The purpose of this update is to share publicly available data and trends related to the novel coronavirus (COVID-19) pandemic in Indian Country. The NCAI Policy Research Center reviews updates on public sites in the early morning each day and records available data. The data shared in this update represents what has been shared publicly by the sources described below, and the NCAI Policy Research Center is not analyzing the primary sources of data. This update represents data posted at the time of viewing, and data may change during the course of the day or may otherwise need to be updated. Starting 3/9/2022, this report will replace the previous report format to respond to changing recommendations.

In reviewing this data, it is important to understand that current COVID-19 data is likely an underestimate of the actual data due to current lack of adequate testing availability, underreporting to IHS by tribes and urban Indian health programs, and underreporting of American Indian/Alaska Native race in the data. Tribal Nations are encouraged to conduct their own surveillance locally in partnership with local, county, state and federal agencies.

Coronavirus (COVID-19) Data

U.S. COVID-19 Data

The total number of cases of COVID-19 is tracked daily by the Centers for Disease Control and Prevention (CDC) as they receive case reports from state and territorial health departments. They also post numbers of cases by states and territories and display case numbers on a map that shows a gradient of the number of cases in states across the country. The CDC webpage COVID Data Tracker for COVID Cases, Deaths, and Testing in the U.S. can now be found at: https://covid.cdc.gov/covid-data-tracker/#cases_casesper100klast7days.

The NCAI Policy Research Center checks this CDC webpage daily in the early morning and tracks the total cases in the U.S. reported each day. In addition, the NCAI Policy Research Center also compares CDC case numbers with the Johns Hopkins Coronavirus Resource Center COVID-19 Dashboard at https://coronavirus.jhu.edu/map.html.
The total U.S. cases of COVID-19 based on these two webpages from March 23, 2020 to present are displayed below in Table 1. Although the trend graph is no longer included in this report, the latest trends are that the total cumulative COVID-19 case curve is increasing.

Table 1: Total U.S. COVID-19 Cases – CDC and Johns Hopkins Data as of July 25, 2022

<table>
<thead>
<tr>
<th>Source</th>
<th>Total U.S. COVID-19 Cases</th>
</tr>
</thead>
<tbody>
<tr>
<td>CDC</td>
<td>90,227,956</td>
</tr>
<tr>
<td>Johns Hopkins</td>
<td>90,567,290</td>
</tr>
</tbody>
</table>

Figure 1 is the CDC graph of trends in the daily number of new cases of COVID-19 in the U.S., which shows a 7-day average of 120,032 cases per day, and illustrates daily cases are staying at the peak levels of the past couple of weeks overall in the United States.

Figure 1. Daily Trends in Number of COVID-19 Cases in the United States Reported to CDC

Figure 2 shows the 7-day COVID-19 case rate per 100,000 population for each state in the United States. Compared to last week, the cases are still higher in some states across the United States (darker blue color means higher rates).
Figure 2. US COVID-19 7-Day Care Rate per 100,000 Population by State as of 07/25/2022

Centers for Disease Control and Prevention: https://covid.cdc.gov/covid-data-tracker/#cases_casesper100klast7days

Community Level Data by U.S. County

Figure 3 shows the U.S. CDC Community Levels by County Map, which focuses on both COVID-19 cases and hospitalization data and is published weekly. The CDC considers this data to be a better indicator of how to adapt to the varying severity and burden of COVID-19 across the United States. The CDC Community Level identifies three levels of risk (high, medium, low) based on a combination of three metrics: new COVID-19 hospital admissions per 100,000 in the past 7 days; the percent inpatient beds occupied by COVID-19 patients; and total new COVID-19 cases per 100,000 in the past 7 days. Prior metrics have focused on case rates; the new community level metrics are intended to be based on the impact of COVID-19 on the local healthcare system. The CDC Community Level data for U.S. counties along with recommendations for individual/household and community-level prevention actions based on the level of community risk are included on the following webpage: https://www.cdc.gov/coronavirus/2019-ncov/science/community-levels.html.
Figure 3. U.S. COVID-19 Community Levels by County as of July 21, 2022


*CDC Community Transmission – CDC Data for Hospitals – as of July 24, 2022*

CDC recently began publishing Community Transmission levels, which were the metrics they used by county prior to changing to the above Community Levels. While they indicate these are only for hospital use, they show community transmission levels by county and the red color is the highest transmission level. The data is based on new cases per 100,000 people and percent positive tests in the past seven days, and more counties have high levels this week.
Total COVID-19 Cases in Indian Country

The primary public source of federal data on COVID-19 cases in American Indians and Alaska Natives (AI/ANs) is the Indian Health Service (IHS) Coronavirus (COVID-19) website located at the following link: https://www.ihs.gov/coronavirus/. This website used to publish case counts each day but now publishes weekly counts of COVID-19 cases overall and for each IHS Area on Mondays. Since March 23, 2020, the NCAI Policy Research Center has tracked daily counts of total COVID-19 cases each day from the IHS Coronavirus webpage. With IHS now only publishing COVID-19 cases twice a week, Figure 3 shows the weekly trends starting 6/8/2021 based on data published on Mondays. Total COVID-19 cases from IHS data continue to increase.

