Globally, COVID-19 cases have surpassed 52.48 million with more than 1.29 million deaths. In the United States, the total number of cases stands at 10,508,864 and deaths at 242,216.

As many people in the United States begin to plan for fall and winter holiday celebrations, CDC offers the following considerations to help protect individuals and their families, friends, and communities from COVID-19. For this year’s Thanksgiving guidance, please click HERE.

Commercial tobacco product use is the leading cause of disease, disability, and death in the United States. Declines in use have occurred over time, but prevalence remains particularly high among American Indians and Alaska Natives. The risks of tobacco product use have been compounded by the COVID-19 pandemic, with emerging data showing that current and former cigarette smokers are at increased risk of more severe illness from COVID-19. The Indian Health Service (IHS) is hosting a webinar where participants will gain an understanding of the state of the science with regard to COVID-19 outcomes and commercial tobacco product use, including cigarette smoking and e-cigarette use. The webinar will take place on Wednesday, November 18, 2020 at 3:00 PM EST. Register for the webinar HERE.

The Indian Health Service (IHS) is hosting a webinar that will focus on developing providers’ skills in supporting parents/families in ensuring the safety of their child with a neurodevelopmental disorder, including Intellectual Disability, Autism Spectrum Disorder, and other neurodevelopmental disorders. Providers will be able to teach families strategies for managing COVID-19 specific safety restrictions. The webinar will take place on Tuesday, November 17, 2020 at 3:00 PM EST. Register for the webinar HERE.

**UNITED STATES**

**COVID-19: U.S. at a Glance***
- Total cases: 10,508,864
- Total deaths: 242,216
- Jurisdictions reporting cases: 55 (50 states, District of Columbia, Guam, Puerto Rico, the Northern Mariana Islands, and the U.S. Virgin Islands)

*As of April 14, 2020, CDC case counts and death counts include both confirmed and probable cases and deaths. This change was made to reflect an interim COVID-19 position statement issued by the Council for State and Territorial Epidemiologists on April 5, 2020.

A confirmed case or death is defined by meeting confirmatory laboratory evidence for COVID-19.

A probable case or death is defined by:
- i) meeting clinical criteria AND epidemiologic evidence with no confirmatory laboratory testing performed for COVID-19; or ii) meeting presumptive laboratory evidence AND either clinical criteria OR epidemiologic evidence; or iii) meeting vital records criteria with no confirmatory laboratory testing performed for COV1D19.

State and local public health departments are now testing and publicly reporting their cases. In the event of a discrepancy between CDC cases and cases reported by state and local public health officials, data reported by states should be considered the most up to date.

**National Laboratory Testing Data**
- Total tests reported: 162,013,235
- Positive tests reported: 12,163,933
- Percent of positive tests: 8%
CALIFORNIA

As of November 12, 2020, there were a total of 998,502 positive cases and 18,137 deaths in California.

Ages of all confirmed positive cases:
- Age 0-17: 108,445 cases
- Age 18-49: 596,237 cases
- Age 50-64: 187,873 cases
- Age 65 and older: 105,031 cases
- Unknown/Missing: 916 cases

Gender of all confirmed positive cases:
- Female: 505,051 cases
- Male: 485,678 cases
- Unknown: 7,773 cases

Lab tests reported statewide: 20,478,500

Twenty-five public health labs in California are testing samples for COVID-19. These labs include the California Department of Public Health's Laboratory in Richmond, Alameda, Butte, Contra Costa, Fresno, Humboldt, Imperial, Long Beach, Los Angeles, Monterey, Napa-Solano-Yolo-Marin (located in Solano), Orange, Riverside, Sacramento, San Bernardino, San Diego, San Francisco, San Joaquin, San Luis Obispo, San Mateo, Santa Clara, Shasta, Sonoma, Tulare and Ventura County public health laboratories. The Richmond Laboratory will provide diagnostic testing within a 48-hour turnaround time. This means California public health officials will get test results sooner, so that patients will get the best care.

Click [HERE](#) to find your nearest testing site.

INDIAN HEALTH SERVICE CALIFORNIA AREA

26,938 Tribal or Urban Indian Health Program patients in the California Area have been tested for COVID-19 as of 11/11/2020.

Of these, 1,708 patients have tested positive for COVID-19 and 24,326 have tested negative for COVID-19.
CONFIRMED CASES AND DEATHS BY COUNTY

Counties with most reported cases
- Los Angeles: 327,001
- Riverside: 73,381
- San Bernardino: 70,758
- Orange: 63,232
- San Diego: 62,336

Counties with most reported deaths
- Los Angeles: 7,221
- Orange: 1,520
- Riverside: 1,355
- San Bernardino: 1,096
- San Diego: 918

For an interactive version of this map online, click HERE.

