



International Medical Corps' health team prepares for a consultation at an IDP settlement.

On September 10, Storm Daniel hit Libya, unleashing powerful winds with speeds of up to 80 km/h (50 mph) and heavy rainfall. The following day, the formidable force of the storm caused the collapse of two dams located upstream from the coastal city of Derna, resulting in the confirmed loss of 4,333 people.¹ According to the regional emergency committee's report, 25% of Derna is submerged or destroyed. Despite the efforts of search-and-rescue teams in locating 452 survivors, more than 8,500 people remain missing.²

The catastrophe is straining Libya's healthcare system. According to the World Health Organization, 63% of hospitals and 52% of primary health facilities in the affected area are partially functional or non-functional.³ And there is a deficiency of medicines necessary for treating chronic diseases.⁴ Most health risks for flood survivors are related to contaminated water sources and inadequate hygiene and sanitation facilities. These conditions heighten the risk of disease outbreaks, such as 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. More than 190 cases of diarrhea have been reported in the affected regions in the last two days by the National Center for Disease Control.⁵

The floods have displaced more than 40,000 people in Derna, with 30,000-35,000 currently residing in overcrowded camps and settlements in and

FAST FACTS

- More than 4,000 people are reported 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 partially functional or non-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.
- MHPSS counselors and operators are providing remote MHPSS services through the National Helpline.
- Multi-sectoral assessments completed at three health centers to understand the need for further support.

¹ <https://reliefweb.int/report/libya/libya-situation-report-4-oct-2023-enar>

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

³ <https://www.emro.who.int/libya-floods/index.html>

⁴ <https://reliefweb.int/report/libya/libya-flood-response-humanitarian-update-28-september-2023-enar>

⁵ <https://reliefweb.int/report/libya/libya-situation-report-4-oct-2023-enar>

around Derna governorate,⁶ where they have limited access to clean water and sanitation. Furthermore, there is a pressing need for facilities, which places them at heightened risk of various health issues, including skin and respiratory infections.⁷ In addition, when considering mental health and psychosocial support (MHPSS) services within the affected communities, the primary issues raised by callers revolve around emotions of being overwhelmed, experiencing low moods, disrupted sleep patterns, heightened stress, and anxiety stemming from the pervasive uncertainty.

International Medical Corps Response

Health

International Medical Corps established three EMT Type 1 Fixed facilities: two in Derna and one in Sousa, where we have provided health services to 984 people so far. The most common morbidities identified are chronic conditions, including diabetes, hypertension, upper respiratory and lower respiratory tract infections, and many cases of diarrhea. The Ministry of Health (MoH) maintains the facility in Ehrir Kwesah in East Derna, and the EMT in West Derna was relocated to Om Alkoraa, an IDP settlement. In Om Alkoraa, the team is providing essential health services, including child health and reproductive services. Our team assessed the IDP settlement to identify needs and gaps and performed a multi-sectoral assessment at three health centers. This data will be used to focus the response over the next two weeks. We are also planning to send medicines to the health facilities in Sousa and Ehrir Kwesah. This will enhance the pharmaceutical stock of both facilities and enable the patients supported by our EMTs to receive the medication they need.

MHPSS

International Medical Corps recruited operators and MHPSS counselors to provide remote MHPSS services through the National Helpline. International Medical Corps' MHPSS counselors have received more than 175 calls—30% were inquiries about available services, while 70% sought and received MHPSS services, including psychological first aid (PFA) and well-being support. Sixty-nine percent of the callers were female, and 31% were male. Adolescents and children have also called the helpline. Notably, 44% of callers were from directly affected areas, including AlBayda, Benghazi, Derna and Tobrok. Other callers were IDPs in Tripoli and the surrounding areas. The MHPSS staff is supporting a detailed needs assessment and recruiting staff to provide PFA training.

WASH

International Medical Corps received water bladders to support our water, sanitation and hygiene (WASH) response in health facilities, with community-based activities focused on infection and prevention control. International Medical Corps will also receive water modules—containing equipment to set up water networks that can serve up to 5,000 people each. With these supplies, we are now coordinating with UNICEF and other WASH partners to begin implementing WASH activities in Derna. We are also in the process of recruiting technicians to lead the WASH activities.

Non-food Items

International Medical Corps, in partnership with the Libyan Red Crescent and the Dar Al Salam Internally Displaced Persons (IDPs) Committee, has successfully distributed 280 hygiene kits to IDPs residing in informal settlements located in Derna. The distribution of PPE was also completed. Non-food items, including blankets, wheelchairs, crutches, cooking sets, and mattresses, arrived in Libya, and the field team is organizing them. In the meantime, the health team is handling the distribution plan for wheelchairs and crutches.

Coordination

Thematic working groups by UN agencies have been reactivated. 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. International Medical Corps actively participated in the first Mental Health and Psychosocial Support (MHPSS) Technical Working Group meeting for eastern Libya hosted by WHO on October 11. During this meeting, International Medical Corps committed to providing vital contributions to coordination efforts and the formulation of the MHPSS response plan, focusing on both short- and medium-term objectives. International Medical Corps' dedication to offering technical support further underlines our commitment to enhancing mental health and psychosocial well-being.

Additionally, International Medical Corps' field team in Derna attended a meeting on October 11, facilitated by MoH representatives in Derna, which aimed to coordinate health activities among partners and identify needs and gaps to avoid duplication.

⁶ <https://reliefweb.int/report/libya/saving-lives-preventing-health-risks-and-restoring-health-care-services-aftermath-libya-floods>

⁷ <https://reliefweb.int/report/libya/unicef-libya-humanitarian-situation-report-no-4-storm-daniel-and-floods-5-october-2023>