

# LIBYA

## Health Response to COVID-19

WHO update # 28. Reporting period: 1-30 June 2021



**1,142,619**

Cumulative samples tested

**193,905**

Cumulative confirmed cases

**3,198**

Cumulative deaths

**178,621**

Cumulative recovered cases

**93,232**

Samples tested this month

**7,833**

Confirmed cases this month

**71**

Deaths this month

**6,504**

Recovered cases this month

## HIGHLIGHTS

- In June 2021, the number of monthly COVID-19 deaths dropped to 71, the lowest rate of any month in 2021. Almost all (97.5%, or 90 877) national tests were performed in the west, with the east and south accounting for only 1154 and 1201 tests, respectively.
- Although an average of 94 000 laboratory tests per month have been performed over the past four months, case numbers have been declining since March 2021. The decrease in confirmed cases may be due to more healthy people (e.g., travellers) getting tested, the non-inclusion of people diagnosed by antigen-based rapid diagnostic tests (Ag-RDTs), the non-inclusion of people diagnosed through CT scans, and fewer tests performed on suspected cases as per case definitions.
- 100 000 doses of Sputnik V "Light" vaccine and 54 990 doses of COVAX Pfizer vaccine arrived in Libya on 15 and 24 June 2021, respectively.
- A total of 899 112 people of whom 3311 are foreign nationals have registered for vaccination. Vaccination for migrants and refugees has not started yet.
- The Ministry of Health (MoH) has stressed that health facilities that receive external assistance from UN agencies and international NGOs must inform the MoH accordingly and must ensure that any supplies received from external parties have at least two thirds of their shelf life remaining.
- WHO is monitoring a worrying increase in the number of cases of COVID-19 in Ashshwayrif (Jabal al Akhdar district in the west) and Murzuk (in the south). WHO has assessed the barriers to accessing COVID-19 health care services and is providing support accordingly.

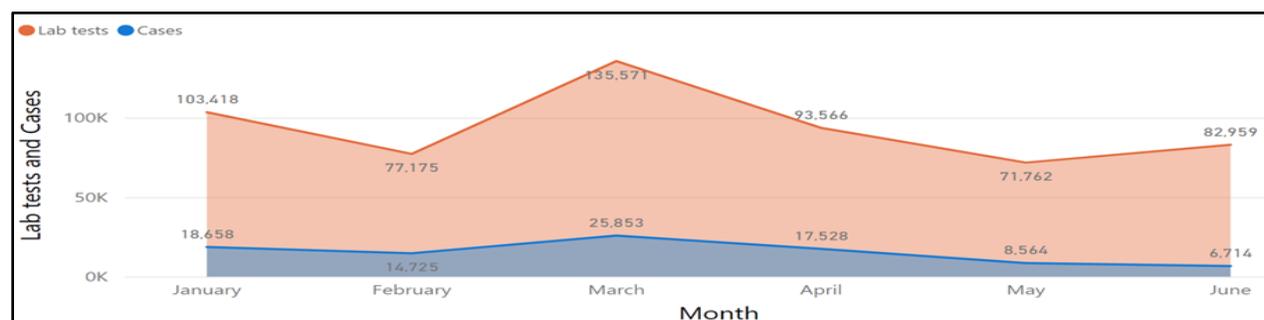


Figure: Number of COVID-19 laboratory tests performed vs confirmed positive cases per epi-month 2021 calendars—source: NCDC data team.

## EPIDEMIOLOGICAL HIGHLIGHTS

- Libya remains classified under community transmission with the circulation of Alpha and Beta variants of concern (VOC).
- 28 COVID-19 labs (out of 32) reported that 93 232 new laboratory tests were performed in June. Of the total number of 1 142 619 tests performed in Libya since the beginning of the response, 193 905 (17%) were confirmed positive for SARS-CoV-2 (COVID-19).
- Compared with May, there was a 30% increase in overall national testing in June: a 34% and 30% increase in the west and south, respectively, and a 61% decrease in the east.
- The national positivity rate for June remained at 8.4%, which mainly reflects the situation in the west with a positivity rate of 7.8%. It cannot be generalized based on a much higher positivity rate in the east (30.6%) and south (29.5%).
- The overall number of new cases reported in June shows a 9% decrease compared with the previous month, with the west reporting a 4% decrease in new patients. The east reported a 65% decrease and the south reported a 188% increase in the number of cases. No COVID-19 laboratories reported any shortages of tests or reagents.
- In June, the number of new deaths (71) decreased by 28% compared with the previous month (a 45% decrease in the west, a 31% increase in the east and a 29% increase in the south). The mortality rate remained at 1.04 deaths per 100 000 cases, with a case fatality rate of 1%.

