



# Coronavirus (COVID-19) Infection Survey

## Results for Northern Ireland

25<sup>th</sup> November 2022

## Introduction

This report is the latest in a series of weekly publications which will detail findings for Northern Ireland from the Coronavirus (COVID-19) Infection Survey (CIS). The findings set out in this report relate to the most recent week of the study up to 15<sup>th</sup> November 2022. CIS aims to estimate how many people have the infection and the number of new cases that occur over a given time as well as estimating how many people have developed antibodies to COVID-19.

The survey over time will help track the extent of infection and transmission of COVID-19 among people living in private households. The sample includes people who would not necessarily have otherwise been tested, and is intended to estimate the number of current positive cases in the community in Northern Ireland, including cases where people do not report to having any symptoms.

The Covid-19 Infection Survey has moved from collecting data and samples through home visits by a study worker to a more flexible approach for participants. An online questionnaire has been introduced and swab and blood samples are returned through the post (or by courier for some participants). Further information on what these changes mean and how the survey will continue to be valuable can be found in the recent ONS [blog post](#) and further information on the effects of the change in data collection method can be found in the ONS [Quality Report](#).

Sub-regional estimates are now updated on a monthly basis; the most recent estimates for the percentage of people testing positive for COVID-19 in NI Health & Social Care Trust areas can be found in our [COVID-19 Infection Survey, Northern Ireland: Weekly Report 18th November 2022](#) bulletin.

To note, in the coming months the ONS will be running a small pilot to find out whether the Coronavirus (COVID-19) Infection Survey could be used as an early warning system for Influenza (flu) and another respiratory virus called respiratory syncytial virus (RSV) in the community. More information will be published on this work in due course.

## Proportion of people in Northern Ireland who had COVID-19

During the most recent week of the study (9 – 15 November 2022), it is estimated that 34,100 people in Northern Ireland had COVID-19 (95% credible interval: 25,500 to 44,300). This equates to 1.86% of the population (95% credible interval: 1.39% to 2.42%), no change from the 1.86% in the previous week, or around 1 in 55 people (95% credible interval: 1 in 70 to 1 in 40). This is based on statistical modelling of the trend in rates of positive nose and throat swab results.

Modelling suggests the percentage testing positive decreased in the two weeks up to 15 November 2022 in Northern Ireland, but the trend was uncertain in the most recent week.

### Notes:

- The results in this report are provisional and subject to revision.
- The positivity rate is the percentage of people who would have tested positive for COVID-19 on a polymerase chain reaction (PCR) test at a point in time. We use current COVID-19 infections to mean testing positive for SARS-CoV-2, with or without having symptoms, on a swab taken from the nose and throat. This is different to the incidence rate, which is a measure of only the new PCR positive cases in a given time period.
- As this is a household survey, the statistics refer to infections within the population living in private residential households. The figures exclude infections in hospitals, care homes and/or other communal establishments. In these settings, rates of COVID-19 infection are likely to be different.
- The estimates are based on confirmed positive test results. The remaining swabs are either negative, which are included in the analysis, or are inconclusive, which are not included in the analysis. Some swabs are test failures, which are also not included in the analysis. The impact of excluding inconclusive results on the estimates of positive infections is likely to be very small and unlikely to affect the trend.
- Ratios do not represent a person's risk of becoming infected, since risk of infection depends on a number of factors including contact with others or vaccination status. The ratios presented are rounded to the nearest 100 if over 1,000, to the nearest 10 if under 1,000, to the nearest 5 if under 100 and to 1 if under 20. This may result in credible intervals that appear to be similar to the estimated average ratio.

