higher exposure to risk, and expanded discretion, which are ascribed to, among other things, the "pandemic fog". Moreover, findings suggest that neither training nor compensation were provided for bearing additional risk and/or taking on additional duties.

Three contributions emerged from focusing on the implications of formal policy decisions for street-level implementation. First, the analysis indicates that even in times of crisis, decision-makers have difficulty in clearly defining for SLBs their duties and responsibilities. Second, in times of crisis, decision-makers' expectations of SLBs reflect exposure to different, new risks, which vary between SLBs from different professions. Lastly, multiple, additional duties imply

that discretion-as-granted expands because SLBs encounter additional decision-making points during new types of direct-delivery interactions. Moreover, additional duties may result in a need to prioritize between duties, thus implying greater granted discretion as well.

2. Street-Level Bureaucrats in Times of Crisis

Crises such as natural disasters, financial collapses, major terrorist attacks, or unprecedented diseases are regarded as significant events that present exceptional situations (Roux-Dufort 2007). Crises involve serious threats, extreme urgency, and uncertainty, all of which test the behavior of citizens, political authorities, and public agencies (Goodsell 2002). Policies that address such situations may have an ongoing impact on the role of SLBs in general, and on their work environment in particular.

Crisis implications for street-level implementation are understudied (Henderson 2014), and on the rare occasions when they are under consideration, they are mostly explored from a policy-as-practiced perspective, similar to street-level scholarship during normal times. The evidence indicates that SLBs during crises play a key role in the government response, by, for example, conducting search and rescue operations, providing security and safety to citizens, assisting in civilian evacuations, delivering emergency products, as well as restoring political, social, and economic normalcy (Henderson 2014). In well-known crises, like Hurricane Katrina and Hurricane Ike, although affected themselves by the crises, SLBs demonstrated dedication to, and care for, their clients, such as teachers who provided practical and psychological support to their students and their families (Stivers 2007; McAdams Ducey and Stough 2011). In a similar manner, during earthquakes, such as in Taiwan and in Haiti, SLBs were motivated by humanitarian issues and continued to serve patients, such as social workers who played a pivotal role in both the rescue and recovery stages, especially in linking the victims' needs with resources (Chou 2003; Sapat and Esnard 2012).

Understanding street-level implementation during times of crisis can draw on SLBs whose routine work is addressing emergencies, including fire fighters (Dearstyne 2007), police officers (Paton 2006), and emergency nurses (Battles 2007). Evidence indicates that work under emergency conditions, whether routine or during extreme crises, increases stressors and risks for SLBs (Paton 2006), including traumatic injuries, post-traumatic distress, fatigue, and burnout (Van der Ploeg and Kleber 2003; Sifaki-Pistolla et al. 2017), as well as anxiety, depression, and additional psychological disorders (Mao et al. 2018). To allow a broader understanding of the role of SLBs in time of crises, this study suggests shifting attention to the expectations of decision-makers from SLBs in addressing a crisis, as reflected in formal policy decisions.

3. Method

To better understand the implications of the governmental response to crisis for street-level implementation, the analysis explores formal policy decisions from a street-level perspective by drawing on Israel's directives dealing with the pandemic, published between March 12, 2020 (the date of the outbreak of the virus in Israel) and May 7, 2020 (the date on which state restrictions were reduced). These directives include legislative documents published by the Israeli Ministry of Health, specifically the Public Health Order ("Tzav BriutA'am"), as well as the emergency regulations related to the coronavirus (Coronavirus orders 2020). The Public

Health Order is the main legal instrument to prevent infection and spread of the disease. Through this order, the government, for example, can impose home isolation on those suspected of carrying the coronavirus, which essentially restricts people's freedom of movement and freedom of occupation.

3.1 Inclusion Criteria and Coding

Two criteria guided our decision about which legislative decrees and regulations to include in the analysis: (1) explicit guidance to SLBs about implementing policy and (2) regulations designed specifically to deal with the coronavirus crisis. Utilizing these criteria, 48 different directives were identified and thematically analyzed to determine how each regulation influenced SLBs' work. First, each directive was coded to identify the profession or sector of the SLBs referred to by the directive. Directives that refer to teachers, police officers, and physicians were identified ($N = 36$), in order to explore classic SLB professions (Lipsky 2010). Next, the directive was coded according to what was expected from the SLBs with regard to its implementation. Based on open coding, each expectation was coded to identify the change in street-level implementation in comparison to routine, as well as its implications for each SLB's profession. Then axial coding identified three types of effects on street-level implementation, namely policy ambiguity, exposure to risk, and discretion. For example, exposure to risk emerged as a prominent effect for SLBs when implementing the newly introduced duty. New risks that emerged included contracting the disease and confrontations with the public. In addition, analysis referred to the intensity of the effect as well. For example, for health risks, it was considered whether the directive creates more or less exposure and to what extent. To increase inter-referee reliability, coding was conducted by all three authors.

