



*A member of International Medical Corps' health team examines a patient at an IDP settlement.*

The effects of Storm Daniel, which hit Libya on September 10 and led to the collapse of two dams located upstream from the coastal city of Derna, continues to place a heavy strain on Libya's healthcare system. According to the World Health Organization, 63% of hospitals and 52% of primary health facilities in the affected area are non-functional or only partially functional,<sup>1</sup> and there is a shortage of medicines necessary for treating chronic diseases.<sup>2</sup>

Most health risks for flood survivors are related to contaminated water sources and inadequate hygiene and sanitation facilities. These conditions heighten the risk of water-borne diseases, including acute watery diarrhea and cholera, and vector-borne diseases, including typhoid, dengue, malaria and yellow fever. The healthcare infrastructure has suffered substantial damage, requiring urgent deployment of emergency medical assistance and body bags for burials. In the last two days, more than 190 cases of diarrhea have been reported in the affected regions by the National Center for Disease Control.<sup>3</sup>

The floods have displaced more than 40,000 people in Derna, with 30,000 to 35,000 currently residing in overcrowded camps and settlements in and around Derna governorate,<sup>4</sup> where they have limited access to clean water and sanitation. There also is a need for mental health and psychosocial support (MHPSS) services within the affected communities, where callers to a national hotline report issues involving feeling overwhelmed, experiencing low moods, disrupted sleep patterns, heightened stress and anxiety stemming from pervasive uncertainty.

### FAST FACTS

- More than 4,000 people have been confirmed dead, while more than 8,500 people are missing and tens of thousands displaced
- In the affected area, 63% of hospitals and 52% of primary health centers are non-functional or only partially functional
- The worst-affected areas are the cities of Derna and Sousa, along with the neighboring towns of Al Bayada and Al Makhaili
- Needs for WASH, healthcare and mental health services are critical in flood-affected areas

### OUR FOOTPRINT

- International Medical Corps was the first international humanitarian organization in Libya after conflict began in 2011, and has since been providing critical health, nutrition, protection, mental health and psychosocial support (MHPSS), and water, sanitation, and hygiene (WASH) services

### OUR RESPONSE

- We have three EMT Type 1 Fixed facilities operational in Derna and Sousa that so far have provided 1,391 outpatient consultations
- MHPSS counselors and operators are providing remote MHPSS services through the National Helpline, which is receiving an average of 170 calls per week

<sup>1</sup> <https://www.emro.who.int/libya-floods/index.html>

<sup>2</sup> <https://reliefweb.int/report/libya/libya-flood-response-humanitarian-update-28-september-2023-enar>

<sup>3</sup> <https://reliefweb.int/report/libya/libya-situation-report-4-oct-2023-enar>

<sup>4</sup> <https://reliefweb.int/report/libya/saving-lives-preventing-health-risks-and-restoring-health-care-services-aftermath-libya-floods>

## International Medical Corps Response

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### Health

International Medical Corps has established three Emergency Medical Teams (EMT) Type 1 Fixed facilities—two in Derna and one in Sousa—where we so far have provided health services to 1,391 people (782 females, 609 males). The most common morbidities are chronic conditions, including diabetes, hypertension, upper respiratory and lower respiratory tract infections, and diarrhea. International Medical Corps monitors the diarrhea cases closely and communicates with local health authorities regularly to promptly identify potential outbreaks of disease. To respond to the risks, International Medical Corps community health workers are promoting awareness on using bottled water and avoiding the use of the contaminated city water source. Our nurses also convey educational messages on infection prevention, hand hygiene and proper handwashing techniques so communities are educated on how to protect themselves and their families from possible diseases. Following the temporary closure of our previously supported health facility in East Derna, our health team promptly conducted a rapid assessment of health needs and identified a new health facility called Yousef Abo-rhil in the western region of Derna with acute needs for primary healthcare and a significant shortage of medical professionals. We began providing primary healthcare services today at this clinic. Additionally, we have begun recruitment for an EMT Type 1 mobile team that will operate next week to provide support for internally displaced persons (IDPs) in settlements around Om-Alkora, and ensure inclusive healthcare access for hard-to-reach populations.

### MHPSS

International Medical Corps continue to manage the national helpline, and mental health counselors are now handling an average of 170 calls per week. Thirty percent of these were inquiries about available services, while 70% sought and received MHPSS services, including psychological first aid (PFA) and support for well-being. Seventy percent of the callers were female and 30% male. Adolescents and children have also called the helpline. Forty-five percent of callers are from directly affected areas, including Al Bayda, Benghazi, Derna and Tobrok. Other callers were IDPs in Tripoli and the surrounding areas. To expand the reach of our efforts, our MHPSS staff is supporting a comprehensive needs assessment and the recruitment of additional personnel to facilitate PFA training.

### Water, Sanitation and Hygiene (WASH)

International Medical Corps received water bladders to support our WASH response in health facilities, with community-based activities focused on infection prevention and control. International Medical Corps is also facilitating the custom clearance of the water modules that have now arrived in Libya and that contain equipment to set up water networks that can serve up to 5,000 people each. We are coordinating with UNICEF and other WASH partners to begin implementing WASH activities in Derna, including reviewing the composition of hygiene kits to ensure they meet local needs, and are procuring hygiene kits to improve hygiene and sanitation conditions for vulnerable households. We have begun testing of water sources, and are ready to begin water trucking once we have identified a clear water source. We are also in the process of recruiting technicians to lead WASH activities.

### Non-Food Items

International Medical Corps has begun distributing non-food items—including blankets, wheelchairs, crutches, cooking sets and mattresses—to beneficiaries and facilities based on our needs assessment conducted in flood-affected communities. Our team also has begun procuring medicines and equipment to support local health services—International Medical Corps is working on the customs clearance of medicines and medical equipment, including items from USAID, that will be delivered to Tripoli's main warehouse and then dispatched to the field as needed.

### Gender-Based Violence (GBV)

International Medical Corps is organizing GBV prevention and response activities within and around the city of Derna. As part of our efforts, we are planning to distribute dignity kits, which contain essential feminine hygiene items, to support women in the area. We also are recruiting staff dedicated to community engagement and outreach in Benghazi, Derna and Misrata, ensuring comprehensive support across multiple regions.

### Coordination

UN agencies have reactivated thematic working groups. International Medical Corps is coordinating with all working groups, including Health, EMT, Protection, WASH, GBV and MHPSS, to ensure a collaborative response with other stakeholders.