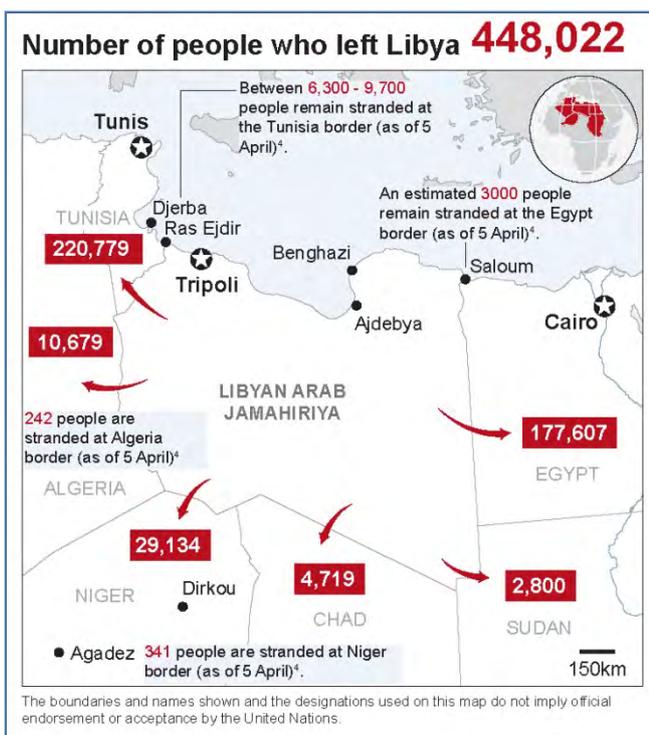


This report is produced by OCHA Libya in collaboration with humanitarian partners, covering the period of 3 to 5 April. The next report will be issued on or around 7 April.

I. HIGHLIGHTS/KEY PRIORITIES

- There remains a dire need for further access and humanitarian action in conflict-affected areas in northwestern Libya, and particularly in Misrata. Actions in the health sector and for the protection of civilians are needed urgently.
- The US\$ 310 million Flash Appeal for the Libyan Crisis is currently funded at 36.5 per cent with US\$ 113 million committed and US\$ 1.4 million in pledges.
- Between 13,200 and 13,600 people remain stranded at camps and transit points in Tunisia, Egypt, Niger and Algeria.

Situation Overview



As hostilities continue in Libya, the humanitarian situation in areas most affected by the conflict continues to deteriorate. While access to information is limited, the humanitarian community is extremely concerned about protection of civilians, including gender-based violence, landmines and human rights violations.

A number of injured people who boarded a Turkish medical aid ship in Misrata this week arrived today in Turkey where a number of injured passengers spoke to aid workers and media following treatment. Reports indicate that not all the injured on the boat were involved in the fighting. The humanitarian situation in Misrata in particular is dire.

Overall 219,038 third-country nationals have left camps and transit points with the help of governments, IOM, third parties or on their own. Currently between 13,200 and 13,600 people are stranded in camps and at transit points along the border with Libya. While aid agencies report that the majority of needs at these sites are being met, additional support is needed for the repatriation of third-country nationals who are stranded. IOM

requires an additional US\$ 160 million to support repatriation of third-country nationals who have fled Libya since the fighting began over five weeks ago.

I. Humanitarian Needs and Response

EMERGENCY SHELTER/MIGRATION/POPULATION MOVEMENTS

Needs and Response:

Libya: The number of people who have left Libya is 448,022 to date. Increasing reports of internal displacement inside Libya are of great concern to the humanitarian community. The UNHCR Libya team in Cairo was able to contact refugees and asylum-seekers in Tripoli and Nalut, as well as the Roman Catholic Church in Tripoli. Representatives of the church reported that many refugees and migrants ask for food and financial assistance to cover their trip to Tunisia and eventually to Italy. The church has provided financial assistance to 200 Eritreans and 150 Ethiopians.

Aid agencies report that hostilities in Ajdabiya have ceased and that no fighting has been reported west of the city for several days. Although residents of Ajdabiya have been reported to have fled the city at two separate occasions in the past month, there was a return once fighting had subsided. It is likely that displaced populations will continue to return now that the security situation has improved.

Tunisia:

According to the latest IOM report, more than 215,007 people have crossed into Tunisia from Libya. The inflow of people into Tunisia remains static, with 3,000 to 4,000 per month crossing, of which 1,000 to 2,000 are Libyan nationals. Chadian and Sudanese nationals remain the largest populations stranded at the two camps, which currently include 2,922 nationals from Chad and 2,407 from Sudan requiring evacuation assistance. In all 9,000 - 9,400 people are stranded at the Choucha and UAE Red Cross Camps on the border with Libya.

UNHCR reports an increasing number of Libyans have been reported at border crossings in addition to several boat loads arriving with family members in Tunisia.

