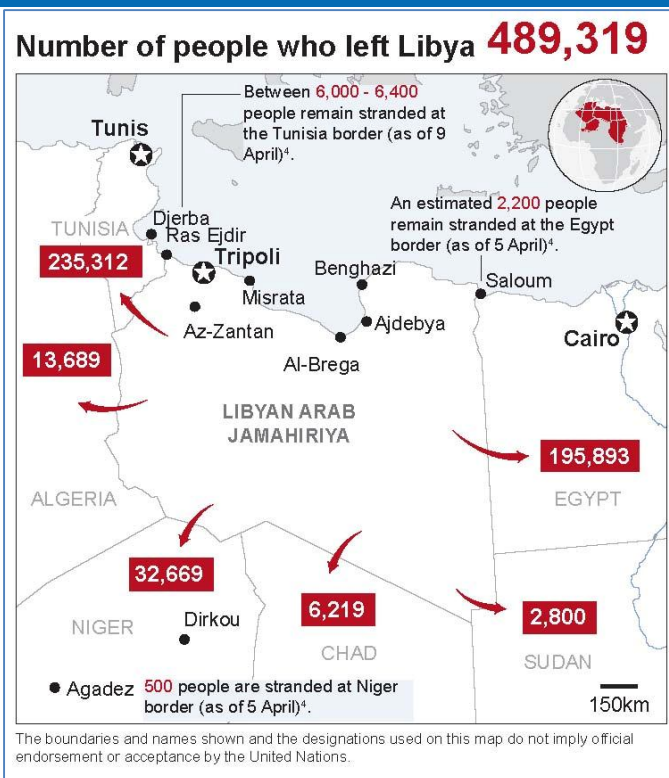


*This report is produced by OCHA Libya in collaboration with humanitarian partners, covering the period of 8 to 10 April. The next report will be issued on or around 12 April.*

## I. HIGHLIGHTS/KEY PRIORITIES

- Protection of civilians remains of grave concern as violence in Misrata continues and hostilities in Ajdabiya resumed during the reporting period.
- Serious water shortages have reportedly been affecting Misrata for over five weeks. Untreated well water is being used in households and health facilities.
- More Libyans are crossing into Egypt and Tunisia as fighting continues and the frontline shifts. Humanitarian actors continue to respond to needs of people stranded at transit points and camps.
- The International Committee of the Red Cross delivered a shipment of emergency medical supplies and food to Misrata on 8 April by boat.
- The US\$ 310 million Flash Appeal for the Libyan Crisis is currently funded at 39 per cent with US\$ 120 million committed and 1.4 million in pledges.

## II. Situation Overview



Continued violence in Misrata and renewed hostilities in Ajdabiya during the reporting period posed risks to the lives of women, children and other civilians as the crisis in Libya continues for a seventh week. In Misrata, humanitarian actors have been able to evacuate the wounded and deliver medical supplies, food, and non-food items (NFIs) during this reporting period. The World Food Programme (WFP)-chartered ship completed the delivery of all the aid aboard on 8 April. On 9 April an International Committee of the Red Cross (ICRC) ship docked in Misrata, delivering enough emergency medical supplies for 300 people.

Despite the delivery of aid, sustained fighting continues to result in shortages of essential supplies, electricity and water. OCHA received reports from Misrata that there are water shortages and local communities are relying on untreated well water for use in households and health facilities.

A further problem affecting the medical sector concerns personnel. Foreign doctors and nurses who are stranded inside Libya wish to leave but

are currently unable to due to the fighting. Many have continued working and report high levels of exhaustion. A large proportion has said they will leave once they get the opportunity, resulting in an even greater gap in medical personnel.

