***NEWS RELEASE***

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Minnesota’s COVID-19 Graphs Are Misleading

Graphs Shown During Press Conference Paint MN in Dire State

ST. PAUL, Minn. — Citizens’ Council for Health Freedom (CCHF) discovered that a graph, which was produced by the Minnesota Department of Health (MDH) and shown during a public press conference on April 8 by Governor Tim Walz, is misleading. This graph (and subsequent updated graphs) compares confirmed COVID-19 cases in Minnesota to cases in 16 other states, painting a more dire picture than the data used would indicate.

The discrepancy arises from the Y-axis (vertical) numbers, which do not increase proportionally. Visually, the spacing between 0.5 and 10 is almost the same as the spacing between 20 and 500. By using this inconsistent Y-axis, it appears as though every state is on a similar path towards severe numbers of COVID-19 cases. Therefore, while the data used to make the MDH graph may be accurate, the presentation may lead to incorrect interpretations of the data:

![Cases per 100k People After First 100 Confirmed Cases, MN and Select States (Based on MDH Report Date, Cumulative)](image-url)
“The department’s use of an inconsistent Y-axis significantly impacts the shape of the ‘curve’ in the graph,” notes Twila Brase, president and cofounder of CCHF. “By not using linear, proportional increments, the graphs make it appear as if Minnesota is halfway to the difficult situation New Yorkers face, when in actuality, Minnesota is in much better shape. As of April 4th, it had about 1/30th of the reported COVID-19 cases.”

CCHF used publicly available information on COVID-19 cases in each of the same states as the MDH graphs to create graphs with a consistent Y-axis scale. These graphs more clearly show Minnesota’s position in relation to other states.

To make it easier to understand, and to show the pronounced differences between the MDH and CCHF graphs, one graph ranges from zero to 600 cumulative cases (above) and one from zero to 150 cumulative cases (below, which also includes up-to-date data that extends through April 13). Both graphs keep the Y-axis consistent.
“Perception is reality,” said Brase. “Now more than ever, in a time when Minnesotans are looking to their leaders for guidance and security, state officials need to make a concerted effort to provide transparent, accurate information. Minnesotans deserve reliable facts and clear presentations — not diagrams that could potentially scare the public into believing things are worse than they are, as this will harm the public’s trust.”

“These are already uncertain times for Minnesota families, business owners and health professionals. Data that is poorly presented creates false narratives about the facts on the ground, potentially leading to coercive actions and expanded government intrusions. When properly informed, the American public can be trusted to make the right decisions for themselves, their families and their communities.”

Citizens’ Council for Health Freedom wrote an op-ed, which was published last week, and is now releasing its graphs more broadly, along with an updated graph that includes data through April 13.

CCHF maintains a patient-centered, privacy-focused, free-market perspective. CCHF has worked in its home state of Minnesota and at the national level for more than 20 years to protect health care choices, individualized patient care, and medical and genetic privacy rights. In 2016, CCHF launched The Wedge of Health Freedom, an online directory of direct-pay practices (JointheWedge.com)

Twila Brase, RN, PHN has been named by Modern Healthcare as one of the “100 Most Powerful People in Health Care.” She is the host of the daily Health Freedom Minute radio program heard by over 5 million weekly listeners on more than 800 radio stations nationwide, and the author of the four-time award-winning book, “Big Brother in the Exam Room: The Dangerous Truth About Electronic Health Records.”

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