

CORONAVIRUS DISEASE 2019 (COVID-19) SITUATIONAL REPORT #453 JULY 22, 2022



HIGHLIGHTS

As of July 21, the World Health Organization reports that global COVID-19 cases have surpassed 564.1 million with more than 6.3 million deaths, and in the United States the total number of cases stands at 88,747,875 with deaths at 1,015,093.

On July 19, the CDC approved the Novavax vaccine for emergency use authorization for adults 18 years and older. Novavax is a two-dose COVID-19 vaccine that is currently being used in more than 40 countries. Novavax is another option for unvaccinated Americans who have not received their primary series and was created using a more traditional protein-based technology. Click <a href="https://doi.org/10.1007/journal.org/10.1007/journal.org/10.1007/journal.org/10.1007/journal.org/10.1007/journal.org/10.1007/journal.org/10.1007/journal.org/10.1007/journal.org/10.1007/journal.org/10.1007/journal.org/10.1007/journal.org/10.1007/journal.org/10.1007/journal.org/10.1007/journal.org/10.1007/journal.org/10.1007/journal.org/10.1007/journal.org/10.1007/journal.org/10.1007/journal.org/10.1007/journal.org/10.1007/journal.org/10.1007/journal.org/10.1007/journal.org/10.1007/journal.org/10.1007/journal.org/10.1007/journal.org/10.1007/journal.org/10.1007/journal.org/10.1007/journal.org/10.1007/journal.org/10.1007/journal.org/10.1007/journal.org/10.1007/journal.org/10.1007/journal.org/10.1007/journal.org/10.1007/journal.org/10.1007/journal.org/10.1007/journal.org/10.1007/journal.org/10.1007/journal.org/10.1007/journal.org/10.1007/journal.org/10.1007/journal.org/10.1007/journal.org/10.1007/journal.org/10.1007/journal.org/10.1007/journal.org/10.1007/journal.org/10.1007/journal.org/10.1007/journal.org/10.1007/journal.org/10.1007/journal.org/10.1007/journal.org/10.1007/journal.org/10.1007/journal.org/10.1007/journal.org/10.1007/journal.org/10.1007/journal.org/10.1007/journal.org/10.1007/journal.org/10.1007/journal.org/10.1007/journal.org/10.1007/journal.org/10.1007/journal.org/10.1007/journal.org/10.1007/journal.org/10.1007/journal.org/10.1007/journal.org/10.1007/journal.org/10.1007/journal.org/10.1007/journal.org/10.1007/journal.org/10.1007/journal.org/10.1007/journal.org/10.1007/journal.org/10.1007/journal.org/10.1007/journal.org/10.1007/journal.org/10.1007/journal.org/10.1007/journal.org/10.1007/journal.org/10.1007/journal.org/10.10

With at-home testing, case counts have become less reliable to determine the threat level of COVID-19 in a community. The CDC Community Level takes hospitalizations and hospital capacity into account, and outlines recommendations for additional precautions as Community Level rises—especially for those who are at high risk for severe COVID-19. Click **HERE** to read more.

UNITED STATES

COVID-19: U.S. at a Glance* (as of 7/21/22)

- Total cases: 89,824,190Total deaths: 1,021,048
- 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.

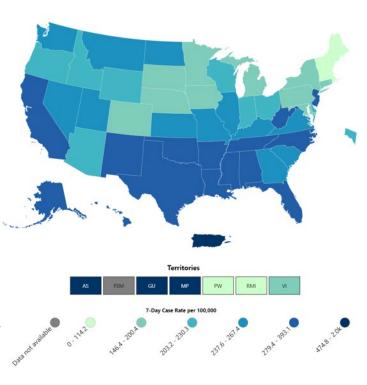
A probable case or death is defined by:

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 COVID-19. 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 (as of 7/21/22)

- Total tests reported: 931,219,870
- Positive tests reported: 86,773,200
- Percent of positive tests (7 day): 17.3%

US COVID-19 7-Day Case Rate per 100,000, by State/Territory



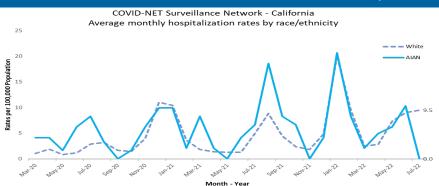
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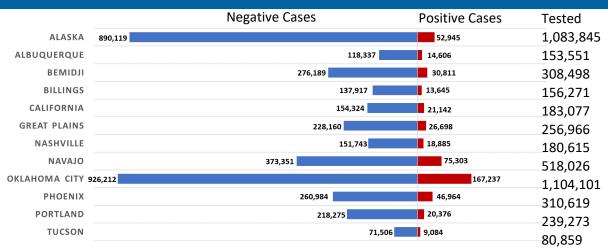