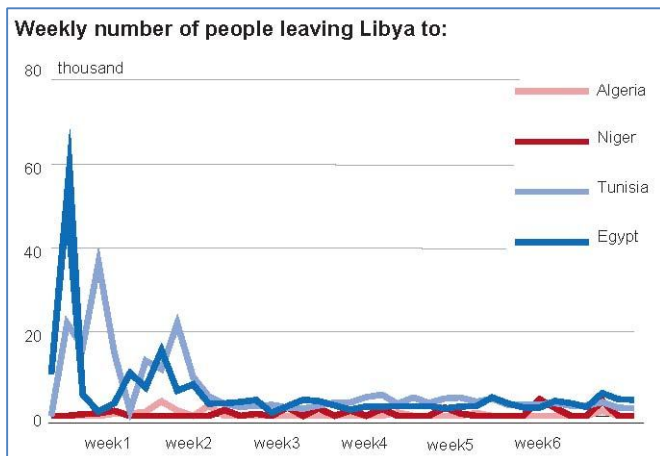
The United Nations Secretary-General Ban Ki-moon called for an immediate cessation of the indiscriminate use of military force against the civilian population and to ensure full access for humanitarian assistance. However, fighting has continued. The African Union will, through a group of African leaders, visit the country this weekend to meet with government officials in Tripoli and conduct talks with the Transitional National Council in Benghazi.

To date, the International Organization for Migration (IOM) and United Nations High Commissioner for Refugees (UNHCR) report that more than 489,000 people have left Libya, the majority crossing into either Tunisia or Egypt. The latest figures report between 11,681 and 12,081 people stranded at camps and transit points in Tunisia, Egypt, Niger and Algeria.

### III. Humanitarian Needs and Response



#### EMERGENCY SHELTER/MIGRATION/POPULATION MOVEMENTS



#### Libya:

Reports of internal displacement and multiple displacements continue. As hostilities take place in Ajdabiya again, so too do reports of the population of that town fleeing the fighting. With the arrival of 1,200 families of internally displaced persons (IDPs) from Ajdabiya to Tubruq on 7 April, resources will continue to be spread thin. According to UNHCR, needs in Tubruq include electricity and water supplies, specialized doctors, and prices of some essential items are on the rise. Most IDPs are staying with host families whereas a few reside in schools and community centres. UNHCR has provided 1,000 blankets to the Libyan Red Crescent for distribution for these IDPs. On 8 April

UNHCR dispatched from Saloum, at the border with Egypt, plastic sheeting, kitchen sets and sleeping mats in anticipation of additional IDP families arriving to Tubruq. International Medical Corps (IMC) continues to monitor the IDP settlement in Albethnan for the third week, distributing UNICEF hygiene kits to IDPs on 9 April. In Benghazi and Tubruq the ICRC continues to monitor protection issues as well as distribute aid to hospitals, distribute food and visit Libyan government soldiers captured during the conflict.

There is less information known about displacement in the western parts of Libya, though according to statistics from the Tunisian border, more Libyans are crossing into to Tunisia on a daily basis. Assessments on humanitarian needs are slowly clarifying the overall situation in western Libya. The ICRC has conducted an assessment which indicates that medical care is most needed in Misrata and Zawiyah, though they report that food security may be an issue in some places. A team composed of two ICRC delegates and three staff members from the Libyan Red Crescent based in Tripoli conducted an assessment focused on health care in Zawiyah. ICRC has been in the western part of Libya for a week and has established a presence in Tripoli.

#### Tunisia:

IOM estimates that as of 9 April, over 235,300 people have crossed into Tunisia, the majority of which were third-country nationals; this number excludes Libyans and Tunisians. This trend may be changing however, as the vast majority of those crossing the border in the reporting period were Libyans. 1,933 people crossed on 8 April -- 78 per cent of whom were Libyan nationals. It remains unclear whether those crossing are doing so to stay long-term, to flee the hostilities, or whether they are crossing to obtain supplies such as fuel, which has grown scarce in Libya. According to new arrivals in Choucha Camp, there have been fewer check-points on the road between Tripoli and Ras Adir, Tunisia in the past week, the lack of which is conducive to a less complicated passage into Tunisia. Between 6,000 and 6,400 people remained stranded at the two camps, down from between 8,800 and 9,300 in the previous reporting period. On 9 April, 1,490 people from Sudan, Chad, Mali and Egypt, were evacuated through charter flights. UNICEF estimates that as of 8 April, 822 families, including 871 children, remain at camps near Ras Ejdir. The trend of an increased number of families crossing into Tunisia continues. The majority of these families are composed of Sudanese, Somali and Chadian nationals.

