The aftermath of Storm Daniel, which hit northeast Libya in September and led to the collapse of two dams upstream from the coastal city of Derna, continues to impact the country. Existing challenges, such as limited functionality in hospitals and primary healthcare (PHC) facilities—including a lack of medicines, staff shortages, facility damage, and inadequate equipment—have been exacerbated. Access to livelihoods also is a major concern, due to the destruction or damage of markets and businesses, and the loss of crops and livestock.

Immediate rehabilitation priorities differ across locations, with most communities prioritizing infrastructure such as water and sewage networks, roads, streets and bridges, as well as health services. Nearly 45,000 people continue to be displaced two months after the flood, with health services emerging as the primary requirement for internally displaced persons (IDPs) in Derna and Almarj. Flood survivors face significant health risks arising from contaminated water sources and inadequate hygiene and sanitation facilities. This elevates 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. Diarrheal diseases have slightly increased, reaching a total of 9,969 cases as of November 28. Al Bayda consistently reports the highest number of cases, potentially linked to the ongoing use of contaminated water sources for consumption and personal hygiene.

There also is a growing demand for mental health and psychosocial support (MHPSS) services within affected communities. Callers to the national MHPSS hotline have been reporting concerns such as overwhelming stress, persistent mental health issues, and lack of access to necessary services.

FAST FACTS
- The storm resulted in a devastating toll, claiming more than 4,300 lives, while an additional 8,500 people have been reported missing. Tens of thousands have been forcibly displaced from their homes.
- The cities of Derna and Sousa, along with the nearby towns of Al Bayada and Al Makhaili, stand as the most severely affected regions.
- Urgent requirements for essential services—particularly healthcare, mental health services, and water, sanitation, and hygiene (WASH)—are paramount in the regions affected by the flood.

OUR FOOTPRINT
- International Medical Corps was the first international humanitarian organization in Libya after the 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 manage three EMT Type 1 Fixed facilities, strategically located in Derna and Sousa, complemented by four mobile units, so far reaching 6,065 people.
- Our team of MHPSS counselors and operators is currently providing remote services through the National Helpline. They so far have received and responded to 1,512 calls, ensuring crucial support for those in need.

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low moods, disrupted sleep patterns, heightened stress levels and increased anxiety, primarily stemming from the ongoing uncertainty surrounding recovery from this disaster.

**International Medical Corps Response**

**Health**

International Medical Corps has established seven Type 1 Emergency Medical Teams (EMTs), comprising three fixed locations and four mobile units. Two fixed EMTs operate in Dar Alsalam and Yousef Aborhil PHCs in Derna, while one is situated in the General Hospital of Sousa. Our health services have so far reached 6,065 people (3,559 women, 2,506 men) in the flooding-affected areas. On November 30, International Medical Corps donated crucial medical supplies—including syringes, gauzes, gloves, wound dressing items and personal protective equipment (PPE)—to the PHC we serve in Derna, addressing a significant shortage of essential items identified during assessing the facilities’ capacity.

One of the mobile teams, which offers services at the Shuhadaa Algoruf health facility in Derna, organized six health awareness sessions, covering topics such as influenza symptoms, preventive measures, the significance of a healthy diet, hypertension, personal hygiene and post-traumatic stress disorders. In Misrata, two of the mobile teams have provided health services to four health facilities since November 15, addressing conditions such as hypertension and upper respiratory-tract infections.

Our mobile medical team in Albayda City has been conducting rapid need assessments since November 26. After evaluating a PHC and a shelter accommodating 60 people from the Derna IDP community, we identified a severe shortage of health staff, especially medical doctors, along with deficits in medical supplies, equipment and vaccinations. This scarcity significantly impedes essential services that serve a population of about 10,000. Because IDP residents have voiced concerns about lacking basic healthcare, hygienic items and vaccinations, our health team is dedicated to promptly addressing these urgent health gaps.

**Mental Health and Psychosocial Support (MHPSS)**

International Medical Corps continues to support the national helpline with mental health counselors, who have handled 1,512 calls since the hotline’s launch, providing 185 MHPSS services, including psychological first aid (PFA), stress management, counselling, emotional support and psychoeducation. Approximately two-thirds of the callers were women, while one-third were men, and 60% of the callers were from directly affected areas, including Derna, Al Bayda, Benghazi, and Tobruk. The remaining callers consisted of IDPs located in Tripoli and its surrounding areas.

**Water, Sanitation and Hygiene (WASH)**

International Medical Corps will soon begin delivering 84,000 liters per day through water trucking to the Alsahil area in Derna. Additionally, International Medical Corps is gearing up to install two water bladder tanks that will supply drinkable water to two health facilities—Dar Alslam and Abo Rheel—with 12,000 and 70,000 liters per week, respectively.

In response to the prevalence of water-borne diseases in Derna, International Medical Corps has distributed 460 disinfection kits to affected people. International Medical Corps has also initiated hygiene promotion awareness campaigns, conducting 19 sessions that reached 198 people (24 women, 174 men). These sessions covered topics such as acute watery diarrhea causes and symptoms, prevention awareness, handwashing, safe water storage and water treatment. We also are in the final stage of the WASH assessment of seven health facilities—a crucial step in preparing for emergency repairs and maintenance of sanitation facilities’ infrastructure.

**Gender-Based Violence (GBV)**

International Medical Corps is commemorating the 16 days of Activism against Gender-Based Violence campaign, which runs from November 25 to December 10. In Benghazi, our team has conducted an awareness-raising activity to reach women and girls that centered around psychosocial well-being in the aftermath of the storm, with a particular emphasis on stress management and positive coping mechanisms. Session participants eagerly expressed their interest in upcoming activities, highlighting the significant demand for spaces where women can connect, share, learn and grow together. Our team also successfully onboarded two new staff members to our GBV prevention and response team in Derna who will initiate and oversee activities in close collaboration with health teams at designated health facilities, as well as local civil society organizations.