RATES OF COVID-19-ASSOCIATED HOSPITALIZATION BY RACE/ETHNICITY. CA

As of 7/9/2022, CDC data shows that American Indian Alaska Native (AIAN) statewide has an average monthly COVID-19 hospitalization rate of 0.0 per 100,000 population, which is lower when compared to Whites (9.5 per 100,000).



COVID-19 CASES BY INDIAN HEALTH SERVICES AREA



7 – day average testing positivity: 29.4%

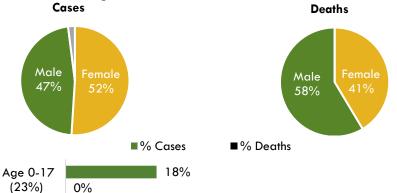
As of 7/20/2022 Source: IHS

CALIFORNIA

As of July 21, 2022, there were a total of 9,804,803 positive cases and 92,469 deaths in California.

Confirmed positive cases by gender:

Female: 5,059,278 Male: 4,578,843 Unknown: 166,682



Confirmed positive cases by age:*

Age 0-17: 1,794,279 • Age 18-49: 5,392,642

Age 50-64: 1,676,621

Age 65 and older: 931,456

* The age of 0.1% of cases is unknown As of 7/21/2022 Source: CDPH

8%

Age 18-49 (44%)



CORONAVIRUS DISEASE 2019 (COVID-19) SITUATIONAL REPORT #453 JULY 22, 2022



California COVID-19 threat level: HIGH

Weekly New Cases

374.8 Per 100K

COVID-19 not contained and weekly cases are at medium levels

Patients

8.1%

Patients with COVID-19 in hospital beds

Admissions

13.3 Per 100K

Weekly hospital admissions are at medium levels

California Department of Public Health Testing Statistics

Lab tests reported statewide: 178,242,636

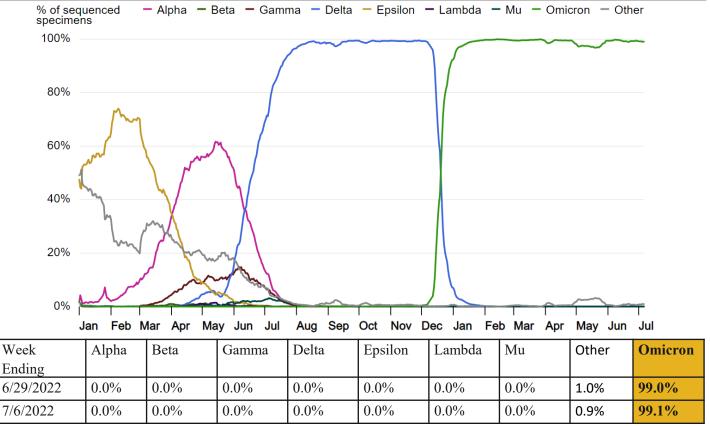
7-day test positivity rate: 16.4%

Numerous public health labs in California are testing for COVID-19 samples. Click **HERE** to find your nearest testing site.

As of 7/21/2022 Source: COVID ACT Now & CDPH

COVID-19 VARIANTS OF CONCERN, CALIFORNIA

As of July 13, 2022, there have been 636,493 samples sequenced in California. In April 2022, 15% of 124,494 cases in California were sequenced, and this percent is expected to increase in coming weeks as more sequence data becomes available. In March 2022, 19% of 77,600 cases were sequenced, and in February 2022, 16% of 324,098 cases in California were sequenced. The chart below shows the percent of specimens sequenced by month that are variants of concern/interest. The table below shows the percent of specimens sequenced by recent weeks that are variants of concern/interest statewide.



