

International Medical Corps

International Medical Corps in Libya *From the rise of the Arab Spring to the fall of the Gaddafi regime*





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International Medical Corps — **IN LIBYA**



From the rise of the Arab Spring to the fall of the Gaddafi regime

44 health facilities supported across Libya.

43,515 medical consultations.

2,573 surgeries performed.

968 people provided with care for medical evacuations, including **464** evacuations by boat.

206 medical staff deployed, including **55** surgeons and **108** nurses.

Partnered with the Jordanian Health Aid Society to second **82** nurses to Libyan hospitals experiencing critical shortages.

2,003 people trained (**1,401** trained in first aid, **445** trained in psychological first aid, **77** trained in gender-based violence issues, trainings for **36** ambulance staff, **33** emergency medics trained + other trainings).

147+ tonnes of medications, medical supplies, medical equipment, food, bottled water and hygiene items delivered.

\$11.0 million donated medicines and medical supplies by our in-kind partners delivered to needed health facilities.

Collaborated/coordinated activities and priorities with the newly formed Libyan Ministry of Health.

International Medical Corps would like to acknowledge the generous support from our donors and supporters for the Libya response including: USAID Office of U.S. Foreign Disaster Assistance (USAID/OFDA), The European Commission Humanitarian Aid Department (ECHO), The Australian Agency for International Development (AusAID), The UK Department for International Development (DFID), I-Go Aid Foundation, AmeriCares, Heart to Heart, Stichting Vluchteling, Church of Jesus Christ of Latter-day Saints, Bridge Foundation, International Health Partners UK, International Relief Teams, MAP International, Libyan Aid, Merchant Community of Benghazi, UNICEF, UNFPA, United Nations World Food Programme, Medical Teams International, and our private donors.

* figures are as of August 26, 2011

Eight Months of Crisis in Libya

Following civilian demonstrations in Tunisia and Egypt, the people of Libya started to push for regime change in mid-February. It began with protests against the leadership of Colonel Muammar al-Gaddafi, with the Libyan leader responding by ordering his troops and supporters to crush the uprising in a televised speech, which escalated the country into armed conflict.

The unrest began in the eastern Libyan city of Benghazi, with the eastern Cyrenaica region in opposition control by February 23 and opposition supporters forming the Interim National Transitional Council on February 27. In addition to eastern Libya, uprisings and associated conflict also broke out in Misurata, Zawiyah and the Nafusa Mountains region. With air support from NATO since the end of March, enforcing a no-fly zone over Libya, rebel forces gradually gained territory in the battle. By the end of August, rebels had taken control of Tripoli, the Western Mountains region, Misurata, Zliten and Brega. However, resistance by loyalist supporters remained in pockets of the country including Bani Walid, Sabha, Jufrah and Gaddafi's hometown of Sirte. Following fierce fighting in September and October, rebels gained control of these remaining loyalist pockets, with Sirte being the last remaining loyalist stronghold to fall on October 20. On this day, more than eight months after the Libyan revolt began, the developments in Sirte ultimately led to the death of the former Libyan leader, liberating the country of the Gaddafi regime.

