



Liberia Coronavirus (COVID-19) Outbreak Situation



Situation Report: No. 110

Date of onset of outbreak: 16 March 2020

Reporting date: 3 July 2020

Data Source: County Incident Management & National Reference Laboratory

I. Highlights

CUMULATIVE CONFIRMED CASES: 869, DEATHS: 6 in TU

- **Thirty-six (36) new confirmed cases** including 17 health care workers were reported in the last 24 hours from two counties with Montserrado county accounting for 27% from 180 samples evaluated by National Reference Laboratory of Liberia (NRL)
- No new county reported a confirmed case in the last 24 hours,
- Since March 16 – July 3, 2020, a total of 5,444 suspected cases including 145 deaths have been reported across 13 counties
 - Of these, eight hundred sixty-nine (869) have been confirmed including 89 health workers
 - 99% of confirmed cases are locally transmitted and 1% remains imported
- Cumulatively 8,284 samples have been tested at the national reference laboratory
- No new death was reported in the last 24 hours from the treatment unit;
- The cumulative total of six (6) deaths (CFR-0.7%) in confirmed cases including three health workers have been reported in the country
- Eight (8) new admissions in the last 24 hours, cumulating a total of 541 admissions recorded of which 183 case patients remain in treatment units as at 3 July 2020
- The State of emergency has been extended for additional 30 days to mitigate and contain the spread of the virus across the country
 - As all measures including 6 am - 6 pm stay home order is also imposed
 - Compulsory use of mask in public places including voluntary testing

SITUATION UPDATE (last 24 hours)

SAMPLES TESTED

8,284 (180 new)

CONFIRMED CASES

869 (36 new)

AFFECTED COUNTIES

13 (0 new)

ADMITTED CASES

541 (8 new)

RECOVERED CASES

368 (22 new)

CONFIRMED DEATHS

6 (0 new) - 0.7% CFR

Note: Cumulative community deaths are 30 and their death audits is ongoing

CASES BY GENDER

Male: 582(66.9%); Female: 287 (33.1%)

MOST AFFECTED AGE GROUPS

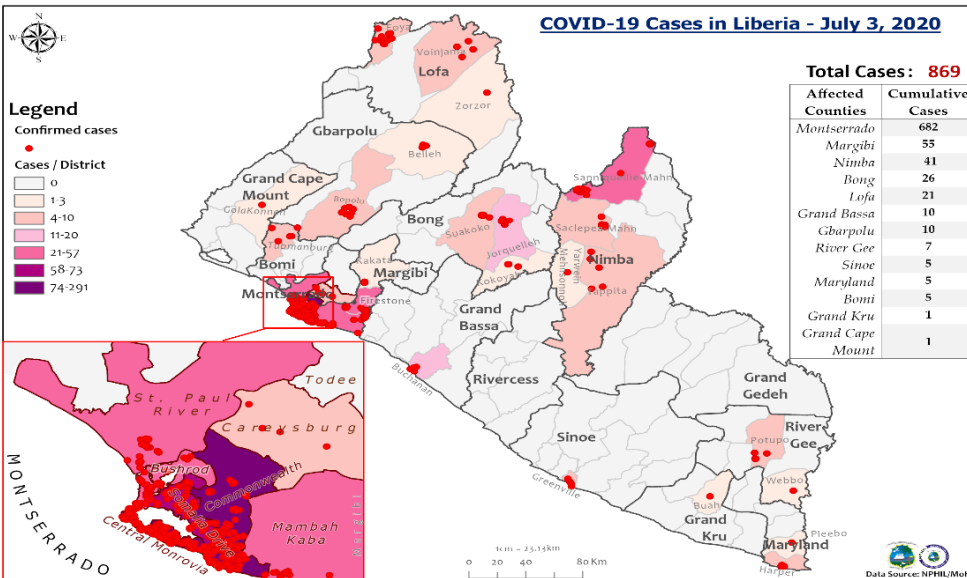
35-54 (38.6%)

CONTACTS LISTED

6,149 (79 new)