CONFIRMED CASES AND DEATHS BY COUNTY, CALIFORNIA



Counties with most reported cases

Los Angeles	3,085,376
San Diego	870,102
Riverside	655,603
Orange	627 , 948
San Bernardino	626,059

Counties with most reported deaths

Los Angeles	32,340
San Bernardino	7,933
Orange	<i>7</i> ,181
Riverside	6,527
San Diego	5,380
	San Bernardino Orange Riverside

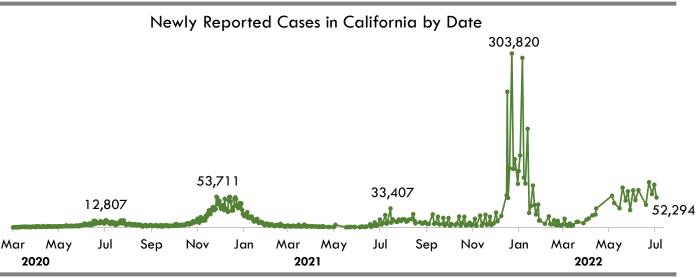
As of 7/21/2022 Source: CDPH

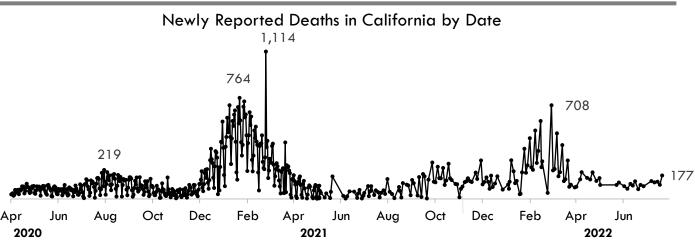
9,804,803 Cases

In California

92,469 Deaths

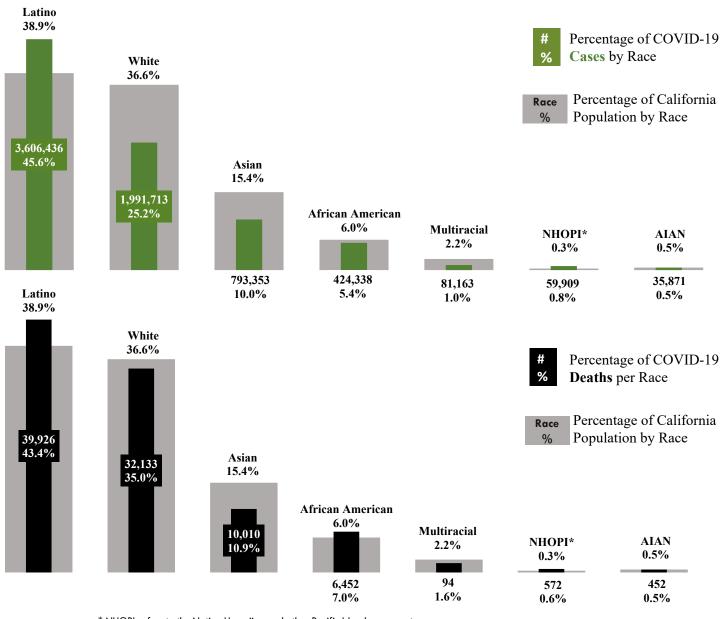
In California





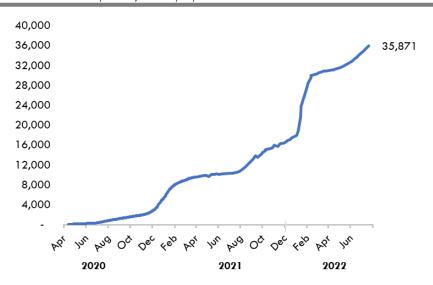
Racial distribution of confirmed COVID-19 cases and deaths in California

American Indians and Alaska Natives (AIAN) account for 0.5% percent of the population, 0.5% of COVID-19 cases, and 0.5% of deaths in California. This includes a total of 35,871 cases and 452 deaths among AIAN people in California.