Figure 3: Indian Health Service (IHS) COVID-19 Cases from March 23, 2020

New Cases Per Day

In addition to tracking the total cumulative count of COVID-19 cases, another useful way to track COVID-19 cases is the number of new cases per day. Figure 4 displays IHS new cases reported each day since March 25, 2020 and the average new cases per day for each week since 6/7/2021. The average new cases per day is the total new cases reported each week divided by the days included in that total (this week there were 7 days from the past week’s public data). The average new cases per day for this week is increased from last week.
New Cases by IHS Area

The IHS Coronavirus (COVID-19) webpage also tracks COVID-19 cases by IHS Area. The IHS now only posts weekly counts on their webpage on Mondays and Thursdays. In these reports, the Monday data are used for these graphs. Figure 5 displays IHS COVID-19 new cases overall and by IHS Area since the prior week. Three weeks ago, an estimate was made since the prior week data from IHS were unavailable. The last six weeks results are displayed in three different graphs showing the overall IHS results and results for each IHS Area. This week, the data reveal that new cases overall continue to increase with increases in some IHS Areas.

Figure 5: Indian Health Service COVID-19 Cases by Area – New Cases Since Prior Week
Other COVID-19 Data

Other COVID-19 data will be included in this report as it becomes available, including updated trends in COVID-19 deaths and new COVID-19 projections. As of this month, COVID-19 deaths for AI/ANs are decreased. The latest IHME COVID-19 projections now show increases in cases and hospitalizations in some areas of the country with the overall rates continuing at about the same levels. When significant changes occur, we will include the projects in a future report. The NCAI Policy Research Center will continue to track all other COVID-19 data that is available publicly, but will only report on selected data in these reports when updates are timely and/or significant changes occur.
(COVID-19) Vaccine Data

IHS COVID-19 Vaccination Data

The CDC established a COVID Data Tracker on its website that now includes data on COVID-19 vaccinations in the United States at: [https://covid.cdc.gov/covid-data-tracker/#vaccinations](https://covid.cdc.gov/covid-data-tracker/#vaccinations). The data includes total doses of vaccine distributed, administered, and the number of people receiving one or more doses, two doses, and booster doses for the United States overall and for federal entities such as IHS. As of 3/9/2021, CDC stopped publishing detailed data on the COVID Data Tracker map for IHS but the full dataset can still be downloaded and reviewed.

Figure 6 illustrates percent results for IHS and the overall US on the most recent day. The data show that the percent of population receiving one or more doses and two doses is lower for IHS than the overall US, both the US and IHS are still below the percent needed to achieve herd immunity, even though some individual Tribal Nations have very high rates of vaccination in their local communities. Data is now available on the percent of fully vaccinated people who have received vaccine booster shots and that data is added to the graph but is calculated with a different denominator as the other two bars (percent of fully vaccinated, not percent of population). This week, data on the percent of those with a first booster who have received a second booster for those ages 50 and above is included in the graph. Trends for all vaccination data show significant slowing over the past several months.

Figure 6. COVID-19 Vaccinations – Percent of Total Population Receiving One or More Doses vs. Two Doses – IHS and US

Measuring COVID-19 Impact

The impact of the COVID-19 pandemic on AI/ANs overall and in tribal communities can be measured by total cumulative cases over time, total new cases per day/week, case rates per 100,000 population for various geographies, total hospitalizations and admissions, waste water levels, percent positive tests, COVID-19 risk levels, and COVID-19 projections. Current data are likely underestimates due to current insufficient availability of testing, likely underreporting of AI/AN race, and reduced public data from some states at this point in the pandemic. States, Counties, or IHS Areas that have rising cases and a rising percent positive test result are likely true increases in cases and the increase is likely not just due to increased testing. Data surveillance is now recommended to view a variety of indicators at the local level since the impact of COVID-19 is not uniform across the country.

Tribal nations are encouraged to keep in close communication with their local city, county, and state public health departments and the IHS and CDC for the latest data, guidelines, and recommendations. IHS Area Offices have regular data reports, and Tribal Epidemiology Centers are also a great resource for regional data.

Additional Resources


Indian Health Service (IHS) Coronavirus (COVID-19) website: https://www.ihs.gov/coronavirus/

Tribal Epidemiology Centers: https://tribalepicenters.org/

NCAI COVID-19 Situation Summary documents: https://www.ncai.org/policy-research-center/research-data/prc-publications


Questions: NCAI Policy Research Center – email: research@ncai.org; website: http://www.ncai.org/prc