The Case of the Diamond Princess: Stranded at Sea in a Pandemic (Part 1)

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Special Edition: COVID-19 Crisis
(June 30, 2020) This Case Study is the First of a Three-Part Series. This document shares information pertinent to the period of the Passenger Quarantine. Part II will cover the challenge of Repatriation of the Passengers to their Home Countries. And Part III will discuss the U.S. and Other Government Relationships with Cruise Lines.

CASE STUDY

As the COVID-19 Pandemic emerged as a true global crisis in the first quarter of 2020, passengers on the Diamond Princess cruise ship were stranded aboard the ocean liner as cases of the infection escalated among passengers. When the ship’s outbreak was at its worst, it was considered to have the largest number of COVID-19 cases outside of mainland China.

Part I: The Quarantine

The Diamond Princess cruise ship is owned by the British-American cruise company Carnival Corporation and operated as part of the Princess Cruises fleet. It contains 1,337 guest cabins and approximately 1,000 crew members spread across the 18 decks of the ship. On January 20, 2020 the ship began its 16-day cruise (which became 15 days) starting from Yokohama Port in Japan. The first leg of the journey brought the cruise liner to Hong Kong where it arrived on January 25th. The ship then sailed to Chan May Port, Vietnam on January 27th, Chai Lan, Vietnam on January 28th, Keelung, Taiwan on January 31st and Naha, Japan on February 1st. After leaving Naha the ship began its return journey back towards Yokohama. That same day, when the ship was on its way back to Yokohama for its conclusion of the journey, the captain received word from the Hong Kong government that an individual who had disembarked the cruise on January
25th, had since tested positive for COVID-19[1]. The Hong Kong native had been experiencing a cough since January 19th, one day before he boarded the cruise, and had a fever since January 30th, five days after he disembarked in Hong Kong. He sought medical attention on January 30th where medical professionals administered a test for COVID-19. When the test result proved positive, the Hong Kong Center for Health Protection (CHP) “immediately commenced epidemiological investigations and conducted relevant contact tracing,” which allowed the CHP to connect him to the Diamond Princess and issue the warning to the crew[2]. However, despite the gravity of the situation unfolding in China, the captain waited nearly 48 hours to inform the Diamond Princess crew and its passengers about what he had learned, which allowed the virus ample time to spread.

It was February 3rd when the captain shared what he had learned, two days after he received the call from the Hong Kong officials. In spite of his announcement, the normal recreational activities throughout the ship continued as planned. Buffets were open, celebrations and parties proceeded as scheduled. The only noticeable difference was a greater presence of hand sanitizers throughout the ship[3].

Essentially, the approximately 3,700 passengers and crew members were allowed to roam the ship freely with zero restriction until approximately 11:00 PM that evening, when the captain announced that everyone should remain inside their cabins. At this point, the ship was docked off Daikoku Pier at Yokohama Port in Japan, waiting for health officials to come aboard the ship, administer tests and discuss symptoms with passengers, should they have any. At this point, tests were only being considered for those who were experiencing symptoms, such as a fever, but this was later expanded to high-risk individuals such as the elderly and those with pre-existing health conditions. On February 5th, the first round of test results revealed ten positive cases of coronavirus aboard the ship, instigating the infamous “Diamond Princess Quarantine.”

**Lack of Clarity, Understanding, and Training Leads to Chaos**

From the very first day of the ship’s quarantine, the passengers and crew found themselves fighting a seemingly no-win situation. The first issue was the lack of clarity as to who was in charge. Was it the cruise line itself? Was it the country where the ship was docked (Japan)? Or was it the country for which the owning company of the ship was registered? Or perhaps was handling of the situation to be led by the countries of origin of the passengers? This ambiguity led to confusion as it pertained to the policies, rules and regulations of quarantine. Thus, the delivery of information to the crew, and ultimately the passengers, was extremely delayed, leaving those on the ship confused and clueless.

As days went by and the quarantine continued, the world learned more about the COVID-19 virus itself. Aboard the ship, on the other hand, there seemed to be a general lack of understanding about the severity of the virus. The lack of knowledge meant a lack of action to tackle the growing situation. As the quarantine continued, there were more examples of just how uninformed the crew truly was.

The improper use and overall limited supply of personal protective equipment (PPE) on the ship was another factor. When the quarantine first began, the Diamond Princess crew was forced to
step up and manage the quarantine themselves, despite no training for such an event. In the beginning, the crew delivered meals three times a day, face to face, to each and every passenger, all while wearing the same gloves. The crew also used china to serve the food (rather than single-use cutlery and plates), which created more opportunity for the virus to spread. What’s more, the crew failed to wear PPE when removing dirty dishes or linens from passengers’ cabins.

Just as significantly, there was an absence of consistent and equitable COVID-19 testing throughout the ship. The original process involved only testing passengers who started to experience flu-like symptoms. The passenger would have to wait a few days for the results, and if they tested positive they would be removed from the ship and brought to a hospital on shore for expert care. The problem with this approach was two-fold: the delay allowed for potentially-infected passengers to remain on the ship, further spreading the virus; and passengers needed to show symptoms before getting a test at all. However, nearly 18% of cases on the ship were found among individuals who displayed no symptoms whatsoever.[4] Therefore by only testing a select number of passengers, the Diamond Princess was at risk of permitting potentially infected passengers remain on board.

