

LIBYA

Health Response to COVID-19

WHO update # 26. Reporting period: 1-30 April 2021



977,625

Cumulative samples tested

177,508

Cumulative confirmed cases

3,029

Cumulative deaths

163,191

Cumulative recovered cases

93,566

Samples tested this month

17,528

Confirmed cases this month

349

Deaths this month

15,327

Recovered cases this month

HIGHLIGHTS

- Libya has received its first COVID-19 vaccines:
 - 57 600 doses of Astra Zeneca AZD1222 vaccine (procured through the COVAX Facility) arrived on 8 April 2021.
 - 200 000 doses of Sputnik V Component 1 vaccine (procured bilaterally) arrived on 4 and 9 April 2021.
 - 150 000 doses of Sinovac vaccine (donated by Turkey) arrived on 14 April 2021.
- On 10 April 2021, the Prime Minister launched the national COVID-19 vaccination campaign. The first dose was administered the following day.
- As of 29 April 2021, Libya had administered 61 000 doses (0.88 doses per 100 population).
- WHO has completed its evaluation of the disease Early Warning and Response Network (EWARN) in Libya. The evaluation, conducted by a national and international team including staff from WHO's regional office for the Eastern Mediterranean (EMRO), took place from 25 March to 9 April 2021.

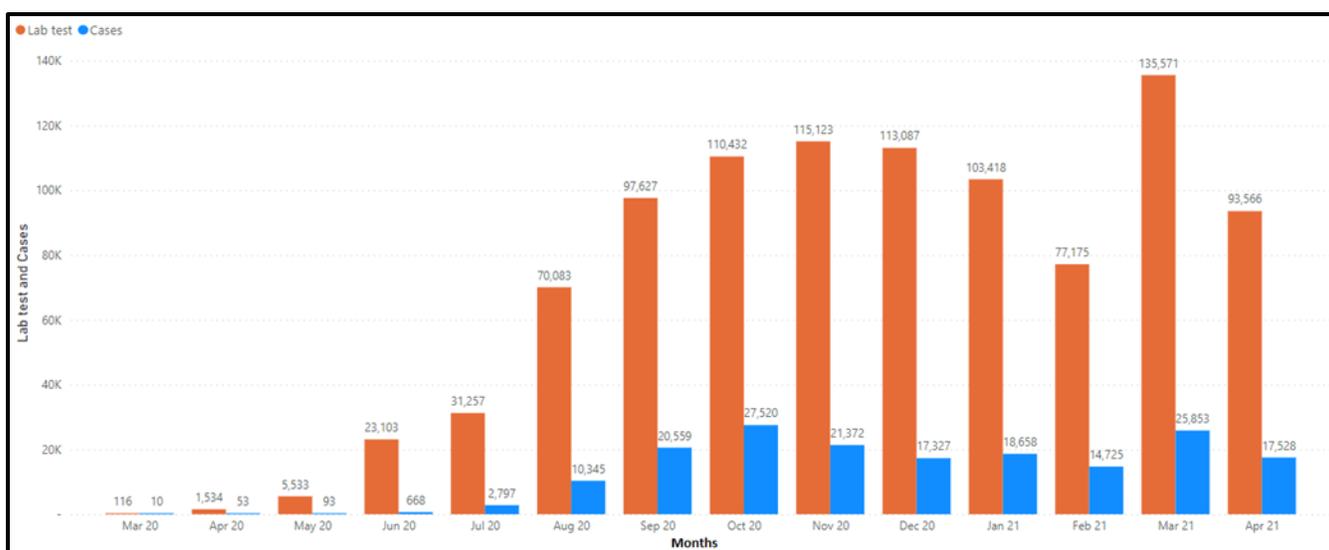


Figure: Number of COVID-19 laboratory tests performed vs confirmed positive cases per epi-month 2020-2021 calendars.
Source: NCDC data team.