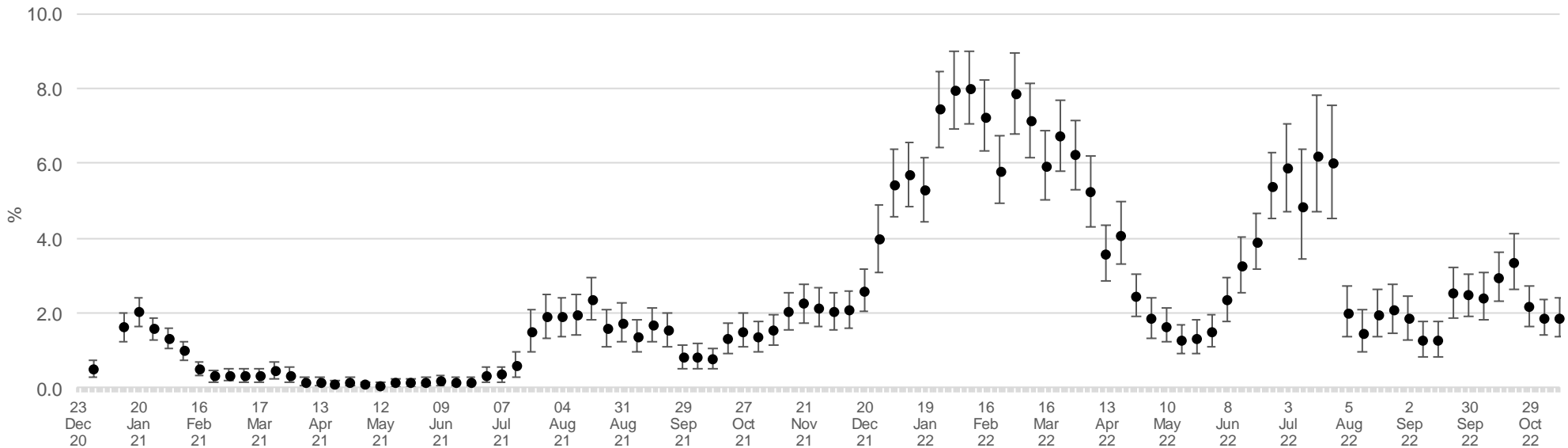
# Positivity over time in Northern Ireland

*Due to relatively small number of tests and low number of positives within the sample, credible intervals are wide and therefore results should be interpreted with caution.*

Modelling suggests the percentage testing positive decreased in the two weeks up to 15 November 2022 in Northern Ireland, but the trend was uncertain in the most recent week. The official estimates of the percentage of people in NI previously testing positive for COVID-19 are set out in figure 1a while the modelled trends over time in the overall population for testing positive for COVID-19, including 95% credible intervals, are shown in figure 1b (overleaf). These estimates are calculated using a regression model which adjusts the survey results to be more representative of the overall population in terms of age, sex, and region.

**Figure 1a: Estimated percentage of the population in Northern Ireland testing positive for the coronavirus (COVID-19) on nose and throat swabs**