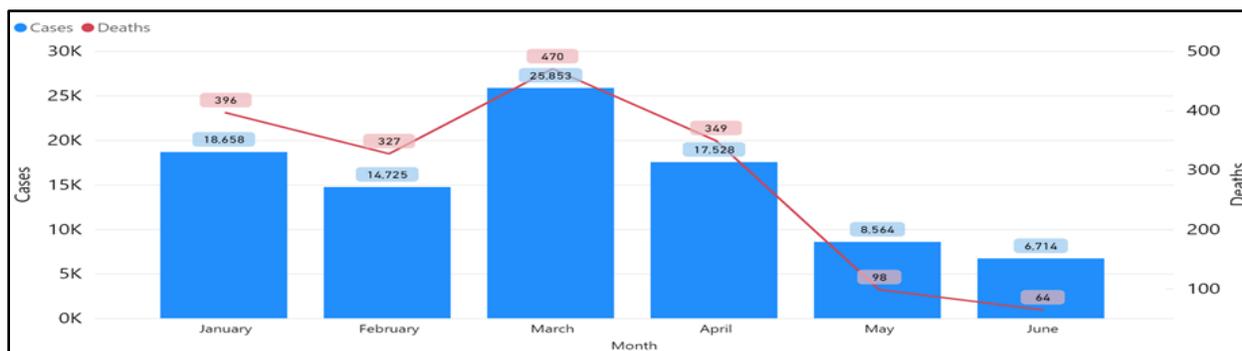


Figure: Histogram showing COVID-19 cases and deaths for epi month June 2021 compared with previous months. Source: NCDC data team

## WHO LIBYA RESPONSE TO COVID-19

The WHO country office (WCO) works daily with the national health authorities to support strategic planning, provide technical advice, issue daily epidemiological bulletins, strengthen disease surveillance, train health care staff, assess health needs, and provide medicines, equipment, and laboratory supplies to keep essential health care services running. WHO also acts as the COVID-19 focal point/technical adviser for the UN in Libya and briefs the international diplomatic corps on the status of COVID-19 and the main needs, obstacles, and gaps.

As the lead agency of the health sector in Libya, WHO identifies gaps in the response and helps to fill them. It highlights serious health issues and works across the political divide to resolve them.

At the global level, the WCO works on Libya's behalf with other international mechanisms set up by WHO and partners to tackle the pandemic. These include the COVID-19 Supply Chain System (to obtain COVID-19 supplies for Libya at the best possible price), the Access to COVID-19 Tools (ACT) Accelerator (which aims to speed up the development and production of COVID-19 tests, treatments, and vaccines, and ensure their equitable access) and the COVAX Facility (which aims to ensure that all people everywhere have access to COVID-19 vaccines once they become available). The COVAX Facility is one of the four pillars of the ACT Accelerator.

For all the above issues, WHO closely with the following entities in Libya:

- Ministry of Health (MoH)
- National Centre for Disease Control (NCDC)
- National Immunization Technical Advisory Group (NITAG)
- COVID-19 National Coordination Committee (NCC)
- COVID-19 Scientific Advisory Committee

Libya's COVID-19 response is organized around the 10 pillars of its national preparedness and response plan.

## KEY PRIORITIES & RESPONSE ACTIVITIES

### Pillar 1: Coordination, planning, financing and monitoring



- WHO continued to disseminate daily, weekly, bi-weekly and monthly COVID-19 epidemiological and operational updates and assessments.
- From 6 to 9 June 2021, with support from colleagues in EMRO, WHO conducted an online training course on the data management and M&E toolkit developed by EMRO. The toolkit aims to strengthen IHR data sharing, monitoring and evaluation, data analysis and interpretation for relevant policymaking for countries in the Eastern Mediterranean. The kit comprises five modules: an overview of IHR; an M&E plan and framework; guidance on adapting indicators to local contexts; data management; and information management. A total of 46 participants, including NCDC data managers and surveillance officers, attended the training.
- WHO carried out a rapid needs assessment in Ashshwayrif municipality (Jabal al Akhdar district) following an increase in the number of cases of COVID-19. WHO deployed an emergency mobile team to support Ashshwayrif PHC centre.

### Pillar 2: Risk communication, community engagement and infodemic management



WHO:

- Conducted a one-day workshop for communications professionals and journalists in Benghazi attended by 30 participants. The workshop focused on COVID-19 preventive measures, vaccine awareness, addressing misinformation and dispelling rumours. Key messages to combat rumours were shared with participants:
  - <https://www.facebook.com/1219299178081299/posts/4386557138022138/?d=n>
  - <https://twitter.com/wholibya/status/1405280580124565504?s=21>
- Designed a COVID-19 daily situation report and disseminated it on WHO social media platforms:
  - <https://www.facebook.com/WHOLIBYA/photos/a.1612715055406374/4381090395235479>
  - <https://twitter.com/WHOLIBYA/status/1404542244552589314>
- Developed COVID-19 health promotion messages and posted them on the WCO's social media platforms (in Arabic and English) about WHO COVID-19 activities (available at <https://twitter.com/WHOLIBYA> and <https://www.facebook.com/WHOLIBYA/>).