4. Street-Level Bureaucrats' Role in Times of Crisis

In general, 36 directives were identified as affecting police officers (21), teachers (10), and physicians (5). The analysis indicates that all identified directives include either new duties that SLBs are required to carry out or modifications to these recently introduced duties. Notably, policy amendments included an update of existing regulations as well as a replacement of a regulation. Three implications for street-level implementation emerged: first, increased policy ambiguity within which SLBs work; second, higher exposure to risk; third, expanded and greater granted discretion, following the need to make additional types of decisions during direct-delivery interactions.

4.1 Governmental Response to Crisis: Increased Policy Ambiguity in Street-Level Implementation

The environment of increased policy ambiguity in which SLBs work during a crisis is evidenced in two aspects of the governmental response to the pandemic. First, the *frequency* of official directives was particularly high, sometimes several per week. Specifically, the average time between formal amendments to regulations was between three and five days, and the minimum was one day for police officers, two days for physicians, and five days for teachers. Second, increased policy ambiguity is also indicated by the wording of policy decisions, which was often vague, without concrete directives regarding, for example, how

Table 1. Examples of new duties required from SLBs to address COVID-19, by profession

Profession	Examples of new regulations added to address the pandemic
<i>Police officers</i>	<ul style="list-style-type: none"> ● Enforcement of prohibition on a person staying in a place that is over 100 meters from their home ● Enforcement of prohibition on people praying together ● Enforcement of dispersal of international convergence ● Enforcing prohibition on visiting playgrounds
<i>Teachers</i>	<ul style="list-style-type: none"> ● Enforcement of hand hygiene of school students ● Enforcement of separating students’ tables while eating ● Enforcement of prohibition on contact between students ● Enforcement of prohibition of a child without a health declaration entering an educational institution
<i>Physicians</i>	<ul style="list-style-type: none"> ● Reporting each verified COVID-19 case to the Ministry of Health ● Instructing a person to stay in isolation ● Determining the transfer of a patient from a place of isolation to a hospital ● Determining the location of isolation of a verified patient

the policy should be carried out on the ground (see [Table 1](#) for examples of SLBs’ new duties in formal regulations introduced to address COVID-19). Moreover, some directives reflected misunderstanding of on-the-ground implementation or allowed a space for interpretation. One illustrative example, “New Corona Virus – Restricting the Activities of Educational Institutions” (Regulation 3A (1) (5) of the Public Health Order), states that it is the responsibility of the institution’s staff to ensure that all those staying at the educational institution wash their hands frequently and before and after each meal, activity in the yard, or work with computers, as well as additional hygiene instructions as determined by the administration. Even a cursory read of this directive can identify that compliance with this duty is in many ways impossible. Moreover, the directive places the responsibility on the “institution’s staff” generally, without specifying who among the educational staff is required to carry out this duty – that is, teachers, school nurses, or administrative staff of the school. Further ambiguity is reflected in the demand to carry out this duty “frequently”, without any clarification about what frequency will be considered minimally compliant, let alone optimal.

4.2 Addressing a Crisis: Increased Risk for SLBs

Content analysis of the directives indicates that carrying out the newly introduced duties required SLBs to have direct-delivery interactions with the public that exposed them to risk, creating conditions under which human values are at stake with uncertain outcomes (Aven and Renn 2009). Specifically, out of the 36 directives identified as influencing SLBs’ work, 35 reflect an increased exposure to risk inherent to street-level implementation, mainly in terms of health and conflict with clients. Police officers, for example, are routinely exposed to COVID-19 by clients, although they are not usually exposed to health threats in the same way as doctors and nurses are. Moreover, 31 of the 36 directives create risk exposure for SLBs whose work under normal conditions does not involve risky situations, such as teachers who under normal circumstances are not exposed to health threats.

Examples of intensified exposure to health risks include, for example, regulations which limit the activities of educational institutions and obligate wearing masks at all times outside the classroom. First grade teachers were exposed to the risk of being

infected with COVID-19 and, in turn, infecting others, because they were explicitly excluded from the mandatory wearing of a mask, despite spending a prolonged period of time in a closed room with large groups of students (Regulation 3H). In a similar manner, police officers were directed to enforce isolation, for example by using reasonable force in order to move a person who refused to remain in isolation to a state facility; thus they were also exposed to the risk of getting infected (Regulation 8B).