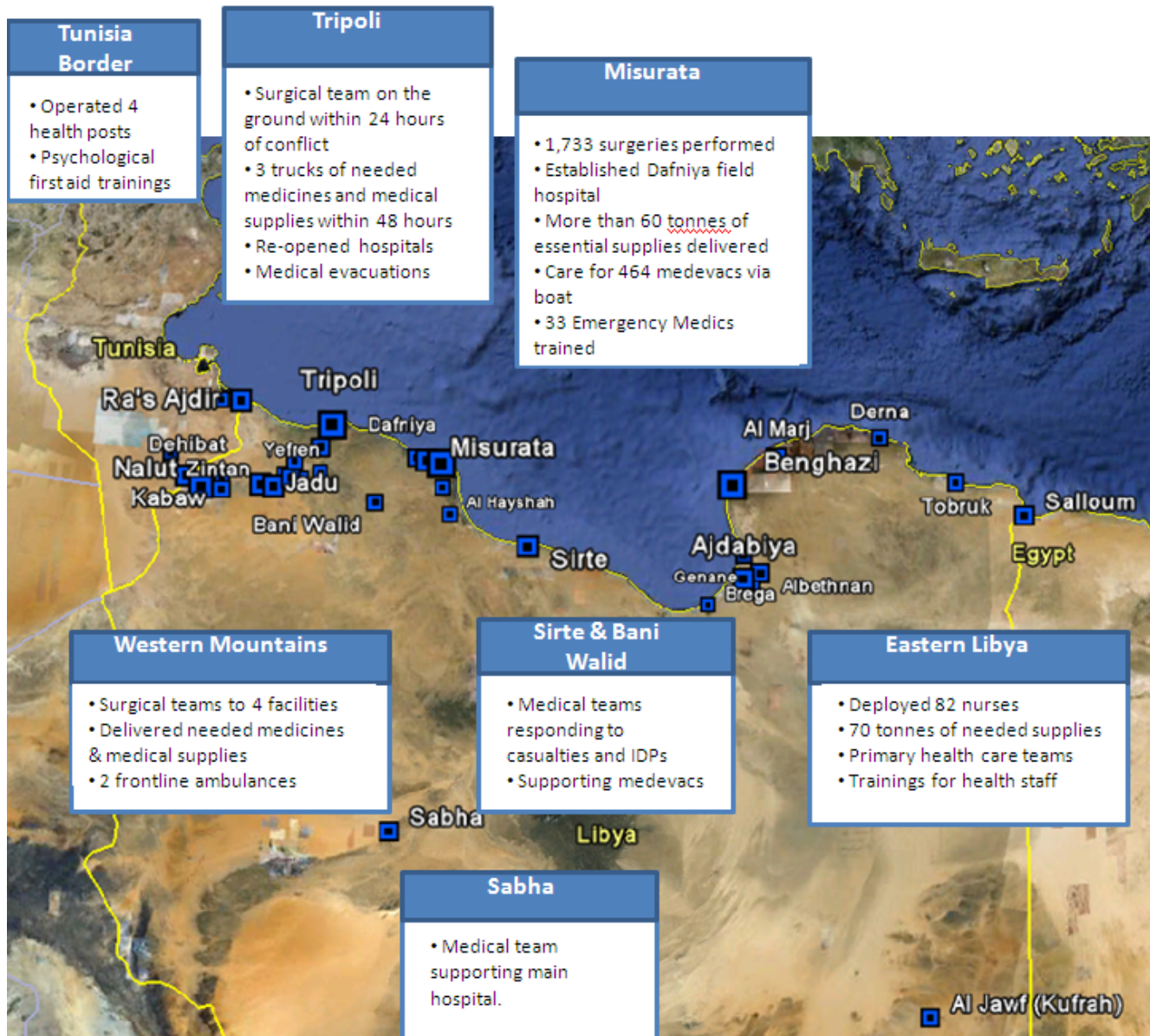
In addition to estimates of tens of thousands killed in the conflict, the civilian population has been impacted significantly. The conflict has caused large scale population displacement, with over 860,000 people who have left Libya and remained in displacement since February 16 and estimates of internally displaced people within Libya have reached as high as 240,000 people. The conflict has halted traditional supply routes, displaced whole communities, inflicted civilian casualties and, in some cases, whole cities and towns have been besieged by Gaddafi forces causing extreme hardship upon the population. Libyan people have faced shortages of food, water, fuel, electricity and access to adequate health care. Health facilities have been stretched to their limits, facing increased caseloads due to the conflict. Concurrently, central supply chains for medications and medical supplies have been cut and large numbers of foreign nurses have departed the country, leaving facilities with urgent shortages of these critical staff. In some areas, the overload on hospitals, created a critical need for medical evacuations to reduce the pressure on these facilities.



International Medical Corps has been on the ground in Libya, providing assistance to the Libyan people from the rise of the Arab Spring to the fall of the Gaddafi regime. As the people of Libya recover and begin to rebuild, International Medical Corps remains ready to respond to the ongoing and future needs in the country.

International Medical Corps' Libya Response

International Medical Corps has been on the ground responding to the crisis in Libya since February 27, 2011. As access permitted and as were needs identified, teams expanded activities for a country-wide response, including eastern Libya, Misurata and Zliten, the Western Mountains, Tripoli, as well as the Egyptian and Tunisian border regions that received large numbers of Libyans and third country nationals fleeing the violence. International Medical Corps was one of the first international NGOs to arrive in Benghazi, the first to arrive in Misurata, as well as in Tripoli and the northern front of the Western Mountains. More recently, International Medical Corps has continued to provide support in Libya, including response activities for the high numbers of casualties and internally displaced persons as a result of the conflict in Sirte, Sabha, Jufrah and Bani Walid.