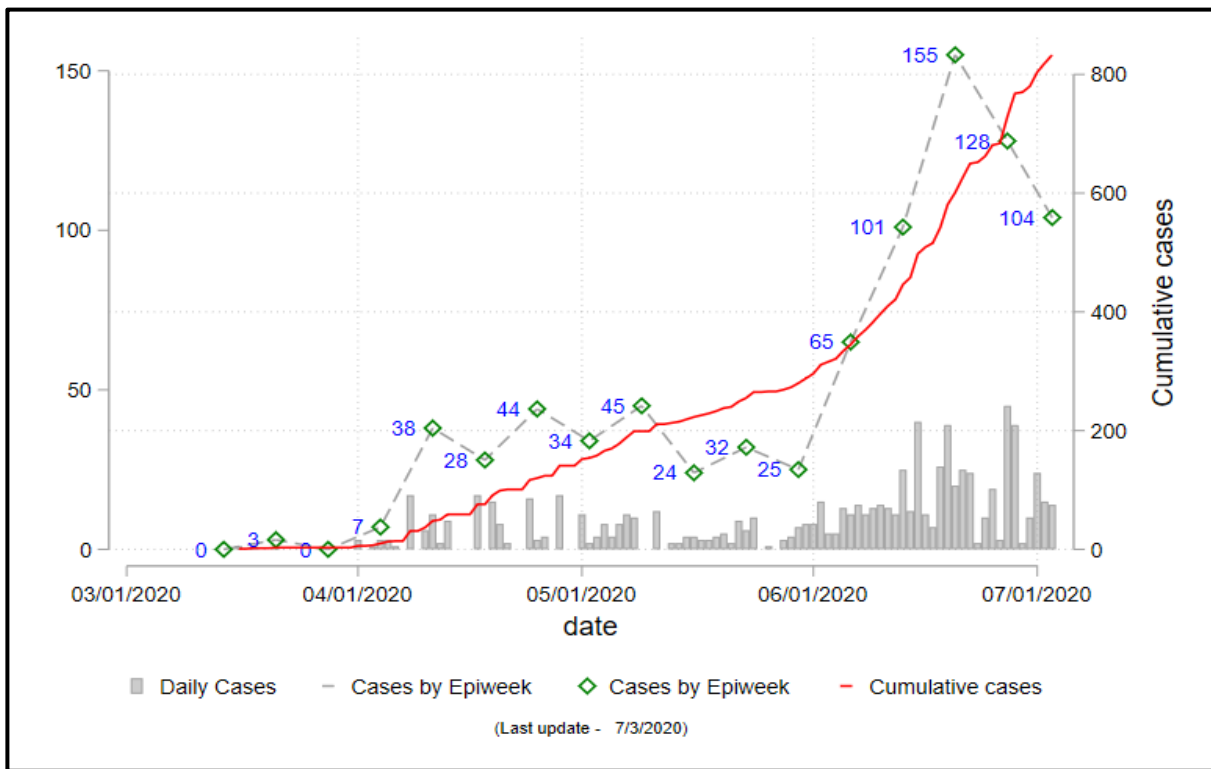
238 (3.9%) have tested positive; 4,595 (74.7%) have completed 14 days follow up; 7 lost to follow up; while 1,458 (23.7%) remains under active follow-up with 98% seen the last 24 hours

Table 1: Distribution of COVID-19 Response Status by County, Liberia, March 16 – July 3, 2020



County	Laboratory Confirmed Cases	Confirmed Cases on Contact List	Cumulative Confirmed cases
Bomi	1	0	5
Bong	0	0	26
Gbarpolu	0	0	10
Grand Cape Mount	0	0	1
Grand Bassa	0	0	10
Grand Kru	0	0	1
Lofa	9	0	21
Margibi	9	0	55
Maryland	0	0	5
Montserrado	10	0	682
Nimba	7	0	41
River Gee	0	0	7
Sinoe	0	0	5
NATIONAL	36	0	869

Figure 1: Geographical Distribution of COVID-19 Cases by County, Liberia, March 16 – 3 July, 2020



Note: There was a 17.4% (128 cases) downward trend observed during the week beginning 21st June 2020 as compared previous week with a cumulative total of 155 confirmed cases seven days. The current week started 27 June with 104 confirmed cases being reported on day six (3 July 2020).

Data is calculated based on WHO-CDC's epiweek which starts on Sunday.