998,502 Cases in California
18,137 Deaths in California

New Confirmed Cases in California by Date

New Confirmed Deaths in California by Date

As of 11/13/2020. Source: CDPH
Racial distribution of confirmed COVID-19 cases and deaths in California

American Indians and Alaska Natives account for 0.5% percent of the population, 0.3% of COVID-19 cases, and 0.3% of deaths in California. This includes a total of 2,077 cases and 59 deaths among American Indian and Alaska Native people in California.

Latinos and African Americans are dying at disproportionately high rates in California. The proportion of COVID-19 deaths in Latinos is 1.3 times their population representation across all adult age categories.

Note: 29% of cases and 1% of deaths are of unknown race/ethnicity. As of 11/13/2020. Source: CDPH
Two sources for tracking American Indian and Alaska Native (AIAN) cases reported in California

Data from the Indian Health Service (IHS) include positive cases reported by Tribal and Urban Indian Health Programs.

Data from California Department of Public Health (CDPH) include all positive cases of AIAN diagnosed in California.

Age and gender distribution of confirmed COVID-19 cases and deaths in California

<table>
<thead>
<tr>
<th>Age Group</th>
<th>% Cases</th>
<th>% Deaths</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age 0-17</td>
<td>11%</td>
<td>0%</td>
</tr>
<tr>
<td>(23%)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Age 18-49</td>
<td>60%</td>
<td>7%</td>
</tr>
<tr>
<td>(44%)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Age 50-64</td>
<td>19%</td>
<td>19%</td>
</tr>
<tr>
<td>(18%)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Age 65+</td>
<td>11%</td>
<td>74%</td>
</tr>
<tr>
<td>(16%)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Note: Demographic percentages may not add up to 100% due to rounding. As of 11/13/2020. Source: CDPH

California COVID-19 threat level: At risk of outbreak

**DAILY NEW CASES**

- **16.2** per 100k
- Very large number of new cases

**INFECTION RATE**

- **1.14**
- Active cases are rapidly increasing

**POSITIVE TEST RATE**

- **4.3%**
- Indicates adequate testing

As of 11/13/2020. Source: COVID Act Now
CDC data show that AIAN in California are testing positive for COVID-19 at rates that are proportionate to their population in California but dying at rates that are higher. This includes a total of 4,538 cases and 120 deaths.
COVID-19 testing information from patients seen at a Tribal or Urban Indian Health Program in California

Note: This map shows patients by the regional location of the clinic where they were tested and NOT by the residence of the patients.

Number of positive cases identified by region

- Greater Los Angeles:
  - Positive: 16
  - Negative: 371

- Inland Desert:
  - Positive: 295
  - Negative: 3,139

- Delta and Gold Country:
  - Positive: 132
  - Negative: 2,840

- Central Valley:
  - Positive: 248
  - Negative: 2,636

- Central Coast:
  - Positive: 311
  - Negative: 4,054

- Central Coast:
  - Positive: 63
  - Negative: 237

- North Coast and Cascades:
  - Positive: 641
  - Negative: 11,024

As of 11/12/2020. Source: IHS
American Indian and Alaska Native (AIAN) COVID-19 cases reported by local public health departments in selected California counties


<table>
<thead>
<tr>
<th>County</th>
<th>AIAN Cases</th>
<th>AIAN Deaths</th>
<th>AIAN Tested</th>
</tr>
</thead>
<tbody>
<tr>
<td>Los Angeles County*</td>
<td>301</td>
<td>16</td>
<td>2,536</td>
</tr>
<tr>
<td>San Bernardino County</td>
<td>284</td>
<td>7</td>
<td></td>
</tr>
<tr>
<td>San Diego County</td>
<td>191</td>
<td>1</td>
<td>3,755</td>
</tr>
<tr>
<td>Riverside County</td>
<td>148</td>
<td>7</td>
<td></td>
</tr>
<tr>
<td>Sacramento</td>
<td>102</td>
<td>5</td>
<td></td>
</tr>
<tr>
<td>San Francisco</td>
<td>41</td>
<td>na</td>
<td></td>
</tr>
<tr>
<td>Alameda</td>
<td>42</td>
<td>na</td>
<td></td>
</tr>
</tbody>
</table>

*Note: Data do not include the Cities of Long Beach and Pasadena.
TRIBAL STATE OF EMERGENCY AND SHELTER IN PLACE DECLARATIONS

Tribes do not need to issue a state of emergency to access FEMA resources.