UNICEF reports a settlement of 70 Libyan families including 58 children in Dehiba, south of Ras Ejdir. The camp is run by a youth centre, the Tunisian military and the Tunisian Red Crescent. According to UNICEF, these families originate from towns in western Libya and there are a few dozen other families are expected to arrive soon. The youth centre provided shelter, water and cooked meals for each family, however there is still a need for more food, tents, medicine, baby milk, toilets, water points, fuel, cooking gas and hygiene kits. There are no signs of malnutrition or problems linked to hygiene or malnutrition.

#### Egypt:

The number and proportion of Libyans crossing into Egypt remains higher during this reporting period than in the past. The statistics on Libyans arriving and departing at Saloum and Marsa Matrouh will continue to be monitored in collaboration with UNHCR and Libyan Port authorities.

Evacuations of third-country nationals continue while the overall number of people at the Saloum border decreases; 914 people were evacuated on 9 April, following which 2,223 remain at the transit camp. Another 914 people are scheduled to be evacuated on 10 April. Humanitarian partners continue to distribute blankets and plastic sheeting, food and provide health and psychosocial care to those stranded.

**Other countries:** An increase of migrants reaching the shores of Italy and Malta has been cause for concern in the past reporting period. For those departing Libya to the south, IOM has set up new transit centres in Chad and in Niger.

#### Gaps & Constraints:

Problems with telecommunications have inhibited humanitarian actors from obtaining information on the humanitarian situation.



#### FOOD SECURITY

Humanitarian organizations continue delivering food assistance inside Libya. On 7 April, a WFP-chartered boat carrying enough food assistance for 40,000 people for one month docked in Misrata. The WFP is reviewing means to provide further humanitarian assistance to other areas in western Libya, while facilitating humanitarian cargo movements from Egypt into Libya.

At the Libyan borders with Tunisia and Egypt, humanitarian organizations continue providing food assistance to thousands of people in transit camps. Over 211,900 hot meals were provided in March at Choucha Camp and the airport, and another 125,433 meals have been provided since the beginning of April. At the Egyptian border, WFP distributed 9,100 cooked meals and 200 cartons of fortified date bars for people at the Saloum crossing point in the past three days. Since 24 March, WFP has distributed 29,564 meals and 1,442 cartons of date bars at the Saloum border, benefitting a total of 44,825 people. Mohammed Bin Rashid Al Maktoum Humanitarian Charity and Dubai Islamic Humanitarian Foundation in cooperation with United Arab Emirates Embassy in Cairo have delivered 561 tons food to Libya so far. Egyptian Red Crescent Society distributed food at Saloum. WFP and Catholic Relief Services continue to support breakfast and lunch meals including date bars.

#### Gaps & Constraints:

The security situation inside Libya continues to limit the ability of humanitarian organizations to deliver needed humanitarian assistance to the affected people. The improvement in analysis and reporting of the number of people at the transit point in the Saloum border is crucial to ensure accurate number for food distribution.



#### HEALTH

The international and humanitarian community has delivered medical supplies and provided personnel to respond to needs in Libya in the past reporting period, although emergency medical supplies, medical personnel and potable water for health facilities are still needed. Needs are greatest in areas where hostilities have been sustained.

The WFP-chartered ship docked in Misrata on 7 April and continued distributions the following day. WHO provided 10 each of surgical kits, trauma kits and health kits, to Al Hekma Medical Centre in East Misrata. WHO is also coordinating with Arab Medical Union (AMU) doctors in Misrata who have received drugs and surgical implants from stock that was pre-positioned in Benghazi and Tubruq.

At the Egyptian border approximately 600 medical consultations were made at border clinics on 9 April, of which 84 people were diagnosed with acute respiratory infections. No outbreak of communicable disease has been reported. WHO and the Egyptian Ministry of Health have positioned a mobile clinic with one obstetrician and one gynecologist at the border. WHO has completed refurbishment of the quarantine building, an emergency clinic and ambulance clinic at the border. A joint public health risk assessment with the Ministry of Health is ongoing to determine the threat of water-borne disease and Tuberculosis outbreaks.