### Pillar 3: Surveillance, epidemiological investigation, contact tracing and adjustment of public health and social measures (PHSM)



WHO:

- In coordination with the NCDC, conducted a two-day training session for 60 RRTs in the south on case definition, contact tracing, sample collection, risk communication and IPC.

- Conducted a one-day training session for 30 RRT team leaders and data managers on new data collection and management modules. Two members from each of the 14 municipalities in the south attended this training.
- Organized field visits and interviews for a WHO team from EMRO's health information and risk assessment unit. The team will be in Libya from 19 June to 2 July 2021 to visit health facilities and interview NCDC counterparts. The outcome of the mission will be a set of recommendations to strengthen the national surveillance system and laboratory capacities and identify the resources needed to allow WCO Libya to support MoH efforts to strengthen surveillance.
- Met with NCDC and surveillance officers to discuss the WCO's ongoing support, including EWARN evaluation and expansion, the development of an integrated disease surveillance and response strategy (including event-based surveillance), rebuilding and training RRTs, and monitoring visits to health facilities.

## Pillar 4: Points of entry, international travel and transport, and mass gatherings



- No updates.

## Pillar 5: Laboratories and diagnostics

WHO:



- Supported the transportation of COVID-19 samples to the reference laboratory in Rotterdam for genetic sequencing, as recommended by EMRO.
- Visited the NCDC in Sebha as well as Sebha Medical Centre's laboratory to discuss main gaps.

## Pillar 6: Infection prevention and control, and protection of health workforce



- With the support of the NCDC and EMRO, WHO supported an online training-of-trainers workshop on IPC from 13 to 17 June 2021 for 30 participants including IPC officers and physicians working in COVID-19 isolation centres.

## Pillar 7: Case management, clinical operations, and therapeutics



- WHO organized two workshops for 72 community health volunteers on COVID-19 home care guidance and supporting essential health services during pandemics.
- A 20 000-litre oxygen tank procured by WHO was delivered to Ajdabiya COVID-19 Isolation Department.

## Pillar 8: Operational support and logistics, and supply chains



- Laboratory, IPC and case management supplies worth USD 227 741 were distributed to west Libya, including NCDC branches, health facilities, laboratories and triage centres in Tarhouna, Zawia, Zliten and Tripoli.
- Laboratory, IPC and case management supplies worth USD 264 861 were distributed to east Libya, including health facilities in Al Marj, Al Wahat, Benghazi, Tawker, Al Bayda, Ajdabiya, Al Kwaifiya, Al Majouri, Derna and Shahat.

- Laboratory, IPC and case management supplies worth USD 14 172 were distributed to health facilities and RRTs in south Libya, including Al Gatroun, ALGareefh, Ashatti, Bent Baya, Ghat, Ubari, Al Afia, Al Jufra, Edri and Tmanhint.

## Pillar 9: Strengthening essential health services and systems

WHO:



- Deployed 19 Emergency Medical Teams to support 29 primary and secondary health facilities across the country. In June, the teams provided 89 surgical interventions and 19 483 specialized consultations.
- Conducted a five-day training-of-trainers workshop in Benghazi on the mhGAP Intervention Guide. Twelve psychiatrists and family practitioners from Benghazi, Sebha, Al Bayada, Ejdabiya and Al Kufra attended the workshop and will roll out cascade training in their respective districts.
- Met with staff of the infectious department of Tripoli University Hospital to assess the bed capacity for TB/HIV patients and discuss challenges related to HIV diagnosis capacity and medicines.

