



Liberia Coronavirus (COVID-19) Outbreak Situation



Situation Report: No. 92

Date of onset of outbreak: 16 March 2020

Reporting date: 15 June 2020

Data Source: County Incident Management & National Reference Laboratory

CUMULATIVE CONFIRMED CASES: 509, DEATHS: 3 in TU

I. Highlights

- **Eleven (11) new confirmed cases** were reported in the last 24 hours in two counties with Montserrado County accounting for 91% from 175 samples evaluated by National Reference Laboratory of Liberia (NRL)
- No new county reported a confirmed case in the last 24 hours
- Since March 16 – June 15, 2020, a total of 4,131 suspected cases including 129 deaths have been reported across 12 counties
 - Of these, five hundred nine (509) have been confirmed including 50 health workers
 - 94.8% of confirmed cases are locally transmitted and 5.2% remains imported
 - Cumulatively 6,233 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 four (4) deaths (**CFR-0.8%**) in confirmed cases including three health workers have been reported in the country
- Five (5) new admissions in the last 24 hours, cumulating a total of 343 admission recorded of which 117 case patients remain in treatment units as at 15 June 2020

SITUATION UPDATE (last 24 hours)

SAMPLES TESTED

6,233 (175 new)

CONFIRMED CASES

509 (11 new)

AFFECTED COUNTIES

12 (0 new)

ADMITTED CASES

343 (5 new)

RECOVERED CASES

223 (1 new)

CONFIRMED DEATHS

4 (0 new) - 0.8% CFR

Note: Cumulative community deaths are 29 and their death audits is ongoing

CASES BY GENDER

Male: 335 (65.8%); Female: 174 (34.2%)

MOST AFFECTED AGE GROUPS

35-54 (37.1%)

CONTACTS LISTED

4,287 (91 new)

146 (3.4%) have tested positive; 3,272 (76.3%) have completed 14 days follow up; 10 (0.2) lost to follow up; while 1,012 (23.6%) remains under active follow-up with 96.9% seen the last 24 hours