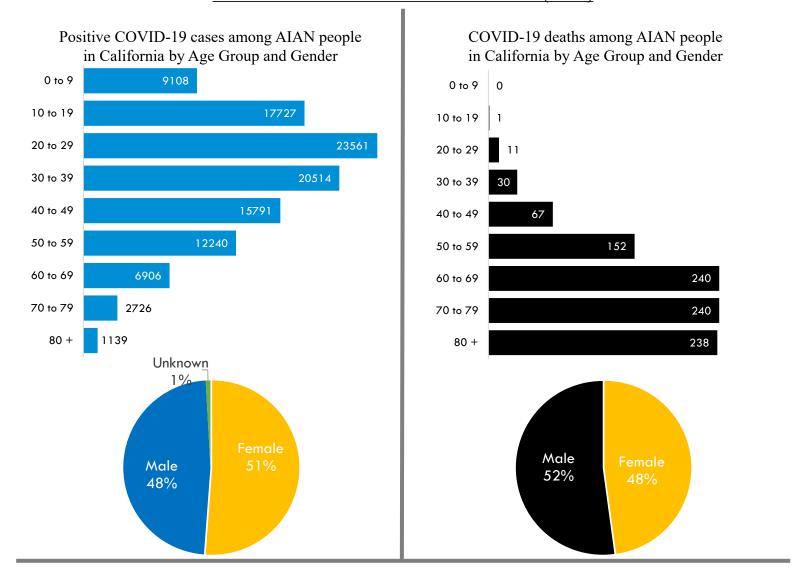
* NHOPI refers to the Native Hawaiian and other Pacific Islander race category. Note: 19% of cases and 1% of deaths are of unknown race/ethnicity. As of 7/21/2022 Source: CDPH

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



As of 7/21/2022 Source: CDPH

American Indian and Alaska Native (AIAN) data reported by California to the Centers for Disease Control and Prevention (CDC)



California Department of Public Health reports COVID-19 data on AIAN people that only identify in one racial category. Below is a comparison using CDC's data on AIAN cases and deaths in California by racial classification, using a more restrictive definition (AIAN alone) versus a more comprehensive definition (AIAN in combination with other races/ethnicities).

	Cases	Deaths
AIAN alone	33,863	468
AIAN in combination	109,712	979

Two sources for tracking American Indian and Alaska Native (AIAN) vaccinations administered in California

Data from California Department of Public Health (CDPH) does not include vaccines administered by Federal entities such as **Indian Health Service**, Department of Defense, U.S. Federal Bureau of Prisons, and Veterans Affairs.

78,476,295
Doses administered

3,223,100
People partially vaccinated

28,598,049 People fully vaccinated



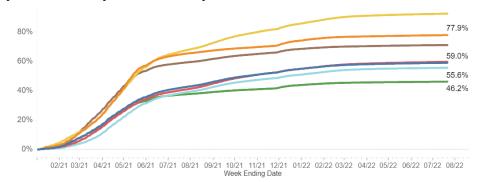
Doses administered by county of residence

Los Angeles	20,153,783
San Diego	6,894,931
Orange	6,376,065
Santa Clara	4,754,173
Alameda	3,907,280

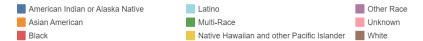
As of 7/21/2022 Source: CDPH

Fully Vaccinated by Race/Ethnicity, California

The graph to the right shows that as of July 21, 2022, 59.0% of the eligible AIAN population statewide has been fully vaccinated (vs. 71.1% among Whites).



Note: Population estimates do not include "other" or "unknown" race and ethnicity categories, therefore their percentage of state population is not available. Some race/ethnicity groups in this county may have small populations. Where the county of residence was not reported, the county where vaccinated is used. Data is not shown where there are fewer than 11 records in a group.



Vaccination Progress by Race/Ethnicity, California

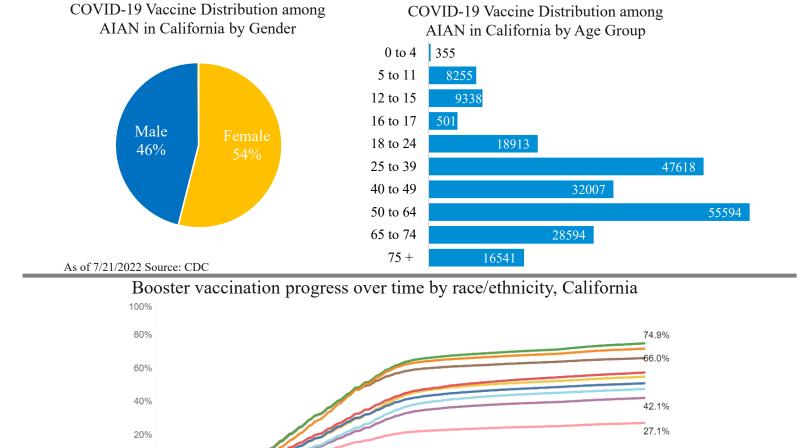
Race	Fully Vaccinated	Partially Vaccinated	Unvaccinated	Eligible
				Population
AIAN^	92,604 (59.0%)	14,514 (9.2%)	49,800 (31.7%)	156,918
Asian*	4,700,942 (77.9%)	402,594 (6.7%)	929,912 (15.4%)	6,033,448
Black	1,277,019 (59.7%)	122,467 (5.7%)	739,726 (34.6%)	2,139,212
Latino	8,827,249 (55.6%)	1,115,649 (7.0%)	5,924,460 (37.3%)	15,867,358
NHOPI*	128,665 (92.6%)	13,789 (9.9%)	N/A	139,020
White	9,939,021 (71.1%)	783,144 (5.6%)	3,246,384 (23.2%)	13,971,549
Multi-Race	759,601 (46.2%)	29,703 (1.8%)	856,460 (52.0%)	1,645,764
Other	1,994,983	369,851	N/A	N/A
Unknown	877,965	368,389	N/A	N/A

