

Introduction: Impact of and Response to the Pandemic

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In a two-volume, special edition of the *American Indian Culture and Research Journal*—volume 44, issues 2 and 3—we examine COVID-19's unique implications for Indigenous Peoples, nations, and communities. We organized these special issues because the COVID-19 pandemic has particularly adversely affected Indigenous Peoples within the United States. In February 2021, the United States has the highest number of COVID-19 cases of any country in the world—nearly 28 million, more than twice that of the second-highest country, India, which has 11 million cases.¹ Within the United States, COVID-19 differs substantially across demographic groups and communities. African Americans, Hispanics, and American Indians have experienced substantially higher levels of COVID-19 infection and death. American Indians, in particular, are quite vulnerable to COVID-19; death rates have been 1.5 times those for non-Hispanic whites, while infection rates are 3.5 times those for non-Hispanic whites.²

The impact of COVID-19 on Indigenous Peoples residing in other countries differs according to the overall national strategy for dealing with the pandemic. In

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Australia and New Zealand, where COVID-19 strategies have been particularly stringent, the impact has not been as severe as in the United States; however, there is still some evidence that Indigenous Peoples are more likely to be affected. We have less evidence for other parts of the world, especially in South and Central America. In Canada, at least at the beginning of the pandemic, the impacts on First Nations has been less dire than compared to the general Canadian population; however, in recent months, there have been increased case rates on reserves in the western Canadian provinces.³

The structural racism of colonialism is the driver of myriad negative outcomes for Indigenous Peoples, and the effects of COVID-19 are no exception. The articles in this first special issue, *AICRJ* 44.2, take a granular and intersectional look at the impact of the pandemic, the resilience of Indigenous communities, and the relevance of self-determination in public responses. These articles document specific programs and methods to combat and cope with COVID-19 effects in Indigenous communities and nations.

American Indians and Alaska Natives provide care and assistance to family members at rates significantly higher than average. The research reported in “Urban American Indian Caregiving during COVID” reveals the particular toll that this pandemic is taking on American Indian and Alaska Native caregivers in urban areas. While stress levels have certainly increased since the onset of the crisis, caregivers in this category also report an increase in individual resilience. Findings from this study may help tribes and American Indian health organizations make changes to their caregiver programs or start services that can support caregivers and their recipients during this pandemic, or other times of widespread crisis.

Continuing the theme of resilience in times of heightened crisis, “Examining Risk and Resilience Factors in Urban American Indian/Alaska Native Youth during the Coronavirus Pandemic” measured several indicators of wellness among American Indian and Alaska Native adolescents in urban areas. While high levels of clinically significant anxiety and depression and food insecurity characterized the summer of 2020 for urban American Indian and Alaska Native youth, so did high family cohesion and participation in traditional practices. “Stress and Coping among American Indian/Alaska Natives in the Age of COVID-19” further illuminates the psychosocial burden of COVID-19. Using the Transactional Model of Stress and Coping, the authors show that despite demographic similarities, American Indian and Alaska Native respondents exhibited more stressors related to COVID-19 than did their non-Hispanic white counterparts, and these stressors were more positively correlated with depressive symptoms for the American Indian and Alaska Native respondents. For American Indian and Alaska Natives, the predominant coping processes identified were playful problem solving, escape-avoidance, and self-controlling.

In comparing national responses to COVID-19, New Zealand has received outsize praise for containing transmission. “COVID-19, Intersectionality and Health Equity for Indigenous Peoples with Lived Experience of Disability” calls for the national government to examine the means taken to this end and how it affects Māori with lived experience of disability and their families. Specifically, the authors examine racism and

ableism, historical injustices, and resource allocation in the ongoing response to the pandemic, and put forth a framework that guarantees self-determination.

Meaningful and effective examples of public health responses to the pandemic that respect and center a community's history, culture, language, and traditions, can be found in "First Nations' Survivance and Sovereignty in Canada during a Time of COVID-19." First Nations are acting to protect some of the most vulnerable people in their communities including elders, knowledge keepers, and storytellers who carry with them irreplaceable traditional and cultural knowledges.

Our forthcoming second special issue on COVID-19, *AICRJ* 44.3, features emerging, innovative models of health care, access, and service for effective public health responses to the needs of Indigenous communities.

NOTES

1. Johns Hopkins University and Medicine Coronavirus Resource Center, <https://coronavirus.jhu.edu/map.html>.

2. *The Atlantic*, "The COVID Racial Data Tracker," technical report, 2021, <https://covidtracking.com/race>; Sarah M. Hatcher, Christine Agnew-Brune, Mark Anderson, Laura D. Zambrano, Charles E. Rose, Melissa A. Jim, Amy Baugher, Grace S. Liu, Sadhna V. Patel, Mary E. Evans, Talia Pindyck, Christine L. Dubray, Jeannette J. Rainey, Jessica Chen, Claire Sadowski, Kathryn Winglee, Ana Penman-Aguilar, Amruta Dixit, Eudora Claw, Carolyn Parshall, Ellen Provost, Aurimar Ayala, German Gonzalez, Jamie Ritchie, Jonathan Davis, Victoria Warren-Mears, Sujata Joshi, Thomas Weiser, Abigail Echo-Hawk, Adrian Dominguez, Amy Poel, Christy Duke, Imani Ransby, Andria Apostolou, and Jeffrey McCollum, "COVID-19 among American Indian and Alaska Native Persons—23 States, January 31– July 3, 2020," *US CDC Morbidity and Mortality Weekly Report* 69, no. 34 (August 28, 2020): 1166-69, <https://doi.org/10.15585/mmwr.mm6934e1>.

3. Lisa Richardson and Allison Crawford, "COVID-19 and the Decolonization of Indigenous Public Health," *Canadian Medical Association Journal* 192, no. 38 (September 21, 2020): E1098-E1100, <https://doi.org/10.1503/cmaj.200852>; Olivia Stefanovich, "COVID-19 Is Hitting First Nations in Western Canada Especially Hard," *CBC News*, January 21, 2021, <https://www.cbc.ca/news/politics/why-covid19-spreading-first-nations-western-canada-1.5879821>.