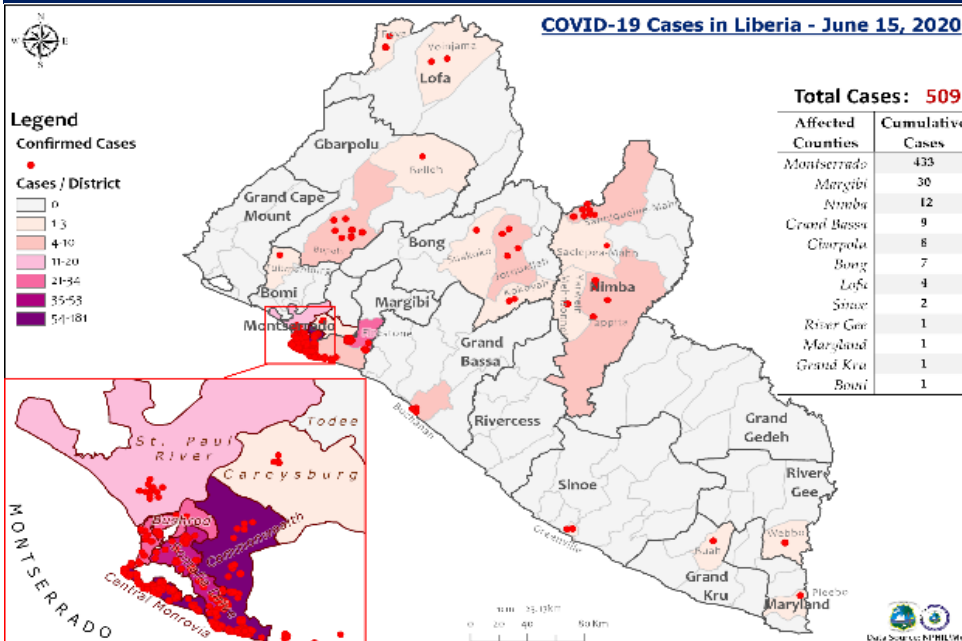


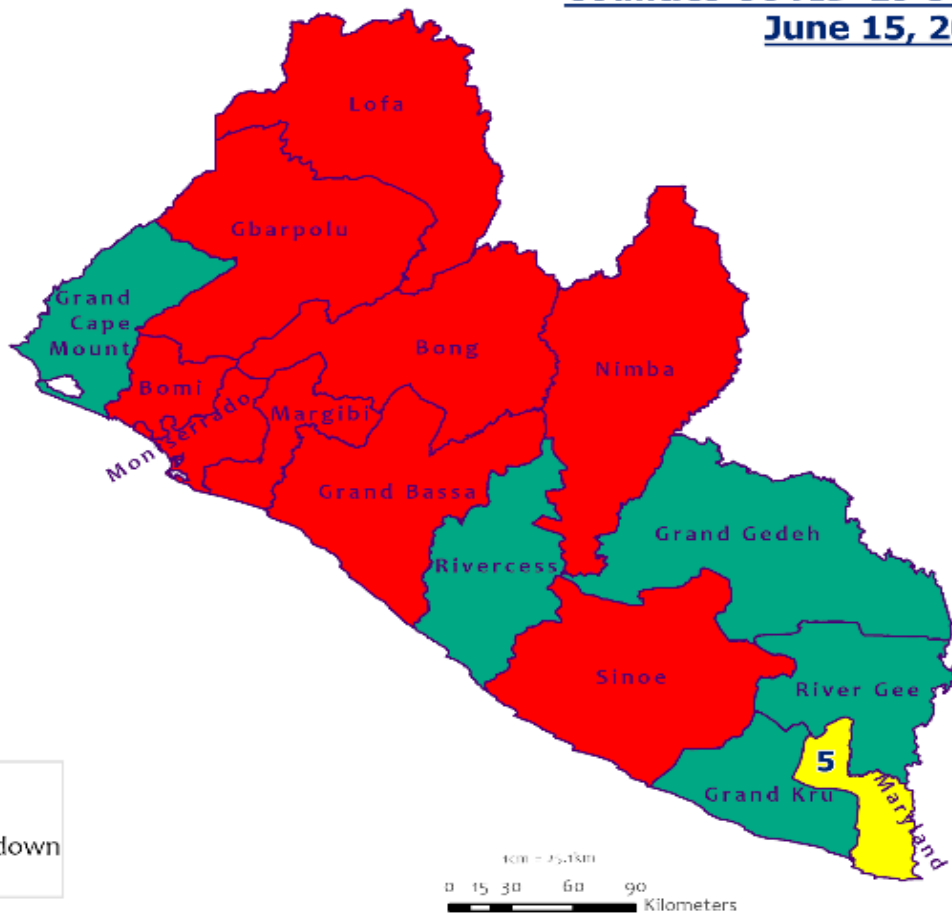
Figure 2: Geographical Distribution of COVID-19 Cases by County, Liberia, March 16 – June 14, 2020

Table 1: Distribution of COVID-19 Response Status by County, Liberia, March 16 – June 15, 2020

County	Laboratory Confirmed Cases	Confirmed Cases on Contact List	Cumulative Confirmed cases
Bomi	0	0	1
Bong	1	0	7
Gbarpolu	0	0	8
Grand Bassa	0	0	9
Grand Kru	0	0	1
Lofa	0	0	4
Margibi	0	0	30
Maryland	0	0	1
Montserrado	10	0	433
Nimba	0	0	12
River Gee	0	0	1
Sinoe	0	0	2
NATIONAL	11	0	509



Counties COVID-19 Status in Liberia June 15, 2020



County Status

- Preparedness
- 28-Day Countdown
- Response

Data Source: NPHIL/MoH

Figure 2: Geographical Distribution of COVID-19 Response Status by County, Liberia, 16 March – 15 June 2020