An additional type of risk derived from unpopular aspects of some of the directives, which increased the potential friction between the public and the SLBs. Police officers, who routinely carry out enforcement, were directed to enforce new, hitherto socially unacceptable prohibitions, such as imposing administrative fines on a person who moved farther than 100 meters away from their residence (Regulation 2A). Friction with the public was intensified due to the directives' ambiguity, such as excluding sporting activities from lockdown restrictions on movement, which served as fertile ground for disputes with citizens. Hence, a seaside pass allowing for sporting activities at sea required police officers to decide when and how to deal with people who may, or may not, be violating the law. Confronting people who might have a pass and were allowed to be on the beach exposed the officers not only to the possibility of contagion, but also to the indignation of citizens who felt they were doing nothing wrong. This vague situation clearly demonstrates that the new directives SLBs are required to implement may lead to increased friction between them and the public, which may result in more frequent confrontations. In a similar manner, teachers and physicians were also directed to enforce public compliance with newly introduced regulations, such as teachers allowing students into their school only with signed declarations from parents attesting to their health status (Regulation 3D), and physicians, who are required to enforce the isolation of patients in the hospital (Regulation 2(A)).

4.3 Addressing a Crisis: Increased and Expanded Discretion

Formal policy decisions that require SLBs to carry out multiple, additional tasks introduce prescriptions formulated by policy decision-makers. Thus, the governmental response to the crisis entails expanding SLBs' discretion, defined as "the freedom to act within prescribed limits, as granted by a legitimate rule maker" (Hupe 2013, p. 435). Discretion granted to SLBs has increased in two ways. First, carrying out additional tasks reflects granting SLBs more power to decide upon a course of action in additional decision points. For enforcement duties, for example, SLBs are given discretion for allocation of sanctions. One concrete example, requiring police officers to impose an administrative fine on an owner or operator of a shop or other business open to the public, in which a service was provided to a person who was not wearing a mask (Regulation 7C of the Emergency Regulations), grants them the freedom to decide whether, how, and when to enforce this regulation. Second, another result of the increase in discretion that arises from demanding that SLBs exercise additional, multiple tasks is a need to prioritize between tasks. Hence, SLBs' discretion increases in terms of the prioritization of their duties as well.

4.4 Addressing a Crisis: Interrelated Policy Ambiguity, Risk Exposure, and Discretion

While presented as three effects that governmental response imposes on street-level implementation during a crisis, increased policy ambiguity, risk exposure, and discretion are

interrelated. First, the greater the ambiguity of a policy, the more discretion is granted because street-level implementation is “action imperative” (Hupe and Hill 2007). Second, in 31 (79 per cent) of the directives, granting SLBs expanded discretion is based on their willingness to take risks. For example, the decision of a police officer to fine a person appearing in public without wearing a mask (Regulation 2A of the Emergency Regulations) or operating businesses that do not comply with current directives (Regulation 7A, Section 3B(2)) depends on their willingness to increase the chances of getting infected as well as the chances of confronting citizens who resist the instructions. Similarly, teachers were required to allow only children with a signed statement about their health status to enter the school (Regulation 3D of the Public Health Order). Carrying out this duty granted teachers discretion to decide whether to interact closely with other people and risk infection, what precautions to take when doing so, or, alternatively, to ignore the directive altogether.

4.5 Addressing a Crisis: Different Influences for Different Professions?

Comparing implications of the governmental response to the three groups of SLBs identifies both commonalities and differences. All three groups were given more duties to carry out under more policy ambiguity and increased risk exposure, with expanded discretion (Table 2 presents the number and percentage of directives that involved new risks for SLBs according to profession). Differences between the three groups include varied degrees of ambiguity, as specificity of instructions was highest for police officers and lowest for teachers – for example, instructions given to “educational staff” increased ambiguity about whether teachers were responsible for these tasks, whereas police officers were explicitly assigned their duties. Differences between SLBs’ professions also refer to the extent and nature of risks introduced to their work. Teachers’ exposure to risk was comparatively the most prominent, because under normal conditions teachers are rarely exposed to health risks, whereas their new formal duties directly exposed them to getting infected by children at school. Police officers, who are routinely at risk in various situations, were exposed to a new health risk of getting infected. Lastly, unlike teachers and police officers, physicians are routinely exposed to the risk of contracting a disease; nevertheless, the pandemic increased their risk of getting infected by a potentially deadly disease. With regard to discretion, teachers and police officers