■ International Medical Corps' response locations

TIMELINE OF MAJOR EVENTS IN LIBYA AND INTERNATIONAL MEDICAL CORPS' RESPONSE

MAJOR EVENT IN LIBYA

FEBRUARY 14 – Major unrest erupted in Benghazi in opposition to Libyan leader Muammar Gaddafi.

FEBRUARY 22 – In a televised speech, Gaddafi ordered his troops and supporters to crush the uprising.

FEBRUARY 23 – Benghazi and the eastern Cyrenaica region in control of anti-government forces.

LATE FEBRUARY – Due to the developing conflict, large numbers of people begin fleeing across the country's borders.

MARCH 14 – Fighting between Gaddafi and rebel fighters reached as far east as Ajdabiya.

MARCH 17 – U.N. Security Council approved a no-fly zone over Libya, authorizing "all necessary measures" to protect civilians.

MARCH 19 – The International Coalition began military interventions via air in Libya.

DURING MARCH – With fighting in the Ajdabiya region, thousands of people are displaced.

MARCH 28 – Opposition fighters temporarily made gains as far as Ra's Lanuf.

MARCH 30 – Fighting in eastern Libya moves to Brega.

INTERNATIONAL MEDICAL CORPS' KEY RESPONSE ACHIEVEMENTS

FEBRUARY 24 – Emergency Response Team (ERT) deployed to Egypt.

FEBRUARY 27 – ERT arrived in Benghazi and immediately began providing support to hospitals with medical staff and supplies.

MARCH 2 – Second ERT arrives in Tunisia to assess and respond to needs of people fleeing across the Libyan border.

DURING MARCH – Provided essential supplies to the Ajdabiya hospital receiving casualties from nearby fighting.

MARCH 22 – Began providing nursing support in eastern Libya, initially seconding 18 nurses to the Benghazi Medical Centre.

MARCH 23-25 – Identified approx 20,000 IDPs in Albethnan (east of Ajdabiya) and provided needed medicines, medical supplies to the village clinic and distributed food, water and essential non-food items to the community.

MARCH 28 – ERT reached Ra's Lanuf and assessed needs.

EARLY APRIL – Siege conditions and fighting create urgent response needs in Misurata.

MID-APRIL – High numbers of casualties in the Western Mountains region, combined with conflict developments allowing access, create immediate needs for humanitarian response efforts.

LATE APRIL – Critical food shortages in Misurata as a result of the siege imposed by Gaddafi forces.

APRIL 10 – Doctors deployed and first shipment of medical supplies delivered to the besieged city of Misurata.

APRIL 14 – Medical Evacuations begin from Misurata began and International Medical Corps provided care for those requiring evacuations.

APRIL 18 – International Medical Corps deploys a medical team into the Western Mountains and provides urgently needed supplies.

APRIL 28 – Medical post established in Dehibat to respond to casualties of fighting near the southern Libya/Tunisia border crossing.

EARLY MAY – Rebel forces push Gaddafi troops outside of Misurata.

DURING MAY – International Medical Corps continued to provide support to hospitals in Misurata.

JUNE 18 – Field hospital established in Dafniya (outside of Misurata) to provide lifesaving care to casualties from the frontlines.

JUNE 21 – Emergency Medic Training commenced in Misurata to train providers of frontline care.

JUNE 6 – Rebel forces capture Yefren in the Western Mountains, which had been held under siege by Gaddafi forces.

JUNE 27 – International Criminal Court issues warrant of arrest for Libyan leader Muammar Gaddafi.

EARLY JULY – Significant escalation in the rebels offensive against Gaddafi forces in the Western Mountains.

JULY 28 – Rebel forces able to push Gaddafi forces out of Al Ghazaya (from where Gaddafi forces had been launching attacks on the border entry point to the Western Mountains).

LATE JULY – Rebels take control of Al Ghazaya and Takut, north of Nalut.

EARLY/MID JULY – The central MoH warehouse in Benghazi urgently appealed for donations to off-set stock-outs.

DURING JULY – Fighting outside of Misurata continues, with particularly heavy fighting near Dafniya.

JUNE 19 – ERT able to access Yefren and Qalaa in the Western Mountains to deliver supplies and conduct needs assessments.

JUNE 22 – Mobile Health Teams commence providing primary health care services in Eastern Libya.

JULY 15 – Began ambulance operations in the Western Mountains, transferring casualties from frontline locations to hospitals in the region.

JULY 31 – An International Medical Corps assessment team was the first to arrive in Al Ghazaya and Takut, along the northern front of the Western Mountains, to identify response needs.