## Official Estimates

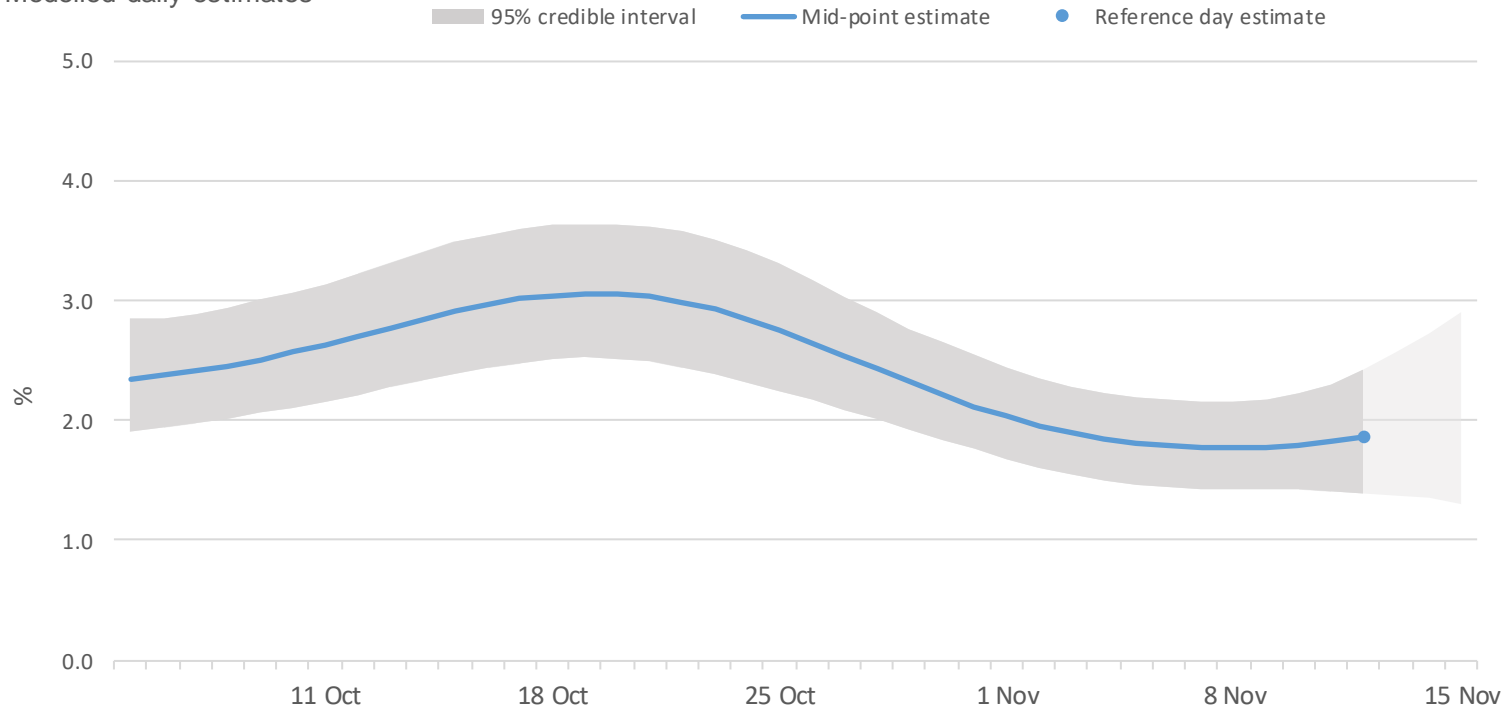


The point estimates and error bars indicated on the chart represent the official estimates reported in previous weeks based on the best information and methods at each point in time.

## Figure 1b:

### Percentage of people testing positive for COVID-19 in Northern Ireland

Modelled daily estimates



The area marked with light grey has a lower level of certainty due to lab results still being processed for this period  
Data from 5 October 2022 to 15 November 2022

Source: Office for National Statistics – Coronavirus (COVID-19) Infection Survey

#### Notes:

1. Modelled results are provisional and subject to revision.
2. All estimates are subject to uncertainty, given that a sample is only part of the wider population. Therefore, caution should be taken in over-interpreting any small movements in the latest trends. The model used to provide these estimates is a Bayesian model: these provide 95% credible intervals. A credible interval gives an indication of the uncertainty of an estimate from data analysis. The 95% credible intervals are calculated so that there is a 95% probability of the true value lying in the interval. A wider interval indicates more uncertainty in the estimate. Overlapping credible intervals indicate that there may not be a true difference between two estimates.
3. Official reported estimates are plotted at a reference point believed to be most representative of the given week. To improve stability in the modelling while maintaining relative timeliness of estimates, the official estimates that are reported here are based on the midpoint of the reference week.
4. Official estimates (Figure 1a) should be used to understand the positivity rate for a single point in time. This is based on the modelled estimate for the latest week and is the best and most stable estimate and is used in all previous outputs. The modelled estimate (Figure 1b) is more suited to understand the recent trend. This is because the model is regularly updated to include new test results and smooths the trend over time.

## Positivity by age over time

These charts present modelled positivity estimates for selected single years of age in Northern Ireland over the past 6 weeks.