Egypt:

There are around 3,500 people currently stranded at the transit point in Saloum, Egypt. Provision of services continues and monitoring of protection issues is being carried out by humanitarian actors in coordination with the local Egyptian authorities. Working groups for Food, WASH and health have formed, for which meetings are held each week in addition to coordination meetings. IOM has assisted more 17,000 third country nationals who have crossed the border into Egypt to return to their country of origin by land, sea and air.

Gaps & Constraints:

Egyptian authorities have agreed to put up six rub halls at the Saloum transit point, as well as install additional latrines and a generator. Six halls are sufficient to provide temporary shelter for 1,200 people though additional space needs to be made to accommodate all 3,500 people currently stranded.

**FOOD SECURITY**

Food sector NGOs are reporting that food prices remain static in the eastern part of Libya, though prices have risen for “non-essential” food items like yogurt. A joint UNICEF/WFP assessment has been completed in collaboration with local authorities on food security and returnees in Egypt. Results will be shared shortly.

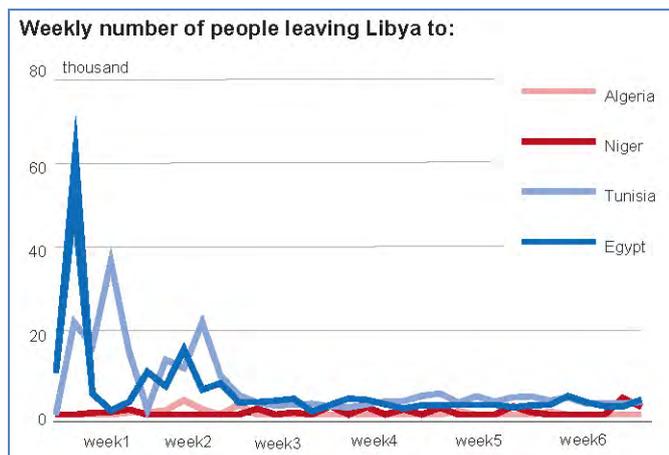
The NGO Libyan Appeal Team are initiating livelihoods projects in Benghazi and in the eastern region of Libya, the objective of which is to support food security in the area by promoting animal husbandry and supporting a local pasta factory. They are conducting a food assessment in Libya next week and will share the results soon thereafter. A number of food sector aid partners including CESVI, Islamic Relief and Catholic Relief Services continue to provide food to populations in camps and transit points on a daily basis.

Gaps & Constraints:

WFP and other aid groups working in the food sector express concern regarding food security in Libya.

**HEALTH**

International Medical Corps (IMC) is responding to medical needs in Libya, through the delivery of essential medicines and supplies and with continued assessments. IMC has been working in areas directly and indirectly affected by the conflict for several weeks. In western Libya IMC has now supplied needed medical supplies to two western Libyan hospitals while mechanisms to provide medical care for casualties of fighting in Misrata are under evaluation. IMC attempted today tried to reach Brega, a city where fighting has been



reportedly heavy for weeks, but had to turn back due to security concerns. Electricity and water supplies have been cut off in Brega and food shortages are likely within the town. To prepare for a possible outflow of people fleeing east from Brega, IMC plans to pre-position medical supplies, non-food items and food.

At the Ajdabiya Hospital, six to eight casualties per day continue to be received. As there are only a handful of nurses, the only admissions are critical patients in the intensive care unit, of which eventual transfer to Benghazi is sought. One of the seven casualties received on Saturday required leg amputation. The hospital is receiving a large influx of medication donations from

various organizations and improved stock management of these supplies is needed. The delivery of health

kits for the benefit of 60,000 persons in Benghazi is ongoing through IMC and hygiene kits covering the needs of another 15,000 persons are being distributed over the next few days.

In Tunisia, authorities report that health conditions at the border and in the camps remain stable, though several cases of scabies have been reported. WHO have provided Ivermectine single-dose treatment to treat scabies and are shipping additional doses soon. No disease outbreak has been reported at either camp. WHO is deploying an epidemiologist to provide additional support in this regard.

Egyptian authorities report that 281 injured people were among the 174,176 people who crossed the border from Libya into Egypt in the past five weeks. Of the injured, 79 showed improvement and were discharged, 29 were discharged upon their request, 169 were referred to hospitals in Alexandria and Marsa Matrouh and 5 died. The total number of deaths at the border is 22. Just over one third of all deaths were due to traffic-related accidents.

WHO and partners continue to operate emergency health and mobile clinics at the Egypt-Libya border where over 13,382 patients have been treated for injuries and illness. WHO is offering individual breast-feeding counseling sessions to mothers at the Egyptian border. A WHO focal point representing the health sector will travel to Benghazi as part of a UN inter-agency needs assessment mission this week.

Gaps & Constraints:

The Libyan Red Crescent has called for an assessment of needs and required support for damaged health facilities in Libya. The medical sector has been negatively impacted by the crisis.