^{*}More self-identified vaccine recipients in this category than in the estimated eligible population

As of 7/21/2022 Source: CDPH 7

[^]Does not include doses administered by IHS

Vaccination distribution by gender and age, California



Note: Population estimates do not include "other" or "unknown" race and ethnicity categories, therefore their percentage of state population is not available. Some race/ethnicity groups in this county may have small populations. Where the county of residence was not reported, the county where vaccinated is used. Data is not shown where there are fewer than 11 records in a group.

02/22

Week Ending Date

08/21

09/21

10/21

11/21

12/21

01/22



03/22

04/22

05/22

06/22

07/22

08/22

Data from the Indian Health Service (IHS) shows the total number of vaccine doses (Pfizer, Moderna, and Johnson & Johnson/Janssen) distributed and administered by IHS Area to date

Area	Total Doses Distributed	Total Doses Administered
Albuquerque	213,890	189,524
Bemidji	258,820	178,165
Billings	144,030	81,644
California	381,530	226,837
Great Plains	270,330	169,068
Nashville	169,740	111,200
Navajo	476,580	394,342
Oklahoma City	720,265	518,086
Phoenix	359,505	251,185
Portland	173,450	109,284
Tucson	17,590	12,820

American Indian and Alaska Native (AIAN) COVID-19 cases reported by local public health departments in selected California counties

Los Angeles County*		
AIAN Cases	5,709	
AIAN Deaths	72	
AIAN Tested	21,126	

*Note: Data do not include the Cities of Long Beach and Pasadena

San Bernardino County		
AIAN Cases	7,724	
AIAN Deaths	57	

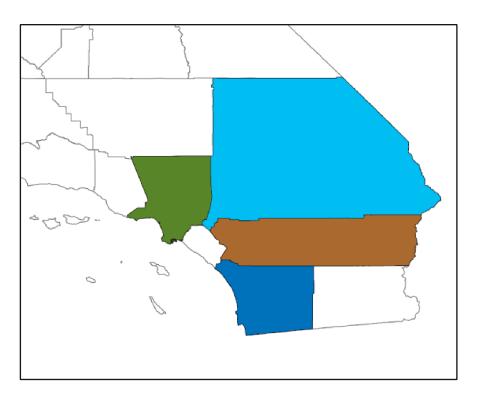
San Diego County		
AIAN Cases	3,415	
AIAN Deaths	27	
AIAN Tested	16,438	

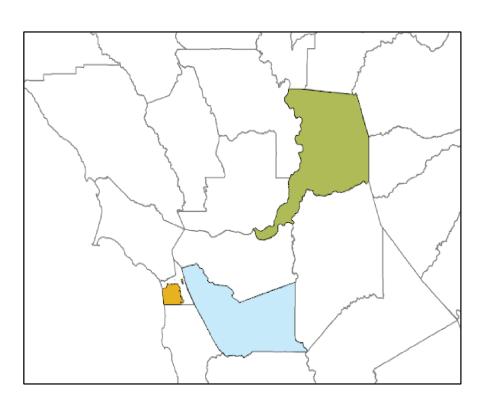
Riverside County AIAN Cases 2,823 AIAN Deaths 38

Sacramento County AIAN Cases 1,416 AIAN Deaths 21

San Francisco County		
AIAN Cases	397	
AIAN Deaths	0	

Alameda County		
AIAN Cases	1,001	
AIAN Deaths	N/A	





As of 7/21/2022. Source: County of Los Angeles Public Health, San Bernardino County Department of Public Health, San Diego County Communicable Disease Registry, Riverside University Health System-Public Health, Sacramento County Public Health, Data San Francisco, and Alameda County Department of Public Health.