JULY 19 – International Medical Corps donated 186 boxes of drugs and consumables to the Benghazi MoH.

JULY 31 – 1,000+ patients received at International Medical Corps Field Hospital in Dafniya since opening.

AUGUST 19 – Rebels commence major offensive to take control of Zliten, west of Misurata.

AUGUST 21 – Rebels commenced push for Tripoli.



AUGUST 13 – Physical Rehabilitation for War-Wounded Casualties program begins at the Benghazi Medical Centre Rehabilitation Unit.

AUGUST 19 – With heavy fighting for Zliten, International Medical Corps' field hospital at Naima (moved from Dafniya) received the highest daily number of casualties, with 130 wounded and 30 dead.

AUGUST 21 – International Medical Corps trained approximately 200 frontline medics on route to Tripoli.

AUGUST 22 – ERT able to access Tripoli & commence operations, re-opening the Mitiga hospital to provide lifesaving care for casualties.

AUGUST 23 – International Medical Corps delivered 3 trucks of medical supplies to hospitals in Tripoli.

AUGUST 27 – In partnership with Libyan Volunteer Doctors, International Medical Corps opened Al Khadra hospital after the ER department was destroyed by a missile and began providing support (doctors, nurses and supplies).

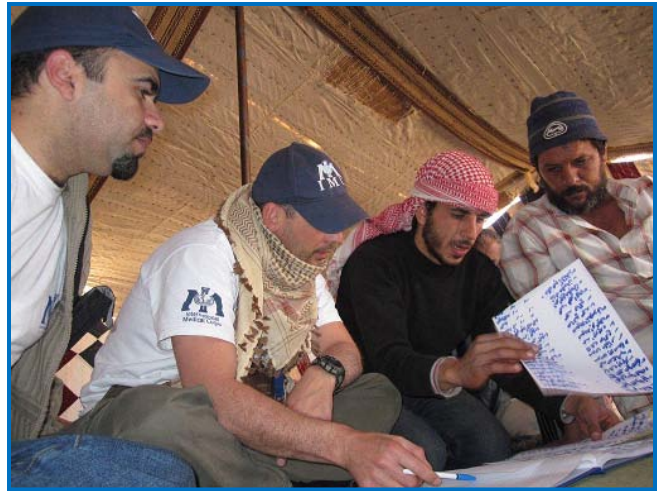
SEPTEMBER – With resistance from Gaddafi loyalists remaining in Sirte, Bani Walid, Sebha & Jufrah, rebel forces amass and commence offensives into these areas.

SEPTEMBER – International Medical Corps commenced response operations by supporting field hospitals and primary health care clinics in the Sirte and Bani Walid region to provide care for casualties and IDPs as a result of the fighting for remaining pro-Gaddafi held areas.

OCTOBER 20 – The death of the former Libyan leader Col Muammar Gaddafi was confirmed by the Libyan Prime Minister, Mahmoud Jibril. His death occurred as rebel forces took Sirte, the last remaining Gaddafi loyalist hold-out.

OCTOBER – International Medical Corps is continuing to provide support in Sirte, Bani Walid and across Libya.

Eastern Libya



With the conflict in the east focused towards the Ras Lanuf, Brega and Ajdabiya region, many areas of eastern Libya remained out of conflict zones. However, eastern Libya was still significantly impacted by the conflict. Many people were displaced from areas close to the conflict, schools were closed and health care provision was disrupted. The central hospitals in Benghazi and Ajdabiya received high numbers of casualties, straining health services that were already facing significant difficulties due to major nursing shortages from the exodus of a large number of foreign nurses and shortages of medical supplies due to severed central supply lines. At one point, the main hospital in Ajdabiya had to evacuate staff and patients due to the proximity of the fighting and threat to security.

Following the arrival of International Medical Corps' emergency response team in Benghazi on February 27, response activities immediately began. From the initial Benghazi base, teams conducted assessments and provided support as far as Ra's Lanuf to the west and Derna and Tobruk to the east, as well as to the centers of Benghazi and Ajdabiya and surrounding areas.

International Medical Corps' major response efforts in eastern Libya include:

- Supported 21 health facilities with staffing, supplies and/or trainings.
- Provided staffing support, including 82 nurses seconded to needed health facilities in eastern Libya in collaboration with the Jordanian Health Aid Society (JHAS). These nurses assisted with care for more than 13,800 patients in Benghazi and Ajdabiya.
- 20 tonnes of needed medicines and medical supplies delivered to health facilities.
- 50 tonnes of food items, bottled water and basic non-food relief items distributed to displaced populations, with many items provided through the generosity of local vendors and community members in Benghazi.
- Commenced mobile health team primary health care services in the Ajdabiya and Al Marj regions which provided over 1,400 consultations.
- Conducted psychological first aid trainings for 342 people.
- Provided medical care and coordinated transportation of medical evacuation arrivals from Misurata through to hospitals in Benghazi.