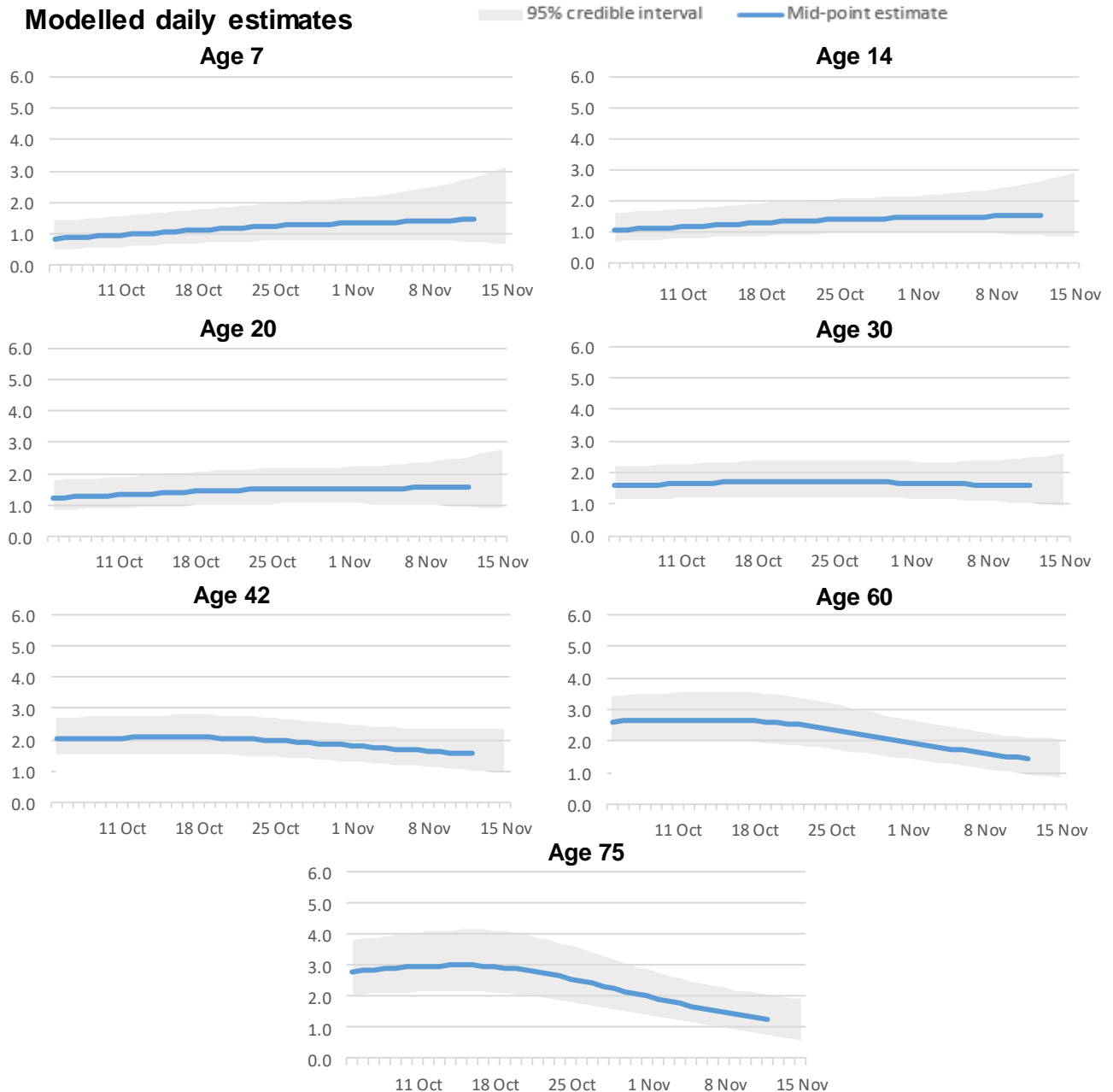
In Northern Ireland, the percentage of people testing positive for COVID-19 decreased in those aged 60 years and over in recent weeks, and the trend was uncertain in younger adults and children.