WHO provided one basic medical kit which provides coverage for 1,000 people for up to three months to Remada in Tunisia. A joint Ministry of Public Health, WHO and UNICEF mission is assessing the situation at Remada Gate on 10 April. The results of the assessment will be shared soon.

The government of Turkey continues to provide assistance to civilians in Libya. Last week by food, a field hospital and medical staff were flown in to Benghazi after which the planes evacuated a number of injured

people to Turkey for medical treatment. Turkey plans to deliver further assistance in the coming days with 12 cargo planes from the Turkish Air Force slated to deliver aid to Benghazi from 1 to 17 April. A privately owned aircraft is currently at the airport in Benghazi and plans to carry out an evacuation soon. The Turkish Red Crescent, which has plans to send an aid ship to Benghazi in the coming days, also has a team active in the same city.

With UNICEF support, the Tunisian Ministry of Health will conduct weekly (Tuesdays) vaccination visits for children and pregnant women in four camps. For measles, all unvaccinated children from 9 months to 14 years old will be vaccinated at the camps. UNICEF also continues to work on psychosocial support for children, detecting and treating children suffering from stress and psychological trauma. Six disabled children have been provided with orientation and critical psychosocial support.

#### **Gaps & Constraints:**

Foreign doctors and nurses, many from Eastern Europe, wish to leave Libya but are currently unable to due to the fighting. A large proportion however has said they will leave once they get the opportunity, the result which will leave a greater gap in medical personnel in Libya. Stocks of chronic medicines, vaccines and infant formula are reportedly depleted. In Misrata additional ambulances are needed after three of twelve of the main hospital's ambulances were destroyed in the fighting.

#### **PROTECTION**

Protection of civilians, especially in areas where fighting is taking place, and protection of children continues to be a principal focus of the humanitarian community as the crisis in Libya wages on. Media reports continue to indicate increasing civilian casualties without any indication that the hostilities will subside. Although the United Nations Secretary-General has called for an immediate cessation of the indiscriminate use of military force against the civilian population, fighting continues. On 9 April in Ajdabiya shelling with heavy artillery was reported, leading to civilian casualties.

UNHCR reports that sub-Saharan Africans who are stranded inside Libya are particularly at risk as they are mistaken as foreign mercenaries. Many are attempting to escape the country by boat or using dangerous land routes. UNHCR recognized 8,000 refugees inside Libya and a further 3,000 asylum-seekers and believes there are many more who are yet unaccounted for.

Landmines, unexploded ordnances, and remnants of war continue to pose a serious threat to civilians, especially to children. UNICEF will collaborate with Handicap International in an emergency mine risk education project to provide information and safety messages to at-risk populations through mass media, outreach and printed materials.

#### **WATER AND SANITATION (WASH)**

WASH activities at transit points and camps at the borders with Tunisia and Egypt continue. Basic humanitarian needs are largely met, although aid organisations report that more WASH facilities are needed. Efforts to upgrade provision of potable water and waste management are ongoing.

At Ras Ejdir, UNICEF and the Tunisian Ministry of Health continue supporting sanitation activities such as sanitation of WASH facilities.

The WASH sector will begin replacing emergency sanitary facilities with a more durable solution as requested by the Camp Coordination and Management Group who anticipates that Choucha camp will shift from a transit camp for migrants to a community camp as certain nationalities such as Somalis and Eritreans cannot return home. In another camp with 50 Libyan families in Dehiba, Tunisia there are two latrines/showers cabins for women and another one for men though more facilities at this camp are still needed.

UNICEF continues delivering 100,000 litres of water per day for sanitation for people stranded at the border. All 80 toilets remain fully functional, with two portable toilet caravans dedicated to women and children. WHO and UNICEF have increased the dosage of chlorine to the drinking water at the border to reduce the risk of water-borne diseases, especially with the limited amount of safe drinking water at the crossing area.

#### **Gaps & Constraints:**

At the Egyptian border, though needs are being met, the upcoming hot season is expected to increase challenges. Adequate planning and preparation in this regard is ongoing.

Assessments are required to determine further needs inside Libya, especially in Misrata and other areas where municipal water systems are reportedly not functioning. IMC has reported the need for potable water at medical facilities in the west of Libya in Az Zantan and Nalut. An increase in water supply and construction of latrines and showers at transit points at the Libyan borders with Tunisia and Egypt are needed.