PROTECTION

In Tunisia about one quarter of the camp population, or 2,708 people, are classified as people of concern by UNHCR, including Somalis, Iraqis, Palestinians and Libyans. UNHCR reports that so far 250 – 300 Somalis have left the camp to return to Libya since 2 April Gender-based violence (GBV) prevention continues in Choucha Camp. The Tunisian Ministry of Women's Affairs has agreed to identify and manage a safe house for victims of GBV from Choucha Camp.

In Egypt UNHCR reports 323 at Saloum transit point, or around ten per cent of the population, are considered people of concern by UNHCR.

Gaps & Constraints:

The ongoing conflict inside Libya is resulting in large areas contaminated with landmines inside Libya. Although the presence of landmines is not new in Libya, these are new mines reportedly laid by Qaddafi forces. There are reports that Libyans are removing landmines by hand and that 40 anti-tank and 26 anti-personnel mines have been removed near Ajdaibya. Unexploded ordnance (UXOs) pose a greater problem as do abandoned weapons and like landmines, require specialised equipment and personnel for safe removal.

There is a need for community-based communication campaigns to appropriately sensitize populations on the dangers of landmines, unexploded ordnance and abandoned weapons. There is also a need to conduct assessments, including recording and documenting of these new mines.

There is no effective coordination for reporting, recording and documenting identified landmine and UXO hazards within the country due to the security situation in Libya. Moreover there is a lack of available capacity to effectively mitigate this threat. As soon as the situation allows it will be critically important to ensure a rapid and effective explosive ordnance disposal (EOD) response that is both able to quickly clear those sites noted and able to respond to any as yet unknown hazard areas.

WATER AND SANITATION (WASH)

WASH activities continue at the two camps in Tunisia and at the transit point in Egypt. IMC reports continued delivery of potable water to medical facilities inside Libya. In Saloum UNICEF continue trucking 100,000 liters of water for sanitation purposes, while discussion is under way looking for sustainable system of water provision, mainly with regard to the upcoming hot season.

LOGISTICS

Benghazi port is fully operational and all necessary facilities are available for receiving relief cargo. Benghazi airport authorities have reported that the airport is also fully operational. The civilian radar is in working order and storage and handling facilities are available. WFP is preparing to deliver relief items from Egypt to Benghazi for International Medical Corps (IMC) and International Relief & Development (IRD), on a cost recovery basis. WFP continues to provide storage free of charge at its Benghazi warehouse. Both

UNHCR and UNICEF are utilizing this service. WFP has circulated to humanitarian organisations an update on the functionality of Benghazi port and airport, an overview of ports in Tunisia and an update on the current status of telecommunications in Libya, Tunisia and Egypt.

II. Coordination

OCHA is in the process of communicating with Arab organizations in order to enhance reporting on assistance provided by these organizations. Among others, humanitarian agencies in the Arab Gulf are being approached.

The meeting schedule in Cairo includes the following:

Sector/Cluster	Time	Venue	Contact Person
Humanitarian Country Team	Mondays, 15:00	Rotating	Mike McDonagh Head of Office OCHA Libya + 20 (0)15 11441923 mcdonaghm@un.org Marina Throne-Holst (alternate) OCHA Libya + 20 (0)15 1760 1647 throne-holst@un.org
Food Security	Tuesdays, 11:00	WFP Office, Maadi	Asif Niazi (Primary focal point) Food Security – WFP asif.niazi@wfp.org +20 (0)12 234 8773 Anne-Claire Mouilliez (alternate) Food Security WFP +20 (0)15 1760 1397 anne-claire.mouilliez@wfp.org
Logistics	Wednesdays, 18:00	Sofitel Maadi	Matthew Dee Logistics WFP +20 (0)15 1760 1347 matthew.dee@wfp.org
Health	Thursdays, 13:00	WHO, Nasr City	Osama Ali Maher Emergency Preparedness and Humanitarian Action WHO/EMRO + 20 (0)2 227 65285 mahero@emro.who.int
NGO Coordination	Sundays, 10:00	Rotating	Imogen Parsons Libya Response Team Leader Save the Children (UK) +20 (0)10 997 3023 i.parsons@savethechildren.org.uk Jamie Balfour Paul Oxfam +20 (0)12 068 2193 Jbalfour-paul@oxfam.org.uk

In Saloum, inter-agency coordination meetings are convened on Sunday, Tuesday and Thursday at 11:30. Other meetings are as follows:

- Protection: Saturday and Tuesday at 01:30 (13h30)
- WASH: Wednesday at 11:30 (11h30)
- Health: Thursday at 02:00 (14h00)

Health sector partners meet weekly on Mondays in Benghazi.

For more information on the humanitarian response to the Libyan crisis the following website is being maintained:

<http://libya.humanitarianresponse.info/>

V. Funding

The US\$ 310 million Flash Appeal for the Libyan Crisis is currently funded at 36.5 per cent with US\$ 113 million committed and US\$ 1.4 million in pledges.

All humanitarian partners, including donors and recipient agencies, are encouraged to inform OCHA's Financial Tracking Service (FTS - <http://fts.unocha.org>) of cash and in-kind contributions by e-mailing: fts@un.org.

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