Figure 2: Epi-curve for COVID 19 Cases in Liberia, 14 March – 3 July 2020

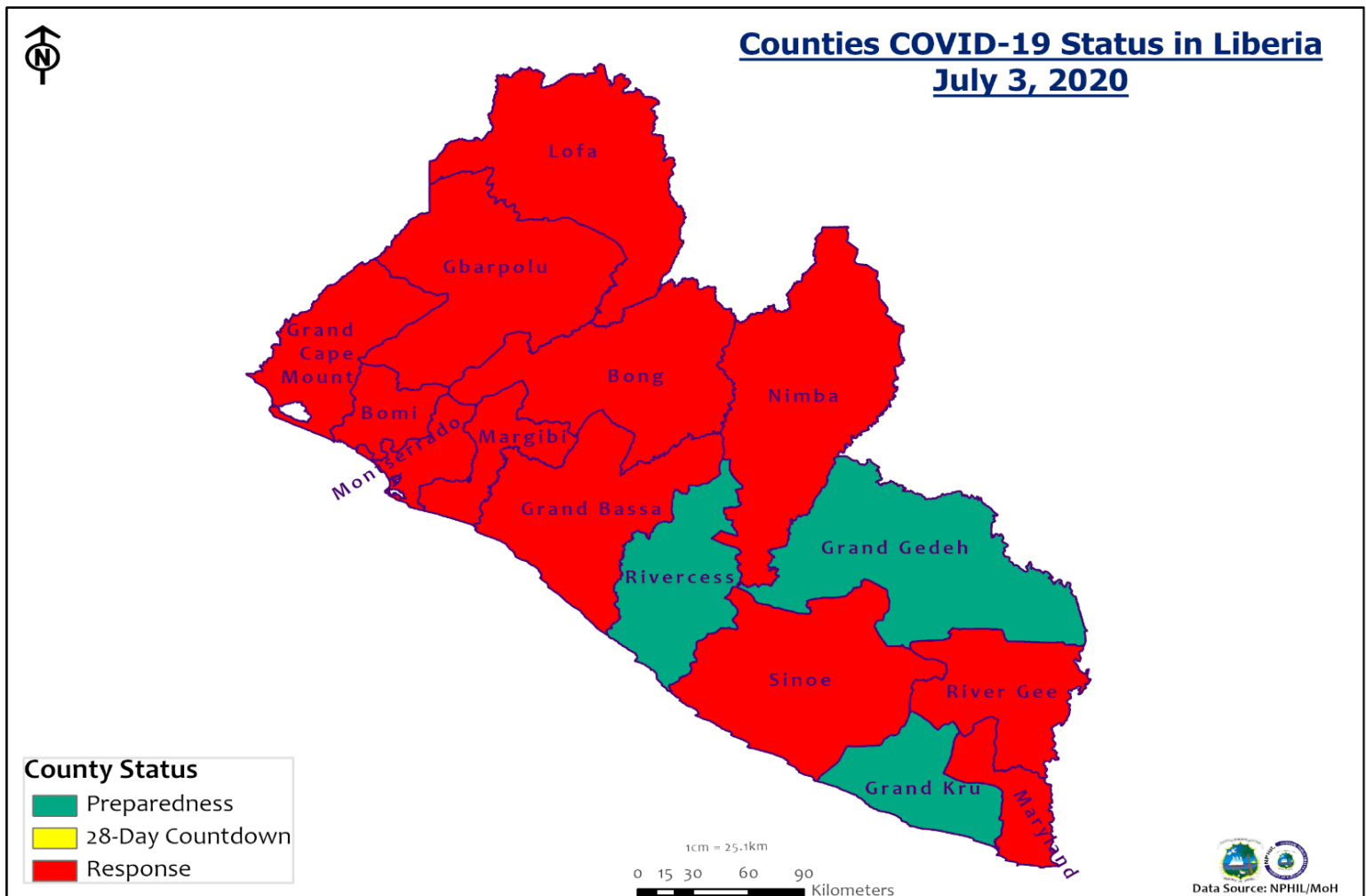


Figure 3: Geographical Distribution of COVID-19 Response Status by County, Liberia, 16 March – 3 July 2020

	Pre LKD	1st LKD	2nd LKD	3rd LKD	4th LKD	5th LKD	6 th LKD
Date	3/16 - 4/10	4/11 - 4/24	4/25 - 5/08	5/9 - 5/22	5/23 - 6/06	06/06 – 06/21	06/21-date*
Confirmed Cases	37	80	82	50	85	292	266

61% Reduction after 2 Lockdown Period but rebound significantly with 243% upward trend as compared to 4th LKD

*** 6th LKD period is not complete until 22 July 2020**

Figure 4: Significant impacts observed during the lockdown periods in Liberia, 16 March – 3 July 2020

Quarantine Measures

- All travellers from high exposure countries
- All high risks contacts
- Self isolation for low low risk contacts
- Test all high risk contacts at entry
- Test all quarantined persons on day 12

Testing Strategy

- All suspected cases, high and low risk contacts
- Inpatients
- Voluntary testing
- High exposure staff
- Suspicious or unexplained deaths

Note: The country is using RT-PCR to test for COVID-19, but there is a plan to establish Genexpert in four regional laboratories