Table 2. Number and percentage of directives that involved new risks for SLBs

Risks	Police officers	Teachers	Physicians
Contracting the virus	20 (95%)	9 (90%)	2 (40%)
Infecting others with the virus	20 (95%)	9 (90%)	2 (40%)
Working indoors	17 (86%)	9 (90%)	5 (100%)
Additional risks beyond those incurred during normal work	21 (100%)	10 (100%)	5 (100%)
Increased confrontations with the public	21 (100%)	10 (100%)	5 (100%)
Additional risks that are not part of the SLBs’ job description	21 (100%)	10 (100%)	None

were required to carry out new duties, and thus given more discretion in comparison to regular times.

5. Conclusion

Focusing on the governmental response to the COVID-19 pandemic from a street-level perspective, this study reveals that SLBs are required to carry out additional, multiple duties that imply three changes to street-level implementation: increased policy ambiguity, higher exposure to risk, and expanded discretion-as-granted. Four contributions emerged for street-level scholarship. First, studies that focus on the ways through which street-level implementation is carried out during a crisis emphasize that SLBs experience increased policy ambiguity (Sapat and Esnard 2012), lack of information, and contradictory guidelines, and must cope with communication and coordination problems (Dearstyne 2007). Uncovering that during times of crisis official governmental decisions intensify policy ambiguity for SLBs supports the view that the well-known gap between policy-as-designed and policy-as-practiced is due to policy vagueness, and somewhat refutes the common ascription of street-level divergence to SLBs' intentions and rational choices (Lipsky 1980; Maynard-Moody and Musheno 2000; Brodtkin 2003; Hill 2006; May and Winter 2009). This conclusion is also supported by recent findings which conclude that "when the crisis came, administrators at all levels chose to take refuge in regulations rather than act creatively to save lives and reduce misery" (Stivers 2007, p. 48).

Second, shifting attention to the risk exposure of SLBs during a crisis emphasizes that risk in street-level implementation during normal conditions is understudied, although inherent to some SLBs' professions, such as police officers and firefighters, who deal with risk as part of their role definition (McLennan and Birch 2005; Cohen and Golan-Nadir 2020; Cohen and Hertz 2020). Others, such as teachers (Buonomo et al. 2017) and nurses (Gómez-Urquiza 2016), may at times be confronted with risk, especially when heavy workloads make their work environment particularly stressful (Lipsky 2010; Davidovitz and Cohen 2020), or when dealing with particularly challenging clients who are manipulative and overly demanding (Davidovitz and Cohen 2020; Raaphorst and Van de Walle 2018). Nevertheless, risk elements in SLBs' work are often explored indirectly, as an element of the pro-social actions that SLBs take to assist citizens at the cost of risking their position in the organization (Maynard-Moody and Musheno 2000), or even risking their lives for citizens, such as in the case of police officers (Cohen and Hertz 2020). Notably, nearly five decades ago Lipsky (1971) pointed out that SLBs' work often involves exposure to physical or psychological threats, exemplified through police officers who are exposed to ongoing danger in their work environment, and teachers who fear the consequences of losing control in the classroom.

Third, in contrast to normal conditions, during which decision-makers aim to limit discretion granted to SLBs (Shim et al. 2017), during crises, SLBs are given expanded discretion. Moreover, expanded discretion granted during a crisis further emphasizes the well-documented role of SLBs as mediating policies, because "[f]ormal policy is necessary to authorize action and provide resources to enable it, but insufficient to fully determine what will happen in its name" (Brodtkin and Marston 2013, p. 23). Moreover, increased discretion granted during a crisis would seem to refute arguments

about the need to limit SLBs' discretion, which stem from an aim for greater equality in the provision of services.

Last, uncovering different influences for various SLBs' professions contributes to a documented gap in the current literature, which rarely compares different SLB groups and overlooks variance across street-level professions (Gofen et al. 2019b). Demonstrating both substantive differences and variance in the extent to which different professions are influenced, this study echoes recent calls for future research that will focus on comparative street-level studies (e.g. Gofen et al. 2019a).

The practical implications of this research highlight the importance of proper training to prepare SLBs for crises, with their rapidly changing conditions. Moreover, SLBs' exposure to increased risk underscores the need to provide them with an appropriate support system that will allow for treatment of emotional stress, whether during crises or in normal times. Finally, the findings here demonstrate the need for facilitating communication channels and improving regular communication flows between higher-ups and SLBs. Such mechanisms will allow more coordination and a street-level response to future crises that is more effective for citizens and for achieving policy goals.

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