EPIDEMIOLOGICAL HIGHLIGHTS

- Libya remains classified as community transmission with a verified circulation of variants of concern (VOCs) 202012/01 (B.1.1.7, UK variant) and 202012/02 (B.1.351, South African variant).
- Of the total number of 93 566 tests conducted in Libya in April 2021, 17 528 (18.7%) were confirmed positive for SARS-CoV-2 (COVID-19). The positivity rate remained the same as for March 2021, but the country conducted 42 005 fewer laboratory tests than the previous month (a 31% decrease). Although monthly trends show a decline, weekly analyses show significant fluctuations. Testing remains heavily concentrated in the west (93.6% of the total number of tests conducted nationwide).
- The national positivity rate of 18.2% cannot be generalized to regions. Weekly positivity rates in the east and south remained at 30%. There are deficiencies in surveillance for all municipalities, especially in the south and west.
- The overall number of new cases reported shows a 32% decrease compared with the previous month, with the west reporting a 31% decrease in new patients. East Libya reported a 9% decrease and south Libya reported a 63% decrease in the number of cases.

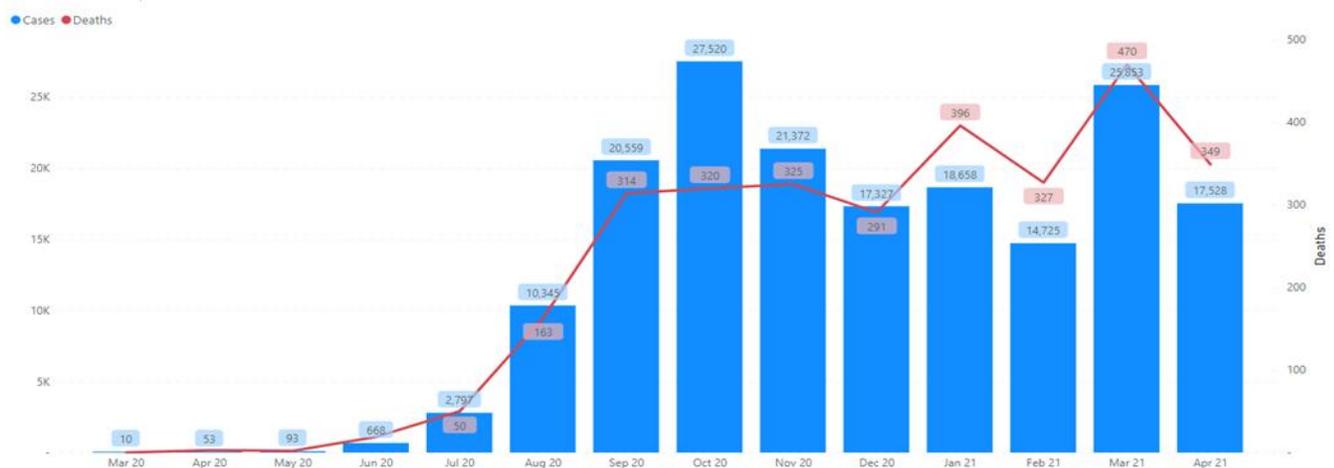


Figure: Histogram showing COVID-19 cases and deaths for epi month April 2021 compared with previous months. Source: NCDC data team

WHO LIBYA RESPONSE TO COVID-19

The WHO country office (WCO) works daily with health authorities in the east and west 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
- COVID-19 Supreme Committee (east Libya)

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 and the NCDC are reviewing ways to improve the weekly EWARN COVID-19 bulletin and the COVID-19 reports issued by the NCDC.
- WHO continues to prepare and disseminate daily, biweekly, and monthly epidemiological and operational updates.



Pillar 2: Risk communication, community engagement and infodemic management

WHO:

- Prepared and disseminated educational materials on COVID-19 vaccination and COVID-19 precautionary measures during Ramadan.
- Developed a tool to analyse responses to WHO Libya's social media updates. The tool tracks frequently asked questions regarding the vaccine as well as positive and negative reactions to the vaccination campaign.
- Developed COVID-19 health promotion messages and posted them on the WCO's social media platforms in Arabic and English (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 has completed its evaluation of the disease Early Warning and Response Network (EWARN) in Libya. The full assessment report, with recommendations, will be issued shortly.
- Experts from EMRO trained third party evaluators on assessing EWARN using WHO evaluation protocols and data collection forms. A total of 23 participants from Sebha, Tripoli, Benghazi and Almergab were trained in report tracing, interview skills, data analysis, quality assurance and report writing.
- The EMRO team also visited Zliten with government officials from national laboratories and surveillance and vaccination departments. The team conducted key informant interviews with national EWARN officers as well as with the surveillance officer in Zliten hospital.
- Daily COVID-19 epidemiological updates can be found at the [COVID-19 Libya dashboard](#).