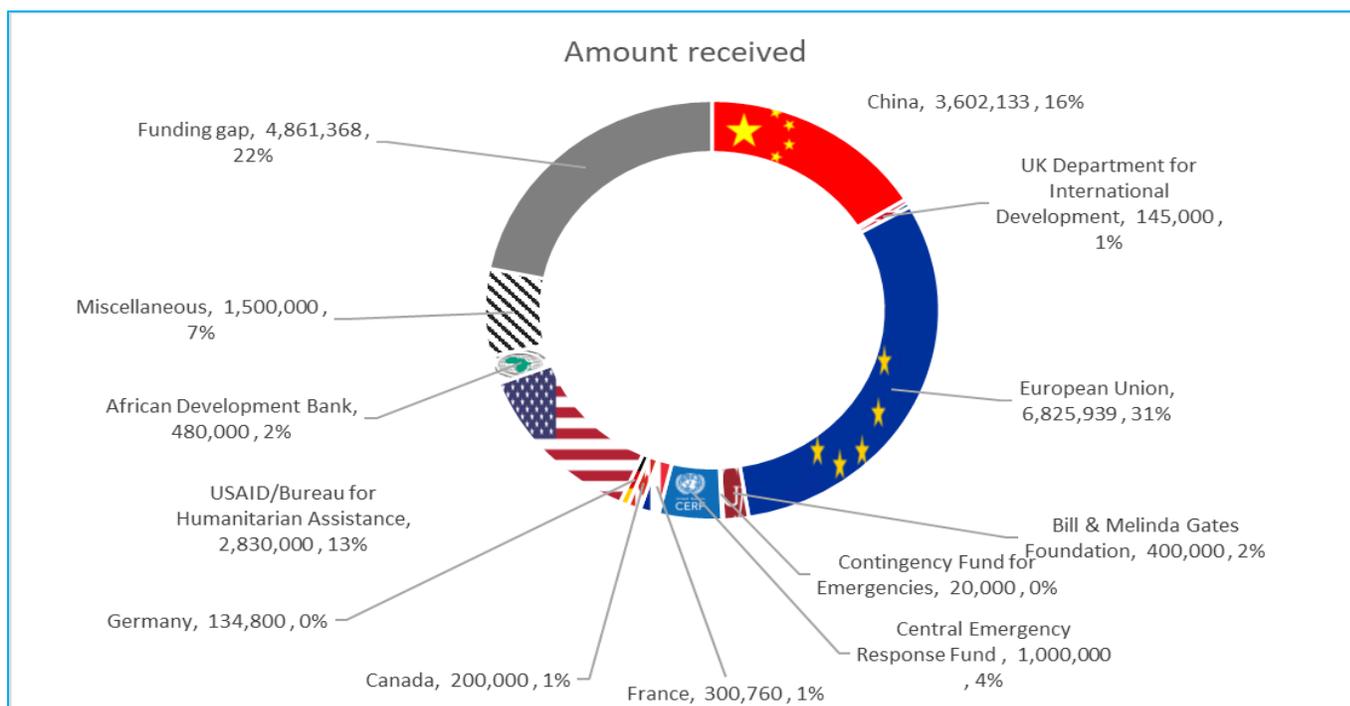
## Pillar 10: COVID-19 vaccination



- As of 30 June, Libya had administered 379 404 doses of vaccine (5.45 per 100 population), an average of 5000 doses per day. A total of 899 112 people, of whom 3311 are foreign nationals, have enrolled for registration.
- A total of 379 404 people have received their first dose of vaccine (27.6 doses administered per 100 people at high risk).
- The dashboard for tracking COVID-19 vaccination coverage in the Eastern Mediterranean Region (EMR) is updated regularly and is available at the following link: [EMR COVID vaccination dashboard](#).
- WHO participated in the eighth National COVID-19 Vaccination Coordination Committee meeting to review the progress of COVID-19 vaccination across the country.
- WHO has sent the National COVID-19 National Coordination Committee the latest WHO Emergency Use Listing and Strategic Advisory Group of Experts (SAGE) interim recommendations on CoronaVac, Sinovac vaccine, the updated version of Janssen Ad26.COV2. S, Moderna mRNA-1273 vaccine and Pfizer–BioNTech COVID-19 vaccine, BNT162b2. WHO also shared the second version of its guidance on developing a national deployment and vaccination plan for COVID-19 vaccines with the committee.
- 100 000 doses of Sputnik V "Light" vaccines and 54 990 doses of COVAX Pfizer vaccines arrived in Libya on 15 and 24 June 2021, respectively.
- WHO printed and delivered 200 000 vaccination cards to the NCDC and is printing 200 000 more.

	Total Received Doses	Estimated Utilized	Estimated Balance	% Utilization
Sputnik V	300,000	111,000	189,000	37%
AstraZeneca (COVAX)	175,200	141,000	34,200	80%
Sinovac	150,000	140,000	10,000	93%
Pfizer (COVAX)	54,990	0	54,990	0%
Total	680,190	392,000	288,190	58%

## FUNDING RECEIVED IN 2020



In 2020, WHO requested USD 22 300 000 to support the response to COVID-19 in Libya. At the end of the year, it had received USD 17 438 632.

## FUNDING REQUESTED FOR 2021

Pillar N°	Pillar title	Amount (USD)
1.	Leadership, coordination, planning, and monitoring	1,143,475
2.	Risk communication and community engagement	1,425,000
3.	Surveillance, case investigation and contact tracing	1,606,655
4.	Travel, trade, and points of entry	577,000
5.	Diagnostics and testing	3,005,200
6.	Infection prevention and control	1,223,200
7.	Case management and therapeutics	3,808,220
8.	Operational support and logistics	3,592,654
9.	Essential health systems and services	1,941,091
10.	Vaccination	1,840,000
	<b>TOTAL</b>	<b>20,162,495*</b>

\*(excluding staff costs in Category 1)

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