Response Strategy

- Identify and isolate all cases through house to house search
- Case investigation
- Contact tracing and follow up
- Dead Body Swabbing and Safe Dignified Burial
- Testing of high and low risk contacts
- Focused Hotspot Strategy for Enhanced COVID-19 Surveillance
- Effective Community entry and engagement for community buy-in

Desired results/impacts of implemented strategies

- Improved case detection in hotspot communities
 - Over 42% upward trend observed in cases were detected after the initiation of the focused hotspot strategy for enhanced COVID-19 startegy in hospot communities in Montserrado county
- Interrupting community transmission (by isolating confirmed cases)

Figure 5: Significant Public Health Measures implemented in Liberia, June 6 – 3 July 2020

Table 2: Number of Contacts line listed and monitored, Liberia, 16 March – 3 July 2020

County	New Contacts Line listed	Cumulative Contacts	No. of Health Care Workers as Contacts	Cumulative no. of Health Care Workers as contacts	Contacts became a case	Cumulative contacts that became a case	Contacts Completed 14 Days	Cumulative Contacts Completing 14 Days	Contacts Under Follow-up	Contacts lost to Follow-up
Montserrado	103	3665	20	425	0	152	61	2951	647	3
Margibi	0	307	0	91	0	22	24	221	64	0
Grand Bassa	1	138	0	65	0	9	2	120	9	0
Maryland	39	185	20	20	0	0	0	128	46	0
Sinoe	0	181	0	29	1	1	0	128	53	0
River Gee	14	164	2	28	0	0	0	128	49	0
Gbarpolu	0	87	0	13	0	6	0	47	34	0
Grand Kru	0	76	0	12	0	6	0	76	0	0
Lofa	23	458	18	72	0	8	0	261	191	0
Nimba	0	506	0	41	0	13	30	452	63	2
Bong	0	219	0	70	0	18	0	0	192	2
Grand Cape Mount	0	21	0	0	0	0	0	0	21	0
Bomi	2	89	0	10	0	2	0	0	89	0
National	79	6096	60	876	1	237	117	4512	1458	7

Table 3: Number of cases currently in Treatment Units, Liberia, 16 March – 3 July 2020

COVID-19 Treatment Units							
Treatment Unit	New admissions	Cumulative admissions	Recoveries	Cumulative Recoveries	Currently in Treatment Unit	Total Males	Total Females
14 Military Hospital & Union TU Montserrado	8	440	18	332	114	460	222
Bong County Treatment Unit	0	17	0	0	17	16	10
Chief Jallahlone Hospital, Gbarpolu	0	3	0	1	0	5	6
Tellewoyan Hospital, Lofa	0	8	2	4	9	17	4
Rally Time Hospital, Grand Kru	0	1	0	2	0	1	0
AML Yekepa, Nimba County	0	2	0	0	3	2	0
Jackson F. Doe Hospital, Nimba	0	2	0	1	0	0	2
E & J Medical Center, Nimba County	0	11	0	0	11	10	1
Ganta Methodist Hospital, Nimba	0	1	1	2	0	19	7
Pleebo Health Center, Maryland	0	4	0	1	8	3	2
Fish Town Hospital, River Gee	0	7	0	1	6	6	1
Arcelor Mittal, Grand Bassa	0	5	0	5	2	2	4
Liberia Government Hospital, Grand Bassa	0	4	0	2	0	0	3
Duside Hospital, Margibi	0	28	1	18	6	33	22
F. J. Grant Hospital, Sinoe	0	4	0	1	3	4	0
Liberia Government Hospital, Bomi	0	3	0	11	3	2	3
St. Timothy Hospital, Grand Cape Mount	0	1	0	0	1	1	0
Total	8	541	22	368	183	582	287

II. Situation Context

Liberia reported its first confirmed case of the COVID-19 on 16 March 2020 in Monrovia, the country's capital. As of 3 July 2020, the country had recorded eight hundred sixty-nine (869) confirmed cases of COVID-19, including six (6) death (CFR=0.7%) 6,149 contacts registered. Montserrado County remains the Epicenter 682 (78.5%) of the confirmed cases including 6 (100%) deaths while the rest of the confirmed cases reported from; Margibi (55); Nimba County (41), Bong (26); Lofa (21); Gbarpolu (10); Grand Bassa (10), River Gee (7); Maryland (5); Sinoe (5); Bomi (4); Grand Cape Mount (1); and Grand Kru (1). As Liberia continues to test all dead bodies regardless of the place of death, of the 42 dead bodies that tested positive for COVID-19, 14 of were community deaths, at the same time, 22 occurred in other health facilities. Due to prompt treatment at the treatment centers, Liberia recovery rate continues to improve at 367 (68.3%) as of 3 July 2020.