Essential Staffing and Supply Support for Health Facilities

Within the initial days of arrival, the team immediately began supporting health facilities in Benghazi. Medical supplies were provided to the Al-Jella Hospital and three doctors were seconded to hospitals in Benghazi. Nursing staff shortages were quickly identified as a major obstacle in the provision of healthcare, with the Benghazi Medical Center, the largest health facility in eastern Libya, closing pediatric and gynecology wings as a result. International Medical Corps quickly responded to requests for assistance, providing an initial team of 18 nurses to the Benghazi Medical Centre in March. Six months later, a total of 82 nursing staff have been provided to support health facilities in eastern Libya in collaboration with JHAS. The support provided by these nurses has been significant - care has been provided for more than 13,800 patients at the Benghazi Medical Center and the Ajdabiya hospital during this time. A number of nurses also undertook rotations to also provide needed nursing support in Misurata.



With hospitals in Benghazi and Ajdabiya receiving casualties from fighting in the east, as well as from Misurata, International Medical Corps also provided surgical specialists to the Al Majory polyclinic and Ajdabiya hospital to assist with lifesaving surgeries.

International Medical Corps has also prioritized the delivery of needed medications and medical supplies, with the delivery of 20 tonnes to facilities in eastern Libya. Based on assessed needs, supplies have been delivered to central health facilities, including Al-Jella hospital, Benghazi Medical Center, Ajdabiya hospital, Brega Polyclinic, Tobruk Hospital and the Quefia Chest Hospital in Benghazi, where more than a two-month supply of tuberculosis and antibiotic medications was provided. Supplies have also been provided to smaller clinics in the region to support the provision of primary healthcare. Furthermore, a major donation of drugs and consumables was made to the central MoH warehouse in response to an urgent appeal to offset stock-outs, with 186 boxes donated on July 19.



In Ajdabiya, as fighting neared the city, International Medical Corps delivered needed supplies, including emergency health kits. Gratitude was expressed by the hospital's Chief Medical Officer for being the only International NGO in Ajdabiya to respond to these critical needs at that time. Further south, International Medical Corps also delivered medicines and medical supplies, including two Interagency Emergency Health Kits (IEHKs) to Al-Kufra, in the remote south-eastern corner of Libya.



Primary Healthcare Support

Through assessments of numerous health facilities in eastern Libya, International Medical Corps' teams noted that the primary health care (PHC) system was suffering, primarily due to a lack of staffing, with many staff either departing the country or leaving to provide care in conflict areas. Disruption to supply chains also compounded PHC service delivery problems. This reduced functioning of the PHC system placed further pressure on central hospitals already strained to meet the increased demands on the conflict.

In the Ajdabiya and Al Marj regions, International Medical Corps provided support for primary health care through the deployment of mobile health teams to nine health facilities. In coordination with the Ministry of Health, facilities in need of support were identified and mobile health consultations began at the end of June. As of August 26, a total of 1,441 internal medicine, pediatric and OB/GYN consultations were provided, greatly improving access to these services for people in these areas. International Medical Corps also collaborated with MoH monitoring and evaluation department to develop comprehensive PHC health survey assessment, registration and mapping tools.

Providing Support to Displaced Populations

With estimates of up to 100,000 internally displaced people within eastern Libya due to the conflict, International Medical Corps responded, distributing 50 tonnes of basic relief supplies to communities, including food items, bottled water, hygiene kits, blankets and mattresses.

In the initial days of the response, International Medical Corps identified 6,000 migrant workers awaiting evacuation at the Benghazi port and immediately responded providing 300 blankets to the community and providing medications and medical supplies for a temporary clinic providing medical care.

In Ajdabiya, 27,000 liters of bottled water, food items and a shipment of diapers and feminine hygiene pads, were provided to the community distribution centre, when fighting was close to the city and basic supplies were limited. As the conflict threatened Ajdabiya, tens of thousands of people fled to safer areas and International Medical Corps remained close by assessing and responding to the needs identified.

