

An International Medical Corps doctor treats a critically ill patient in Alshaheed Atia Hospital located in Kufra.

Since the conflict erupted in Sudan in mid-April 2023, some 10 million people have been displaced, with more than 2 million fleeing to neighboring countries. Most Sudanese displaced communities in Libya have settled in Kufra, a sparsely populated region that is predominantly desert. This influx of Sudanese into Libya has created an urgent humanitarian crisis.<sup>1</sup>

# **International Medical Corps Response**

On June 2, International Medical Corps received official approval from the International Cooperation Office and the Emergency Committee of the Ministry of Health (MoH) to collaborate closely on projects in Kufra. The next day, we deployed a rapid response team consisting of a medical doctor, a nurse and a field site officer.

Based on the urgent health needs observed by International Medical Corps teams, and in coordination with the Ministry of Health, International Medical Corps has deployed an additional medical doctor to assist with the high volume of health consultations. As agreed with health authorities, this additional doctor has been assigned to Alshaheed Atia Hospital, which receives all Sudanese referrals requiring secondary health services.

## **FAST FACTS**

- In April 2023, clashes erupted in multiple cities across Sudan.
  Since then, some 10 million people have been displaced from their homes, including more than 2 million who have crossed into neighboring countries.
- The estimated total number of Sudanese displaced communities in Kufra has increased significantly recently, raising alarms about an impending humanitarian catastrophe if urgent aid is not delivered.
- Immediate needs include health and mental health services, food, shelter, essential household items for the displaced and logistical support.

# **OUR FOOTPRINT**

 International Medical Corps was the first international humanitarian organization in Libya when the 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**

- Our rapid response team has conducted 1,046 health consultations at seven camps.
- Pharmaceuticals and medical consumables have been sent to support the rapid response team.

Between June 27 and July 2, our medical team continued to deliver emergency and primary healthcare consultations to the Sudanese population, managing up to 80 consultations daily. Since their deployment, the team has conducted 1,046 consultations across all of the identified locations. Additionally, the team is distributing essential medications to patients at the identified locations, especially to those with chronic conditions such as diabetes and hypertension.

<sup>&</sup>lt;sup>1</sup> https://dtm.iom.int/sites/g/files/tmzbdl1461/files/reports/DTM-Libya-Profile-of-Sudanese-Migrants update 06 March 2024.pdf

The International Medical Corps medical team has so far been conducting health consultations at seven out of the identified 11 camp-like settings where IDPs are staying, and plans to support the remaining camps throughout the rest of this month. There have been approximately 800 new arrivals in the camps per day.

Chronic conditions such as diabetes, hypertension and gastritis, along with infectious diseases like upper and lower respiratory tract infections and urinary tract infections, are the most common morbidities identified by our rapid response team. The team also has reported other conditions requiring immediate treatment, including malnutrition, anemia, dermatological disorders and



An International Medical Corps medical team examines a newly arrived Sudanese in one of the camp-like locations in Kufra city.

the need for antenatal care. Urgent needs remain in the areas of health, mental health and psychosocial support (MHPSS), protection, and water, sanitation, and hygiene (WASH), as outlined below.

#### Health

- 1. Health facilities in Kufra have very limited capacity and are not fully operational. They also are grappling with severe shortages of medical commodities.
- 2. Treatment is needed for chronic diseases, malnutrition, infectious diseases, anemia and skin conditions. Antenatal care is also urgently required.

#### **MHPSS**

- 1. The majority of the population is experiencing symptoms of post-traumatic stress disorder, due to ongoing conflict.
- 2. Children are at risk of experiencing developmental and behavioral challenges, due to disrupted education, absence of regular routines and exposure to traumatic events. These factors can contribute to the emergence of symptoms such as anxiety, depression and regression in behavior.

## **Protection**

- 1. Overcrowding in camps has raised the risk of violence, especially gender-based violence (GBV).
- 2. There is an urgent need for safe spaces for women and children. Such spaces are essential for facilitating access to GBV prevention and response services, including psychosocial support, medical care and legal assistance.

#### WASH

- 1. Access to clean and safe drinking water is needed to prevent waterborne diseases.
- 2. There is a need for functional sanitation facilities, including latrines and bathing areas, which are essential for hygiene and prevention of illness.
- 3. There is a need to provide such items as hygiene kits, including soap, menstrual hygiene products and other essentials to the newly arrived Sudanese.

#### **Shelter**

1. Tents, blankets, sleeping mats and mosquito nets are urgently needed, as most of the newly arrived Sudanese are directly exposed to harsh weather conditions and intense sunlight. Childcare non-food items, such as diapers, baby bottles and baby wipes, are also needed.