It should be noted that there is high uncertainty around these trends due to the relatively smaller number of people included in this analysis, so caution should be taken in interpreting the results. In addition, caution should be taken in over-interpreting any small movements in the latest trend.

Estimates in the most recent week have a lower level of certainty due to lab results still being processed for this period.

**Age analysis:** We have moved to updating the analysis by single year of age from weekly to monthly however during times when we might expect to see changes by age related events such as the return to schools, this analysis will be included as required.

Figure 2 – Percentage of people testing positive for COVID-19 for reference ages in Northern Ireland (Data from 5 October 2022 to 15 November 2022)



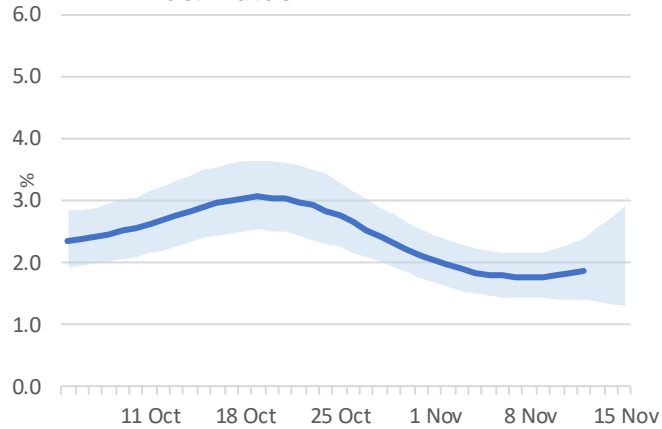
## Positivity in the UK

During the most recent week of the study, based on statistical modelling of the trend in rates of positive nose and throat swab results, 1.86% of the NI population (95% credible interval: 1.39% to 2.42%) had COVID-19. It is estimated that for the same period 1.48% (95% credible interval: 1.39% to 1.58%) of the population in England had COVID-19. It was estimated that 1.49% (95% credible interval: 1.16% to 1.88%) of the population in Wales and 1.59% (95% credible interval: 1.27% to 1.95%) of people in Scotland had COVID-19.

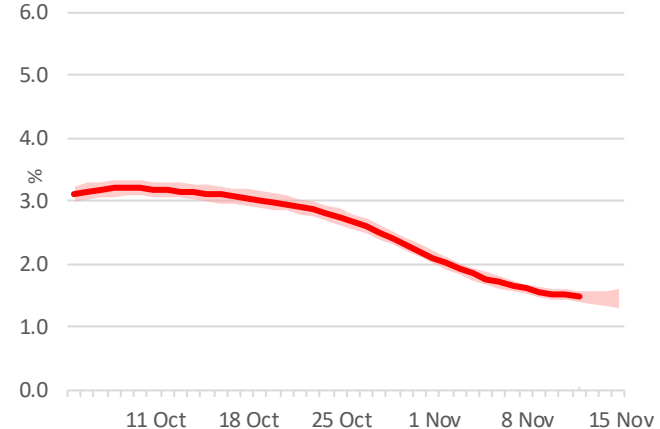
In the week ending 15 November 2022, the percentage of people testing positive for coronavirus (COVID-19) continued to decrease in England, Wales and Scotland. In Northern Ireland, the percentage testing positive decreased in the two weeks up to 15 November 2022, but the trend was uncertain in the most recent week.