In the small town of Albethnan, International Medical Corps identified approximately 20,000 displaced people temporarily residing there, who without any humanitarian support were experiencing critical shortages of many essential items. To address these urgent needs, International Medical Corps distributed food and supplies in the towns of Albethnan and Genane, which were undertaken in conjunction with the boy scouts of Benghazi and a community-organized humanitarian convoy. Food, water, hygiene kits, 150 mattresses, charcoal, fuel and generators were distributed by International Medical Corps to these communities, with many supplies and items



provided through the generosity of local vendors and community members in Benghazi. Staffing, medical supplies, medications and an emergency health kit were also provided to the local clinic which faced difficulties in responding to the significantly increased patient caseload.

At the Egyptian border, International Medical Corps provided support to the large numbers of third-country nationals fleeing the violence. Medical personnel support and supplies (including an IEHK) were provided to the Ministry of Health Clinic serving the camp near Salloom, where the majority of the migrant workers reside pending onwards transportation. In addition, a nurse to escort migrant workers in their long transits to Cairo was provided to ensure safe transportation conditions.

Psychological First Aid and GBV Trainings

International Medical Corps has provided trainings to staff at three health facilities in Benghazi (Benghazi Medical Center, Al-Jella Hospital and the Benghazi Psychiatric Hospital) designed to improve their capacity to provide support to those affected by the conflict, including survivors of sexual assault.

Psychological First Aid trainings, designed to equip responders with the skills and tools needed to support and manage the needs of a population exposed to distressing events, have been conducted for 342 people in eastern Libya. This includes healthcare staff as well as 21 teachers trained in providing psychological interventions for children, who have in turn trained another 250 teachers on the same topics. Psychological First Aid training was also provided for 14 volunteers working in recreational child friendly spaces, within settlements for internally displaced persons (IDPs).



Trainings involving issues around gender-based violence (GBV) have also been conducted, including awareness trainings on GBV Basics and Guiding Principles and Clinical Management of Rape Survivors for healthcare staff at the Benghazi Medical Center.

Capacity Strengthening

Even in the midst of emergency response efforts, International Medical Corps prioritizes trainings to strengthen the local capacity to provide needed services.

In eastern Libya, International Medical Corps' nursing staff have been conducting first aid courses for hospital staff on a regular basis, with 1,026 now trained. Technical trainings have also been conducted, including a training for 36 Benghazi-based ambulance staff on safe transportation and effective use of equipment. In-service trainings were also provided for orthopedic surgeons at the Ajdabiya hospital and for Benghazi staff providing dialysis services. In addition, a symposium was held at the Benghazi Medical Center on Advanced Trauma Support, which was attended by 40 doctors and nurses.

To support the MoH, initially based in Benghazi and now in Tripoli, International Medical Corps has seconded a technical advisor to provide broad strategic health systems advice. This includes briefings on the various roles of the international organizations and logistics assistance for coordination meetings, as well as other assistance to strengthen the MoH's capacity. International Medical Corps also assisted the Libya National Council Medical Supply Committee in establishing a unified mechanism for managing the reporting of needed medical supplies and the coordination of donors.

Rehabilitation Services

The large numbers of war-wounded, including significant numbers of amputees, have created immediate and longer-term needs for both physical and psychological rehabilitative services. In August, International Medical Corps commenced providing rehabilitation consultations for war-wounded, outfitting a wing of the Benghazi Medical Center with necessary aids and equipment to provide needed care. The program has already provided assessments and physical therapy sessions to 81 war-wounded patients as of the end of September, with International Medical Corps planning to expand and continue these services for a two year period.

Misurata and Surrounding Areas



Misurata, the third largest city in Libya, was besieged by Gaddafi forces for months. As a result, the population faced dire shortages of medical supplies and food. Electricity was cut to large portions of the population for extended periods and hospitals were stretched beyond capacity, at times without beds available for any additional patients. With heavy shelling on the city of Misurata, and high numbers of civilian and combatant casualties, International Medical Corps responded, orchestrating the provision of urgently needed medical staff and medical supplies via a small fishing boat from Malta on April 10.

Since this time, International Medical Corps' major achievements in the Misurata area include:

- Provided critically needed staffing and supply support to hospitals in Misurata while the city was under siege, including when fighting took place in the streets of the city.
- Established a field hospital in Dafniya close to the frontlines to provide lifesaving care, when fighting moved out of Misurata.
- 1,733 surgeries performed by International Medical Corps surgeons at the Misurata and Dafniya hospitals.
- More than 60 tonnes of medicines, medical supplies and relief items delivered.
- Provided medical care for 464 patients who required evacuations via boat to Benghazi, many in critical condition.
- 33 Emergency Medics trained.