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

No update.



Pillar 5: Laboratories and diagnostics



WHO:

- Coordinated with EMRO to arrange the transportation of COVID-19 samples for genetic sequencing for VOCs. In agreement with the national authorities, WHO Libya will explore alternative options for sending samples to Tunisia for onward transportation to an international reference laboratory.
- Distributed PCR kits, extraction kits, extraction machines and consumables to laboratories and health care facilities in Sebha and Brak (south Libya), Al Kufra (east Libya), and Tripoli and Misrata (west Libya).
- Shared the results of the COVID-19 sub-national laboratory external quality assessment project with the NCDC. Seven laboratories scored 100% and three others scored 80%, 75% and 60%.

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



WHO:

- Visited the triage department in Tobruk Medical Centre to review IPC measures and hold discussions with the COVID-19 committee.
- Distributed PPE to Alkhadra hospital, Zawayt El Dahmani triage centre, Misrata Medical Centre and Al Kufra Hospital.
- Continued to co-lead (with UNICEF) the IPC working group. The group issued its first IPC bulletin reporting on ongoing activities at national and community levels in coordination with national partners. Main activities include providing PPE, hygiene supplies and services, and strengthening national capacity to implement IPC measures.
- Conducted two IPC training workshops for 12 physicians and 19 nurses in PHC centres.
- Coordinated with EMRO on plans to conduct COVID-19 seroprevalence studies at the Universities of Tobruk and Derna.

Pillar 7: Case management, clinical operations, and therapeutics



WHO:

- Conducted two workshops in Misrata for PHC physicians and nurses from Misrata and Zliten (5-8 April) on IPC, case management and home care for COVID-19 patients.
- Transported 20 000 litres of liquid oxygen from Tripoli to Benghazi for isolation centres in Shahhat, Benghazi., Al Marj and Ejdabia.
- Assessed the functionality and the availability of oxygen supplies in COVID-19 isolation/triage centres in several municipalities across the country. The assessment report will be published shortly.
- Organized the delivery of oxygen concentrators and PPE to isolation centres in Mitiga and Soorman.

Pillar 8: Operational support and logistics, and supply chains

See Pillars 5, 6 and 7.



Pillar 9: Strengthening essential health services and systems

WHO:

- Facilitated a five-day training course for 22 participants from the south on implementing HIV services in PHC facilities (HIV testing services and prevention of mother-to-child transmission interventions).