Eva Lee, an infectious disease specialist at the Georgia Institute of Technology has since referred to the Diamond Princess as a “quarantine nightmare,” and also disapproved of the testing approach saying that “the spread, no doubt, involves those without symptoms”[5]. This statement is echoed in the United States where labs throughout the country complained that the screening process was “far too restrictive”[6].

A third challenge of this situation was that the responsibility of crisis management fell on the ship’s crew. Crew members were constantly put in harm's way in an attempt to feed, entertain and care for the passengers on the ship, all while maintaining their pre-outbreak living and eating arrangements. The crew still shared four people to a bathroom, dined in a communal mess hall, and worked in close proximity across departments on the ship.

Essentially, the safety protocols and precautions put in place for the passengers were not kept consistent for the crew, creating an environment where their lives were put at risk to help take care of others. This was, of course, as they attempted to keep people safe in a way that was completely foreign to the vessel where they were confined. When compared to a hospital, a cruise ship filled with people is more of “an incubator for viruses than a good place for quarantine”[7].

**Unanswered Questions?**

There is little doubt among experts that the handling of the virus onboard the Diamond Princess was an abject failure from the onset. Simply put by Dr. Anthony Fauci, the Director of the (US) National Institute of Allergies and Infectious Diseases, “...it failed”[8].

Despite this acknowledgement, there is still no clear answer on who should be in charge in future situations that mimic this one. The Japanese government and the Diamond Princess corporate leadership disagreed from the beginning about who was in charge. At the time, the Japanese
officials feared bringing potentially infected passengers on shore, since there was no clear place to quarantine everyone. And, they did not want the virus to spread throughout Japan.

After 39 days on the ship (and over three weeks in quarantine) the last of the 2,666 passengers finally disembarked and began their journeys home on February 27th; only to reset the clock and begin an additional two week quarantine in their home countries. However, the ship remained docked in Japan for another three months while the company focused their efforts on quarantining and repatriating the remaining crew members who had not yet departed on government charter flights\textsuperscript{[9]}

The Diamond Princess eventually departed from Yokohama, Japan on May 16th and reported that it was headed for Port Dickinson in Malaysia to finalize the crew repatriation efforts. However, on May 25th it unexpectedly arrived in Manila Bay where it joined an additional 20 or so cruise ships which are waiting out the “no-sail” order there until they can resume operations, hopefully sometime in October.

What solutions remain? The need for a more concise, concrete and standardized set of guidelines has become painfully apparent. By creating and developing standards for these types of situations, countries and passengers can feel more at ease knowing that the guests, crew and ship will be well taken care of in the event of an emergency.

Does the industry have to completely rethink the cruise experience – for passengers and crew? How should amenities and recreational activities be changed? Should the medical resources aboard the ship be strengthened and elevated? Does this mark the death of the buffet? How will cleaning and sanitation of the cabins and public spaces be upgraded?

**Did We Learn Any Lessons?**

All facets of the hospitality business have been dealt a detrimental hand due to the COVID-19 pandemic. The cruise industry, as modeled by the series of events aboard the Diamond Princess was severely impacted and is hopefully using this time of “no travel” and “shelter-in-place” to revisit processes and operations. The cruise lines need to work in tandem and come to a consensus to resolve for the future: Who is in charge of managing a crisis like this? Should healthy passengers and infected guests be kept in close proximity to one another? What sort of precautions should be in place for the passengers and the crew members? How important is the timing of the response to the long-term success of a crisis management situation?

The Diamond Princess teaches us that the virus spreads easily between people who are in close proximity – as evidenced by how quickly the virus spread among the crew. A Center for Disease Control (CDC) study showed that of the 20 crew members who tested positive the first week of the quarantine, 16 of them were on the same deck and 15 had the same job\textsuperscript{[10]}, demonstrating that shared space and increased touchpoints contribute to virus spread. The Diamond Princess also showed how common the asymptomatic cases are.
Discussion Questions

1. What could the leadership of the Diamond Princess—the captain and the company itself—have done to handle this situation better?
2. Who should develop a Pandemic Preparedness Plan (PPP)? Who will enforce it? The country of port? The country of ship registry?
3. From an operations standpoint, how could the crew take better care for the passengers without putting themselves at risk? What structure of contingency planning can be in place to prepare staff and crew for dire situations?
4. Ethically speaking, should the crew of the ship be allowed to refuse to work in these conditions if they feel that their own health and well-being are at risk?
5. What are the roles and responsibilities of the cruise companies in all of this? After all, aren’t the employees and passengers under their care?

Resources:


12. Public Health Responses to COVID-19 Outbreaks on Cruise Ships — Worldwide, February–March 2020 [https://www.cdc.gov/mmwr/volumes/69/wr/mm6912e3.htm#T1_down](https://www.cdc.gov/mmwr/volumes/69/wr/mm6912e3.htm#T1_down)


14. What the cruise-ship outbreaks reveal about COVID-19 [https://www.nature.com/articles/d41586-020-00885-w](https://www.nature.com/articles/d41586-020-00885-w)

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The authors wish to thank Dr. Makarand Mody, Assistant Professor Boston University School of Hospitality Administration for his review of Part I and Part II of this case study.