Essential Staffing and Supply Support for Health Facilities

An International Medical Corps response team arrived in Misurata on April 10 to a city under siege. With fighting entering the city streets of Misurata, health facilities were overwhelmed as they received an average of 70 casualties per day, many of them civilians, including women and children. To respond to the emergency conditions, surgical and nursing staff immediately began providing support. During the weeks of heavy fighting in Misurata, more than 50 medical staff were deployed, supporting the Al Hilal and Al Hikma hospitals and performing over 1,200 surgeries and saving many lives. From the support base in Malta, these efforts were complimented with the delivery of urgently required

medical supplies, medicines, medical equipment, generators, water, hygiene items and food, including 10,000 kilos of fresh food items.

After fighting moved out of the city, nursing and surgical support continued to be provided to three of the major facilities, as casualties transported from the outside frontlines continued to place increased demands on the recovering health system. Support was also provided to the Al Hilal hospital to augment their operating theatre capacities to enable the hospital to accept more major surgical cases in an effort to improve patient care and concurrently decompress the Al Hikma Hospital. In addition, volunteer orthopedic surgeons provided a series of lectures/seminars for Libyan orthopedic surgeons covering trauma topics.

Significant amounts of essential medical supplies, medications, and equipment were provided to the Al Hikma, Al Hilal, Rostuba hospitals and the Dafniya Field Hospital.

Medical Evacuations

To assist over-stretched hospitals in Misurata, maritime evacuations of medical patients out of the city became necessary. International Medical Corps assisted with provision of care for 464 medical evacuations of patients - many in critical condition - to Benghazi. As part of these efforts, a field hospital provided by Libyan Aid and installed on a ship enabled International Medical Corps to directly medevac 137 patients in urgent need of medical care. International Medical Corps' teams in Misurata coordinated with facilities to identify patients requiring medical evacuations, and would then facilitate medical transfers through to the port. Following on board care for the duration of the trip, the Benghazi-based team would then organize transfers through to hospitals in Benghazi upon arrival. With hospitals in Misurata at times having no beds at all to provide care to arriving casualties, these medevacs operations undoubtedly decompressed the demand on facilities, freeing up space and resources to be provided to incoming patients.

International Medical Corps' Dafniya Field Hospital

As the fighting moved outside of the Misurata, the need for frontline medical care became critical. In Dafniya, approximately 35 kilometers west, International Medical Corps established a field hospital to provide lifesaving care to all casualties wounded in the conflict. The hospital commenced operations in June and was located near the frontlines to provide the immediate level of care needed for casualties. Facilities included an operating room, treatment areas for ICU and emergency cases, a pharmacy, administrative facilities and a prayer area. International Medical



Corps fully staffed the hospital with surgeons, orthopedists, anesthesiologists, nurses and other staff. In August, the hospital relocated to Naima in response to the changing location of the frontlines. In the heaviest day of fighting, 130 casualties were received at the field hospital on August 19 as a result of the battle for Zliten. During the total period of operations from June until August, the field hospital received 1,342 cases which included patients with gunshot wounds, blast injuries, shrapnel injuries, major fractures and head trauma injuries. In addition, over 200 medical evacuations were undertaken by International Medical Corps, including from the frontlines to the field hospital and from the field hospital to facilities in Misurata.



Emergency Medic Training

In June, International Medical Corps commenced Emergency Medic Training for 33 senior medical students from Benghazi and Misurata. The four-week course educated students on basic trauma evaluation and management using didactic lectures, skill sessions, and clinical teaching to equip them with the skills and knowledge needed to provide emergency care. Topics covered in the lecture portion include patient assessment; resuscitation; severe head, thoraco-abdominal, and extremity injuries; and patient and provider safety in hostile environments. The skill stations allowed students to practice essentials skills such as chest compressions and airway management, while clinical training provided them with hands-on experience as an emergency medic. Medics were deployed on ambulances to the front-lines to provide patient care, stabilization, and transport as well as to forward aid stations and hospitals. Upon completion of the course, many of the students from Misurata continued to work in field hospitals on the front-lines as well as referral hospitals in the city, while those from Benghazi returned to work in the Benghazi Medical Center, the main referral hospital.



Tunisian/Libyan border



Since International Medical Corps' deployment of an Emergency Response Team on March 2, activities on the Tunisian side of the Libya/Tunisia border have expanded. With hundreds of thousands of people crossing into Tunisia, International Medical Corps provided assistance to Libyan refugees and third-country nationals who fled the violence, providing health services through health posts at Ra's Ajdir, Shousha camp, Al Hayat camp and Dehibat.