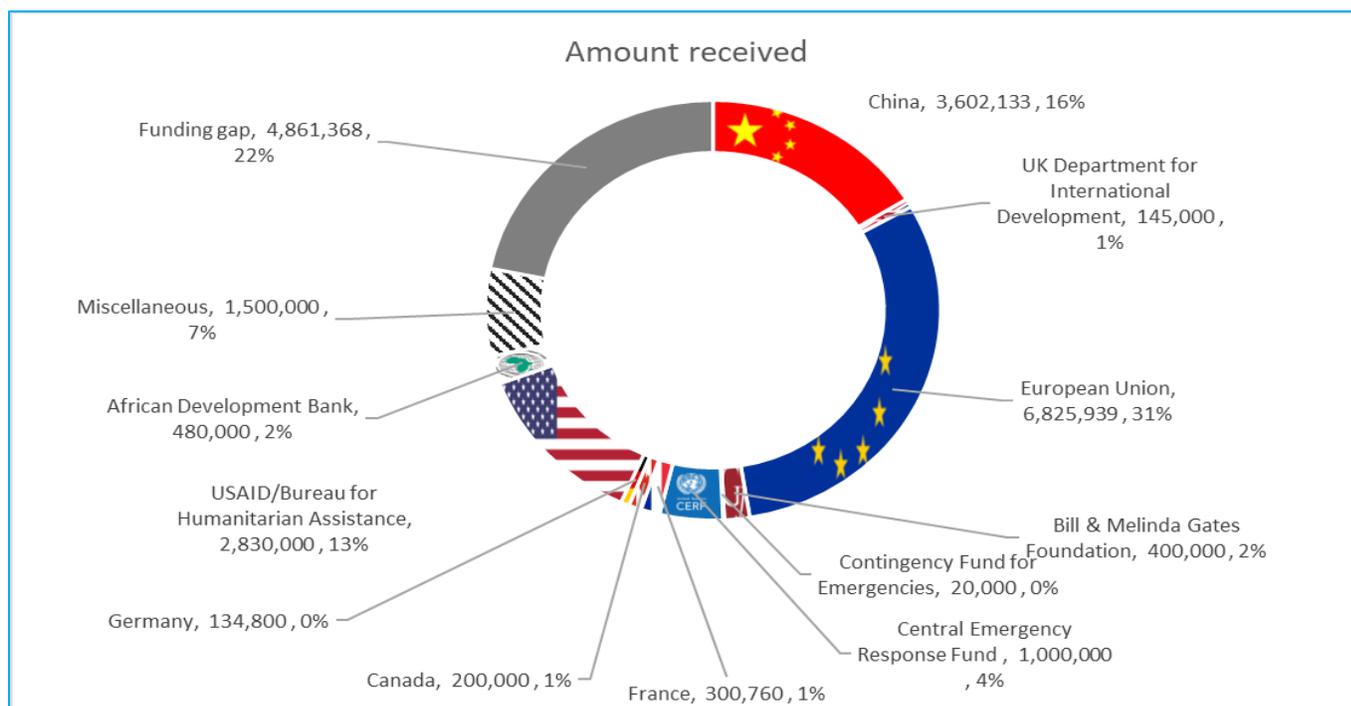
- Met with representatives from Libyan mobile phone companies and shared SMS messages on hypertension and COVID-19 to be disseminated by these companies as part of a health awareness campaign.
- Conducted a one-day workshop for EPI supervisors on administering a questionnaire to support the rollout of a comprehensive assessment of EPI services and vaccine availability in health care facilities.
- Delivered first- and second-line TB drugs, tests and GeneXpert cartridges to Al-Kwaifia Hospital in Benghazi and the NCDC in Tripoli.
- Assessed the health situation, health response, needs and gaps in Misrata as part of a UN inter-agency mission (IOM, UNHCR, UNICEF, WFP). A report of the mission is available on request.

Pillar 10: COVID-19 vaccination

- As of 17 April 2021, a total of 418 625 people had registered for COVID-19 vaccination. The Libyan government has listed Hajj pilgrims as a priority group for vaccination.
- Thus far, Libya has received 407 600 doses of vaccine that are being distributed to four regional warehouses. The Libyan Federal Drug Administration has approved the use of these vaccines.
- The national authorities are printing and distributing vaccination cards, posters, banners, reporting forms and other materials to support the vaccination campaign.
- The Global Advisory Committee on Vaccine Safety's [statement on AstraZeneca COVID-19 vaccine](#) has been shared with NITAG and the Libyan COVID-19 Vaccination Coordination Committee. NITAG has listed thrombosis with thrombocytopenia syndrome (TTS) as an adverse event of special interest and has developed a case definition tailored to the local context.
- NITAG has issued a recommendation letter endorsing the use of Sputnik V Vaccine for people between 18 and 60 years of age.
- The national authorities, with support from WHO, are preparing a guide on how to administer all six vaccines currently in use (AstraZeneca, Pfizer, Johnson & Johnson, Sinopharm / Sinovac, Moderna and Sputnik V).
- Libya has very limited capacity to store vaccines at the required temperatures. This poses challenges distributing and administering the Sputnik V vaccine, which must be kept at -18°C.
- As of next week, the NCDC will publish a weekly update on COVID-19 vaccination, with support from WHO.
- WHO participated in meetings on local vaccine deployment and discussed how to strengthen coordination of the vaccination campaign in Benghazi.



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
	TOTAL	20,162,495*

*(excluding staff costs in Category 1)

For further information, please contact:

Ms Elizabeth Hoff, WHO Representative for Libya, WHO Libya, hoffe@who.int

Dr Jorge Martinez, WHO Emergency Team Lead, WHO Libya, martinezj@who.int

Mr. Azret Kalmykov, Health Cluster Coordinator, WHO Libya, kalmykova@who.int

For more information, please visit www.who.int | www.reliefweb.int | www.humanitarianresponse.info