**Figure 3: Modelled daily estimate of percentage of the population testing positive for the COVID-19 across the UK**

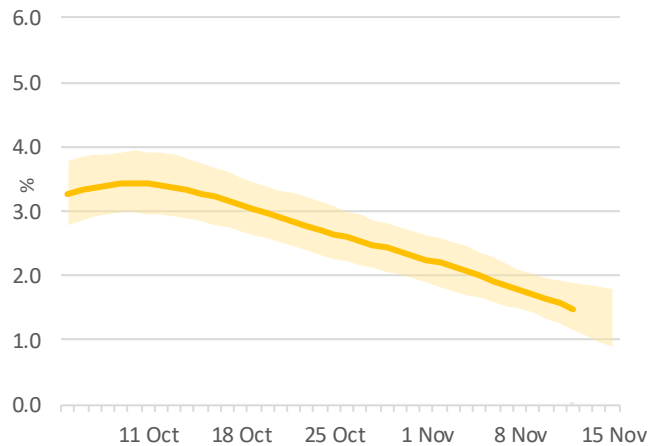
**Northern Ireland modelled daily estimates**



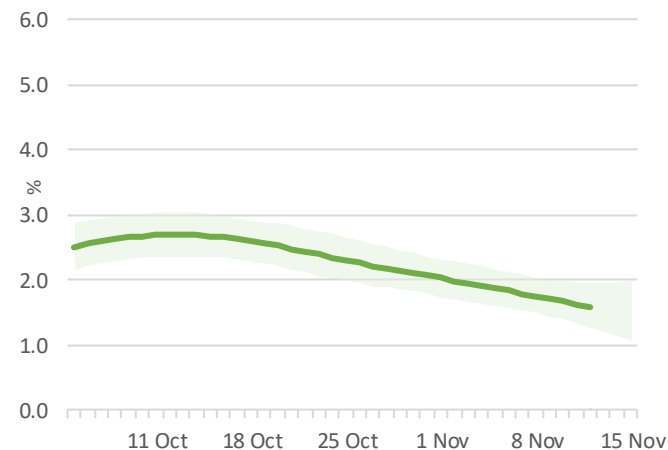
**England modelled daily estimates**



**Wales modelled daily estimates**



**Scotland modelled daily estimates**



*Due to the relatively smaller number of tests in Northern Ireland, Wales and Scotland in the sample, credible intervals are wider and therefore results should be interpreted with caution. Wide credible intervals mean that differences between the central estimates within and between nations may appear smaller or more exaggerated than what they really are.*

## Variant Analysis

Currently, the variants under surveillance in the UK are:

- Omicron, including sub-lineages BA.1, BA.2, BA.4 and BA.5, and their sub-lineages.

The [cycle threshold \(Ct\)](#) value reflects the quantity of virus (also known as viral load) found in a swab test. A lower Ct value indicates a higher viral load. The latest Ct values of coronavirus (COVID-19) positive tests, as well as analysis of the genetic lineages of coronavirus seen in the samples that are sequenced, are provided in the [Coronavirus \(COVID-19\) Infection Survey: technical dataset](#).

Since the end of June 2022, most COVID-19 infections in the UK have been Omicron variant BA.5 or its sub-lineages. One of these BA.5 sub-lineages, BQ.1, has been increasing considerably in recent weeks. In the week ending 6 November 2022, BQ.1 comprised 37.2% of all sequenced COVID-19 infections, an increase from 29.8% in the previous week. In the same week, other BA.5 variants (and sub-lineages, excluding BQ.1) comprised 45.8% of all sequenced COVID-19 infections, a decrease from 53.6% in the previous week. A small recent increase in the percentage of infections with BA.2 sub-lineages has also been observed. Notably, BA.2.75 and its sub-lineages comprised 13.0% of sequenced infections in the week ending 6 November 2022, with the sub-lineage XBB comprising 2.5% of sequenced infections. In the same week BA.4 sub-lineages comprised 3.2% of sequenced infections.

More information on how variants from positive tests on the survey are measured can be found in the ONS [Understanding COVID-19 Variants blog](#) and the [Coronavirus \(COVID-19\) Infection Survey methods article](#).

