



An International Medical Corps pediatrician examines a patient at a local clinic.

The impact of Storm Daniel, which struck Libya on September 10 and resulted in the collapse of two dams upstream from the coastal city of Derna, continues to exert significant pressure on Libya's healthcare system. According to the World Health Organization, 84% of hospitals and 88% of primary healthcare (PHC) facilities are either non-functional or only partially operational—a situation that is further exacerbated by a shortage of essential medicines for treating chronic diseases.¹

Flood survivors face significant health risks stemming from contaminated water sources and inadequate hygiene and sanitation facilities. These conditions elevate the likelihood of water-borne diseases, such as acute watery diarrhea and cholera, as well as vector-borne diseases, such as typhoid, dengue, malaria and yellow fever. PHCs in smaller towns around Almarj and Albayda are grappling with operational challenges caused by infrastructure damage, power outages, communication disruptions, shortage of health workers and the loss of critical assets, including medical equipment and ambulances, due to the storm.²

More than a month following the catastrophic floods in the country, more than 43,000 people are still displaced.³ Of these, only 1,143 are currently residing in collective sites. Among the 38 sites originally assessed, 12 are still in use⁴ and have limited access to clean water and sanitation.

Additionally, there is a growing demand for mental health and psychosocial support (MHPSS) services within the affected communities. Callers to a national MHPSS hotline have been reporting a range of issues, including feelings of overwhelming stress, persistent low moods, disrupted sleep patterns, heightened stress levels and increased anxiety, primarily stemming from the ongoing uncertainty.

FAST FACTS

- The storm caused more than 4,300 deaths, with an additional 8,500 people reported missing and tens of thousands displaced
- In the affected area, 84% of hospitals and 88% of primary health centers are non-functional or only partially functional
- The most severely impacted areas include the cities of Derna and Sousa, as well as the nearby towns of Al Bayada and Al Makhaili
- Needs for water, sanitation and hygiene (WASH) services, as well as for 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 WASH services

OUR RESPONSE

- We currently are operating three EMT Type 1 Fixed facilities in Derna and Sousa, as well as one mobile unit, which together have provided 2,938 outpatient consultations to date
- Our MHPSS counselors and operators are delivering remote services via the National Helpline, with an average of 177 calls per week

¹ <https://reliefweb.int/report/libya/unicef-libya-humanitarian-situation-report-no-5-storm-daniel-and-floods-22-october-2023>

² <https://reliefweb.int/report/libya/libya-flood-response-situation-report-11-october-2023>

³ <https://reliefweb.int/report/libya/wfp-libya-flood-response-situation-report-5-29-october-2023>

⁴ <https://reliefweb.int/report/libya/libya-flood-response-humanitarian-update-31-october-2023>

International Medical Corps Response

Health

International Medical Corps has established four Emergency Medical Teams (EMT) Type 1: three are in fixed locations, and one is mobile. Of the three fixed EMTs, two are in Derna and one is in Sousa. The mobile team is assigned to Shuhadaa Algurgef health facility at Alfatayeh Muhalla. All teams have provided health services to 2,938 people (1,706 females, 1,232 males). The morbidities identified include acute and chronic conditions, such as diabetes, hypertension, upper and lower respiratory tract infections, diarrhea and genitourinary tract infections. International Medical Corps is closely monitoring the incidence of newly reported cases of diarrhea, tracking the effectiveness of medications for it, and referring severe cases to the branches of the National Center for Disease Control in Libya.

Our teams at selected health facilities continue to educate the population about the need to avoid using water sources within the city and to instead rely solely on bottled water. International Medical Corps is cooperating with the Ministry of Health (MoH) to sustain health services at designated health facilities, including the recently added Abo-rhil and Shuhadaa Algurgef health facilities, whose management has recognized our teams' ability to provide a diverse range of services meeting the population's healthcare needs.

In response to an urgent request from the MoH, International Medical Corps relocated the mobile EMT1 to the primary healthcare center in Alfatayeh Muhalla serving IDPs who no longer reside in collective shelters. The EMT1 Mobile team is monitoring the movement of IDPs through direct phone contact and coordination with relevant authorities, and will be relocated as needed to new IDP settlements to ensure continued healthcare for this population. International Medical Corps also has procured medical supplies and equipment that it will distribute to selected health facilities next week to enhance their stock and enable them to deliver high-quality health services.

International Medical Corps has successfully obtained customs clearance to import items from the US, such as clinical thermometers, syringes, and other medical consumables, and will deliver these to medical teams and supported health facilities by November 9. We also are working on customs clearance for two shipments of medication, medical supplies and equipment expected to arrive by November 18.

Mental Health and Psychosocial Support (MHPSS)

International Medical Corps continues to manage the national helpline, with mental health counselors providing 787 calls since the hotline's launch. Our staff referred 117 callers to appropriate MHPSS services, including psychological first aid (PFA), stress management, counseling, emotional support and psychoeducation. 72% of the callers were female and 28% were male. 45% of callers are from directly affected areas, including Al Bayda, Benghazi, Derna and Tobrok. Other callers were IDPs in Tripoli and the surrounding areas. Additionally, MHPSS counsellors have now referred 16 people to specialized mental health services at tertiary levels.

Water, Sanitation and Hygiene (WASH)

International Medical Corps has received water bladders and equipment capable of establishing water networks for up to 5,000 people, and are coordinating with local authorities and WASH partners to identify suitable locations for installing these water modules. Our WASH officer is performing maintenance in the target locations this week, including preparing cement bases for water tank installation.

International Medical Corps' WASH engineer is assessing sanitation and water network infrastructure of health facilities in the region. In Martouba, local authorities and WASH partners have identified, tested and approved a clean water source. International Medical Corps is coordinating with UNICEF and other WASH partners to commence water trucking operations supporting healthcare facilities and IDPs in Derna, prioritizing about 800 households in the Alsahel area in Derna for water-trucking intervention as there are acute needs. We are also working with health facilities to install water storage for clean water.

International Medical Corps procuring 1,240 hygiene kits to enhance hygiene and sanitation conditions for vulnerable households in the region. Each kit includes soap, toothbrush and toothpaste, sanitary napkins, towels, bleach, washing powder for clothes, and dishwashing gel designed to sustain a family of five for one month.

Non-Food Items

Over the last two weeks, International Medical Corps has provided Dar-Alsalam, Shohadaa Algharghaf and Yosef Aborahil health facilities with wheelchairs, crutches, mattresses, diapers and essential medicines. We also have supported the Libyan Red Crescent by donating wheelchairs, crutches, diapers and shrouds for burials.

Gender-Based Violence (GBV)

International Medical Corps is in the final stage of recruiting for outreach and social workers who will provide GBV prevention and response activities in Derna, Benghazi and Misrata. We have procured 1,000 dignity kits and other necessary supplies to support these initiatives.

Coordination

International Medical Corps is coordinating with all United Nations working groups, including Health, Emergency Medical Teams (EMT), Protection, WASH, GBV and MHPSS. This collaborative approach ensures a cohesive and effective response with other stakeholders.

In addition, International Medical Corps participated in the international conference for the reconstruction of Derna and neighboring cities and towns that was organized by the government in the east of Libya on November 2. The conference was hosted in Benghazi with the participation of national and international companies and organizations. International Medical Corps had the opportunity to meet officials and discuss plans and ideas to be implemented during the recovery phase, focusing on rebuilding the capacity of primary healthcare facilities and on strengthening the capacity of healthcare staff in affected areas.