Emergency Declarations (n=76)

1. Agua Caliente Band of Cahuilla Indians
2. Augustine Band of Cahuilla Indians
3. Barona Band of Mission Indians
4. Bear River Band of Rohnerville Rancheria
5. Berry Creek Rancheria of Maidu Indians of California
6. Big Lagoon Rancheria
7. Big Pine Paiute Tribe
8. Big Valley Band of Pomo Indians
9. Bishop Paiute Tribe
10. Blue Lake Rancheria
11. Buena Vista Rancheria
12. Cabazon Band of Mission Indians
13. Cachil DeHe Band of Wintun Indians of the Colusa Indian Community
14. Calho Tribe
15. Cahuilla Band of Indians
16. Chemehuevi Indian Tribe
17. Cher-Ae Heights Indian Community of the Trinidad Rancheria
18. Chicken Ranch Rancheria of Me-Wuk Indians of California
19. Colorado River Indian Tribes
20. Coyote Valley Band of Pomo Indians
21. Dry Creek Rancheria Band of Pomo Indians
22. Elk Valley Rancheria
23. Enterprise Rancheria
24. Fort Bidwell Indian Community of the Fort Bidwell Reservation of CA
25. Fort Independence Indian Community of Paiute Indians of the Fort Independence Reservation
26. Fort Mojave Indian Tribe
27. Habematolot Pomo of Upper Lake Tribe
28. Hoopa Valley Tribe
29. Ipay Nation of Santa Ysabel
30. Jamul Indian Village
31. Kashia Band of Pomo Indians of the Stewarts Point Rancheria
32. La Jolla Band of Luiseno Indians
33. Lone Pine Paiute-Shoshone Tribe
34. Los Coyotes Band of Cahuilla and Cupéno Indians
35. Karuk Tribe
36. Manchester Point Arena Band of Pomo Indians
37. Manzanita Band of Diegueno Mission Indians
38. Mehcoopda Indian Tribe
40. Middletown Rancheria of Pomo Indians of California
41. Mooretown Rancheria
42. Morongo Band of Mission Indians
43. North Fork Rancheria of Mono Indians of California
44. Pala Band of Mission Indians
45. Pauma Band of Luiseno Indians
46. Pechanga Band of Luiseno Indians
47. Piscayune Rancheria of the Chukchansi Indians
48. Pit River Tribe
49. Quartz Valley Indian Reservation
50. Quechan Tribe of the Fort Yuma Indian Reservation
51. Ramona Band of Cahuilla
52. Redding Rancheria
53. Reshichi Rancheria
54. Rincon Band of Luiseno Indians
55. Robinson Rancheria
56. Round Valley Indian Tribes
57. San Manuel Band of Mission Indians
58. San Pasqual Band of Mission Indians
59. Santa Ynez Band of Chumash Indians
60. Scott Valley Band of Pomo Indians
61. Shingle Springs Band of Miwok Indians
62. Soboba Band of Luiseno Indians
63. Susanville Indian Rancheria
64. Sycuan Band of the Kumeyaay Nation
65. Table Mountain Rancheria
66. Tachi Yokut Tribe
67. Tolowa Dee-Ni' Nation
68. Torres Martinez Desert Cahuilla Indians
69. Tule River Tribe
70. Tuolumne Band of Me-Wuk Indians
71. Twenty-Nine Palms Band of Mission Indians
72. Viejas Band of Kumeyaay Indians
73. Washoe Tribe of Nevada and California
74. Wilton Rancheria
75. Wiyot Tribe
76. Yocha Dehe Wintun Nation
77. Yurok Tribe

TRIBES ISSUING SHELTER IN PLACE ORDER

28. Hoopa Valley Tribe
74. Wiyot Tribe

Updated 10/21/2020
TRIBAL CASINOS
There are 66 tribal casinos in California. As of October 13, 2020, all of these casinos are open and operating.

TRIBAL HEAD START
Beginning in early September 2020, some Tribal early childhood education programs, such as Head Start, will begin reopening either in person, virtually, or in combination of both (i.e. hybrid program). Please check with local school districts, Tribes, or Lead Agencies for start dates.

Note: CRIHB’s COVID response team will continue to monitor these tribal programs and facilities as the situation progresses.

If you have any questions or concerns please contact:
Vanesscia Cresci at vcresci@crihb.org or Aurimar Ayala at aayala@crihb.org