Liberia has embarked on more community testing to identify cases as majority of COVID-19 cases in Liberia remains asymptomatic, this has aided in confirming more cases in hotspot communities and is leading to the interruption of community transmission.

Grand Kru, Grand Gedeh and Rivercess counties are the only counties in preparedness phase of the outbreak, without active outbreak is ongoing.

The National Incident Management System (IMS) is coordinating the affected counties led COVID-19 response with support from partners and central government.

The risk of transmission remains very high largely due to high population movements in Montserrado as the county is home to approximately 1,500,000 (1/3) of the country's total population, while local transmission mainly from contacts of confirmed cases has accounted for about 94.8% of the cases. It is also due to non restrictive measures to isolate or self isolate high risk contacts from the general population including families across the country.

III. Public Health Actions initiated following confirmation

1. Coordination

- In an effort to reduce or mitigate institutional transmission, the Incident management system (IMS) has instructed all agencies of government including national and international partners that attend the IMS meetings to do voluntary tests for COVID-19
- The National IMS through the President Office has mandated all citizens to wear masks when leaving their homes to reduce or mitigate the spread of the COVID-19 outbreak
- The IMS led by the Minister of Health continues to visit hotspot communities in Monrovia to encourage voluntary testing and adherence to all health regulations
 - Facemask, Handwashing, Social Distancing of at least 3-6 feet, limit gatherings to no more than 20
 - Limit travel in and out of all responding counties with exception for good and essential services
 - Montserrado, Margibi, Grand Bassa, Bong, Nimba, Lofa, Gbarpolu, Nimba Counties
 - Churches, Mosques and other religious establishment limit attendance to 25% of the normal attendance and observe safe distancing and other health measures
 - The State of Emergency has been extended by the proclamation of H.E. President George Weah for additional 30 days, starting with immediate effect as of June 22, 2020; with schools and Airport being close until 28 June 2020.

2. Epidemiology and Surveillance

- Conduct a house to house search and community outreach for symptomatic suspected cases and volunteers.
- Surveillance activities including active case search, contact tracing, and case investigation using the WHO interim guidelines
- Active case activities have intensified at the county, district, health facility, and community levels
- A total of 73,167 households have been visited, of which 399 sick people were identified and referred for testing after meeting the COVID-19 case definition
- Reclassification of cases are ongoing at national and sub-national levels
- Partners to continue to provide technical, operational and financial support to national and subnational levels

3. Case Management

- A total of 183 case-patients are being managed at treatment centers with 62.3% are being managed in Montserrado county
- Monitoring and testing high-risk contacts at POCs and isolation centers in affected counties

4. Laboratory

- The laboratory has tested eight thousand two hundred eighty-four (**8,284**) samples with 869 testing positive for COVID-19
- Specimens collection materials including swabs/VTM are pre-positioned in counties
- Encourage the public to go for voluntary testing or to report for testing if they develop symptoms
- Using mobile sample collection teams, conduct sample collection of all persons living within the marked dwellings
- Planned to operationalize two regional laboratories for COVID-19 testing

5. Infection Prevention and Control (IPC)

- Reinforcing handwashing in all public areas in the county (markets, health facilities, public offices, checkpoints, etc.)
- Health workers risk assessment are ongoing in affected counties

6. Psychosocial

- Continuous provision of cognitive-behavioral therapy, interpersonal therapy, motivational therapy
- Psychoeducation, linking patients with their families and home-based support to cases, contacts, and relatives at POCs, Isolation centers, and treatment centers
- Distribution of food and nonfood items to affected families and communities with high incidence is ongoing to encourage sample collection and testing

7. Risk Communication and community engagement

- Encourage continues community engagement and participation.
- Encourage community mobilization by Superintendents and other community leaders to increase voluntary testing.
- Public transport should enforce preventive measures including safe distancing and the use of facial covering.
- Elevate public messages that COVID-19 is still present in Liberia
- Airing of GoL-validated radio jingles on 18 stations across the country

IV. Challenges

- Inadequate investigation of confirmed cases including their close contacts across the country
- Inadequate financial and logistical resources for response activities
- Enforcement of the public use of masks and the call for testing of high and low risk contacts including health care workers
- Unable to assess the impact of the messages disseminated by the response partners and GOL

V. Next Steps/Recommendations

- Continuous active participation in Community Engagement, Risk Communication, and Protection Pillars, additional engagement in EPI/Surveillance Pillar
- Continue epidemiological investigations to link all the reported confirmed cases and their close contacts
- Mobilize additional resources to support ongoing response activities

For comments or questions, please contact

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