***We last published our main variant analysis in our [COVID-19 Infection Survey, Northern Ireland: Weekly Report 8<sup>th</sup> July 2022](#). This showed a very high proportion of infections compatible with the BA.4 and BA.5 variants, so we have not included a breakdown of infections by variants in this release. Infections by variant will continued to be monitored and analysis will be reintroduced when considered helpful.***



## Methodology

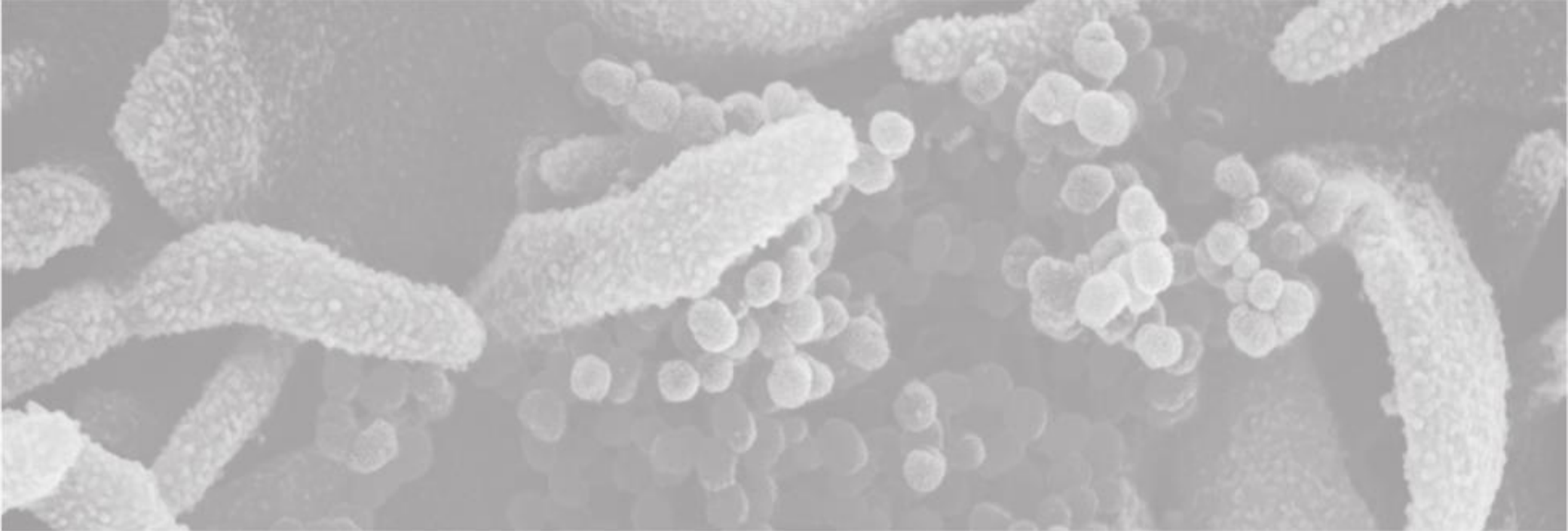
The results are based on nose and throat swabs provided by participants to the study. As well as looking at incidence overall, the survey will be used to examine the characteristics of those testing positive for COVID-19 and the extent to which those infected experience symptoms.

Extending the COVID-19 Infection Survey to Northern Ireland has been achieved by a collaboration between the Department of Health, Public Health Agency (PHA), Northern Ireland Statistics and Research Agency (NISRA) and the Office for National Statistics (ONS) and its various survey partners. Fieldwork commenced in Northern Ireland on 27<sup>th</sup> July 2020. It is important to note that there is a significant degree of uncertainty with the estimates. This is because, despite a large sample of participants, the number of positive cases identified is small. Estimates are provided with 95% confidence intervals to indicate the range within which we may be confident the true figure lies.

The results are for private households only and do not apply to those in hospitals, care homes and/or other communal establishments.

The Office for National Statistics (ONS) publishes [weekly statistical bulletins and references tables, including results for England, Wales, Scotland and Northern Ireland](#) on its website. Further detail (including information on sample size) for Northern Ireland is available in the ONS [Coronavirus \(COVID-19\) Infection Survey datasets](#).

Further information about quality and methodology can be found on the [ONS website](#).



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