## LOGISTICS

On 9 April an ICRC ship delivered enough surgical supplies to treat 300 wounded and high protein biscuits to Misrata. A WFP-chartered vessel carrying food, medical supplies, two doctors and psychosocial materials for children, docked in Misrata on 7 April and finished unloading all supplies the next evening. To date, the WFP, WHO, Médecins sans Frontières, the Government of Turkey and the ICRC have sent vessels to deliver aid and/or evacuate people in need. Humanitarian aid has also been delivered aboard fishing boats and other vessels to Misrata, Benghazi and Tubruq. The Government of Turkey plans to deliver aid to Benghazi by air over the coming weeks.

The Organization of Islamic Conference and the Health and Humanitarian Aid Department of the Arab League in cooperation with Egyptian Red Crescent Society organized three trucks of relief supplies and medical supplies to Libyan Red Crescent Society.

WFP has sent a logistics officer to Malta to assess the situation of Libya-bound cargo there and to liaise with partners on the ground on logistics and deliveries. WFP has circulated to humanitarian organizations an overview of customs procedures for Egypt and Tunisia.

## Gaps & Constraints

Nothing significant to report.

## IV. Coordination

A coordination meeting has been scheduled in Benghazi at 10h30 on Sunday, 10 April. In Benghazi, health sector partners meet weekly on Monday.

The Humanitarian Coordinator has requested activation of the cluster approach for seven clusters (Health, Water, Sanitation and Hygiene, Protection, Food Security, Shelter and Non-Food Items, Logistics, and Telecommunications).

The meeting schedule in Cairo includes the following:

Meeting	Time	Venue	Contact Person
Humanitarian Team	Country Mondays, 15:00	Rotating	Mike McDonagh Head of Office OCHA Libya + 20 (0)15 11441923 <a href="mailto:mcdonaghm@un.org">mcdonaghm@un.org</a> Talin Sahakian (alternate) OCHA Libya + 20 (0)15 1760 1648 <a href="mailto:Sahakian@un.org">Sahakian@un.org</a>
Food Security	Tuesdays, 11:00	WFP Office, Maadi	Asif Niazi (Primary focal point) Food Security – WFP <a href="mailto:asif.niazi@wfp.org">asif.niazi@wfp.org</a> +20 (0)12 234 8773 Anne-Claire Mouilliez (alternate) Food Security WFP +20 (0)15 1760 1397 <a href="mailto:anne-claire.mouilliez@wfp.org">anne-claire.mouilliez@wfp.org</a>
Logistics	Wednesdays, 18:00	Sofitel Maadi	Matthew Dee Logistics WFP +20 (0)15 1760 1347 <a href="mailto:matthew.dee@wfp.org">matthew.dee@wfp.org</a>
Health	Thursdays, 13:00	WHO, Nasr City	Osama Ali Maher Emergency Preparedness /Humanitarian Action WHO/EMRO + 20 (0)2 227 65285 <a href="mailto:mahero@emro.who.int">mahero@emro.who.int</a>
OCHA/NGO	Thursdays, 9:00	OCHA Regional Office, Maadi	TBD

NGO Coordination	Sundays, 10:00	Rotating	Imogen Parsons Libya Response Team Leader Save the Children +20 (0)10 997 3023 <a href="mailto:i.parsons@savethechildren.org.uk">i.parsons@savethechildren.org.uk</a> Jamie Balfour Paul Oxfam +20 (0)12 068 2193 <a href="mailto:Jbalfour-paul@oxfam.org.uk">Jbalfour-paul@oxfam.org.uk</a>
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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 01:30PM

WASH: Wednesday at 11:30AM

Health: Thursday at 02:00PM

For more information on the humanitarian response to the Libyan crisis:  
<http://libya.humanitarianresponse.info/>

## V. Funding

According to the Financial Tracking Services, the US\$ 310 million Flash Appeal for the Libyan Crisis is currently funded at 39 per cent with US\$ 120 million committed and 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](mailto:fts@un.org).

## VI. Contact

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