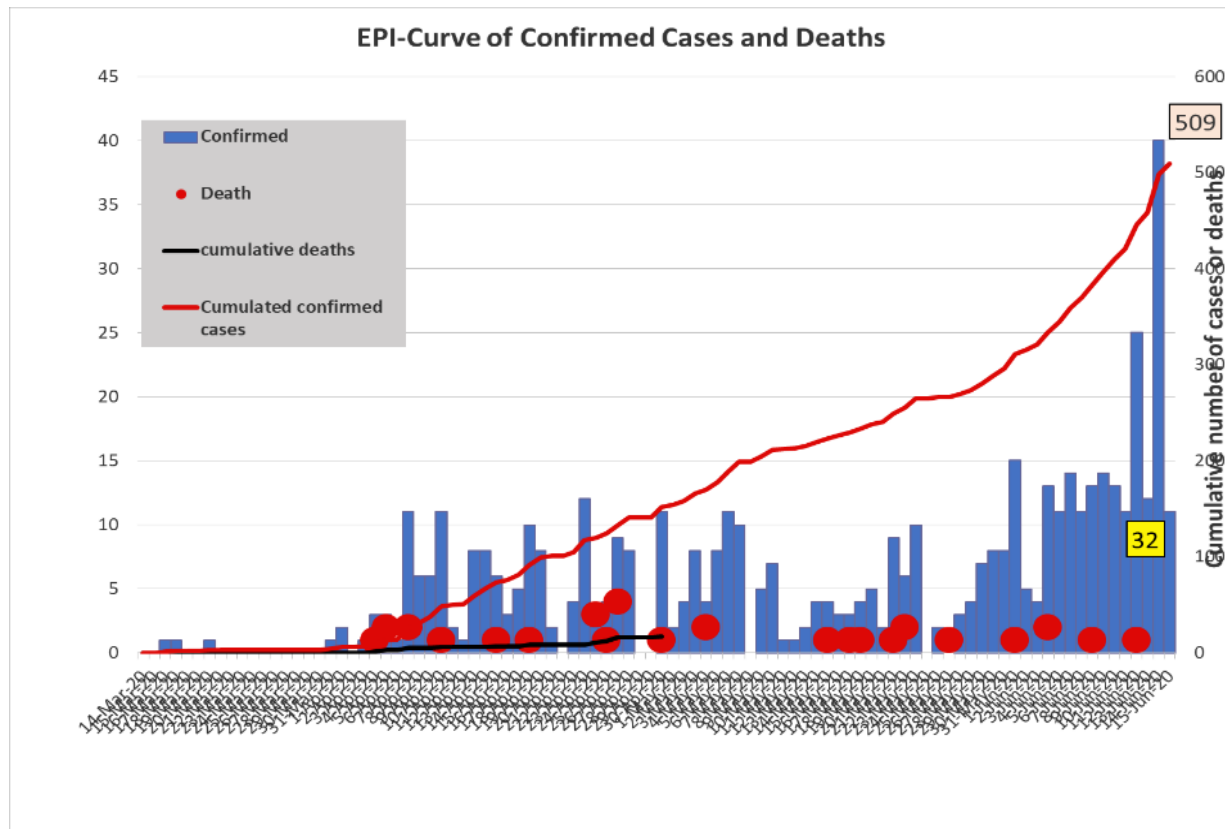


Figure 3: Epi-curve for COVID 19 Cases in Liberia, 14 March – 15 June 2020

Table 2: Number of Contacts line listed and monitored, Liberia, 16 March – 15 June 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	57	2812	6	313	32	126	124	2226	526	3
Margibi	3	289	0	91	0	22	0	139	150	0
Grand Bassa	4	116	0	64	0	8	0	64	44	0
Maryland	0	52	0	16	0	0	0	52	2	0
Sinoe	0	128	0	15	0	0	22	126	2	0
River Gee	0	128	0	15	0	0	0	104	24	0
Gbarpolu	6	59	0	12	0	6	0	47	6	0
Grand Kru	0	53	0	12	0	6	0	47	0	0
Lofa	0	250	0	30	0	3	0	114	133	3
Nimba	4	423	0	29	0	3	0	353	68	2
Bong	15	51	7	27	0	1	0	0	31	2
Bomi	2	26	0	4	0	0	0	0	26	0
National	91	4,387	13	628	32	175	146	3,272	1,012	10

Table 3: Number of cases currently in Treatment Units, Liberia, 16 March – 15 June 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, Montserrado County	4	305	2	197	106	290	143
Bong County Treatment Unit	0	0	0	0	0	5	2
Chief Jallahlone Hospital, Gbarpolu	0	1	0	0	0	4	4
Tellewoyan Hospital, Lofa	0	2	0	0	2	4	0
Rally Time Hospital, Grand Kru	0	1	0	1	0	1	0
Jackson F. Doe Hospital, Nimba	0	2	0	1	1	6	2
Ganta Methodist Hospital, Nimba	0	1	0	1	0	3	1
Pleebo Health Center, Maryland	0	1	0	1	0	1	0
Fish Town Hospital, River Gee	0	1	0	1	0	1	0
Arcelor Mittal, Grand Bassa	0	5	0	5	0	2	4
Liberia Government Hospital, Grand Bassa	0	3	0	0	2	0	3
Duside Hospital, Margibi	1	20	0	14	5	16	14
F. J. Grant Hospital, Sinoe	0	2	0	1	1	2	0
Bomi	0	0	0	0	0	0	1
Total	5	343	2	223	117	335	174

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 15 June 2020, the country had recorded five hundred fifty-nine (509) confirmed cases of COVID-19, including four (4) death (CFR=0.8%) with 4,387 contacts registered. Montserrado County remains the Epicenter 433 (85%) of the confirmed cases including 4 (100%) deaths while the rest of the confirmed cases reported from; Margibi (30); Nimba County (12), Grand Bassa (9), Gbarpolu (8); Bong (7); Lofa (4); Sinoe (2); Grand Kru (1); River Gee (1); Bomi (1) and Maryland (1). As Liberia continues to test all dead bodies regardless of the place of death, of the 33 dead bodies that tested positive for COVID-19, 14 (44.%) of were community deaths, at the same time, 15 occurred in other health facilities. Due to prompt treatment at the treatment centers, Liberia recovery rate continues to improve at 223 (65%) as of 15 June 2020.

Grand Kru and River Gee counties have existed the epidemic phase of the outbreak and are now in preparedness phase. A two-incubation periods count down has started in two counties that have discharged their last confirmed cases on 23 May 2020 for Maryland.

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.

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

2. Epidemiology and Surveillance

- 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 45,409 households have been visited, of which 214 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
- WHO Country Office and partners to continue to provide technical, operational and financial support to national and subnational levels

3. Case Management

- A total of 117 case-patients are being managed at four treatment centers with 90.5% are being managed in Montserrado county
- Monitoring and testing high-risk contacts at POCs and isolation centers

4. Laboratory

- The laboratory has tested six thousand two hundred twenty-three (6,233) samples with 509 testing positive for COVID-19
- Specimens collection materials including swabs/VTM are pre-positioned in counties
- 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

- Airing of GoL-validated radio jingles on 18 stations across the country

IV. Challenges

- Inadequate financial and logistical resources for response activities

V. Next Steps/Recommendations

- Continued 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
- Mobilize additional resources to support ongoing response activities

For comments or questions, please contact

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