International Medical Corps' major response efforts in Tunisia include:

- Operating four health posts which collectively provided more than 12,700 consultations for Libyan refugees, third country nationals and a number of conflict casualties.
- Conducted health and hygiene education at health posts.
- 74 first responders trained in psychological first aid.



Health Post Operations

International Medical Corps first commenced health post operations in March at the Ra's Ajdir transit facility, where immediate medical care was provided for those who crossed into Tunisia. 24-hour health post operations also expanded to the Al Hayat camp and to the Shousha camp, the largest camp for those displaced in the Ra's Ajdir area. In addition to providing general medical and emergency care consultations, staff distributed hygiene kits and conducted health and hygiene

education. International Medical Corps' health staff within health post facilities coordinated with relevant actors on ground for referral of pregnant women to UNFPA tent for prenatal counseling and distribution of clean delivery kits; confirmation of diagnosis for patients with suspected tuberculosis and other chronic conditions needing laboratory examinations; elective surgical procedures; and psychiatric evaluation and prescription for chronic mental disorders.

At the Shousha camp, International Medical Corps also constructed privacy screens around latrines in the camp, separating areas for men and women.

Further south at the Dehibat border, International Medical Corps also established a health post at the Dehibat hospital. The health post provided medical care for those in need, particularly for the large numbers of Libyan refugees. With fighting also taking place near the Tunisian border, at times spilling over, the team also provided surgical care for casualties, in coordination with the Tunisian military who conducted initial triage and then referred to International Medical Corps for further treatment.



With decreasing arrivals to Tunisia by the end of August, International Medical Corps reduced health posts operations to the Shousha and Al Hayat camps.

Psychological First Aid Training

To equip frontline workers at the refugee camps at Ra's Ajdir with the skills and tools needed to support and manage the needs of a population exposed to violence and displacement, International Medical Corps provided psychological first aid training for 74 non-specialized staff most frequently interacting with the affected population. In addition, Gender-Based Violence awareness trainings have recently commenced for health post staff.



Western Libya

In the initial weeks of the conflict, humanitarian organizations were not able to access western Libya. Fighting erupted in the Western Mountains region between Gaddafi and opposition forces, with civilian settlements significantly impacted through targeted attacks by Grad missiles, bombings, rockets and shelling. Fighting was particularly fierce for control of the Wazin border post, the entry point to the Western Mountains. Following opposition forces' seizure of the border post on April 21, near continuous shelling of the border area occurred and heavy fighting occasionally carried over the Tunisian border. In response to urgent needs in the Western Mountains, International Medical Corps was able to send the first delivery of needed supplies into western Libya on March 26, followed by a medical team on April 18.



International Medical Corps' major response efforts in western Libya include:

- Provided medical teams to support four Western Mountains health facilities that provided more than 11,800 consultations and performed over 700 surgeries as part of integrated hospital teams.
- Delivered needed medicines, medical supplies and relief items, reported to be the first humanitarian aid received by many facilities.
- Provided and operated 2 frontline ambulances which provided medical evacuations to approximately 115 casualties.

Staffing and Supply Support for Health Facilities

Health facilities in the region received a high number of casualties, including civilians and combatants from both sides, as a result of the conflict. Due to the increased medical care needs, hospitals requested assistance for staffing and supplies. To respond to these needs, International Medical Corps deployed four teams in the Western Mountains – Nalut, Zintan, Jadu and Kabaw - integrated into the hospital staff that provided 11,818 consultations and performed 710 surgeries. Ambulances also transferred patients between facilities as needed.

In addition to providing this vital support for medical care, needed medications, medical supplies and surgical equipment were delivered to Nalut, Kabaw, Jadu, Zintan, Yefren, al-Qalaa and Kikla. Some of



these facilities reported that the supplies from International Medical Corps were the first assistance

received from the humanitarian community. In response to urgent requests from Western Mountains facilities for vaccines and morphine in late June/early July, International Medical Corps was also able to quickly obtain 500 ampoules of Fentanyl (synthetic morphine) and 1,500 doses of vaccines and enable fast delivery of these urgently needed supplies to hospitals and the Zintan vaccination center. The delivery of needed supplies in the Western Mountains, as well as the Tunisian border area, formed a major response effort in the region, with International Medical Corps delivering more than 10 tonnes of medicines, medical supplies, medical equipment and relief items.

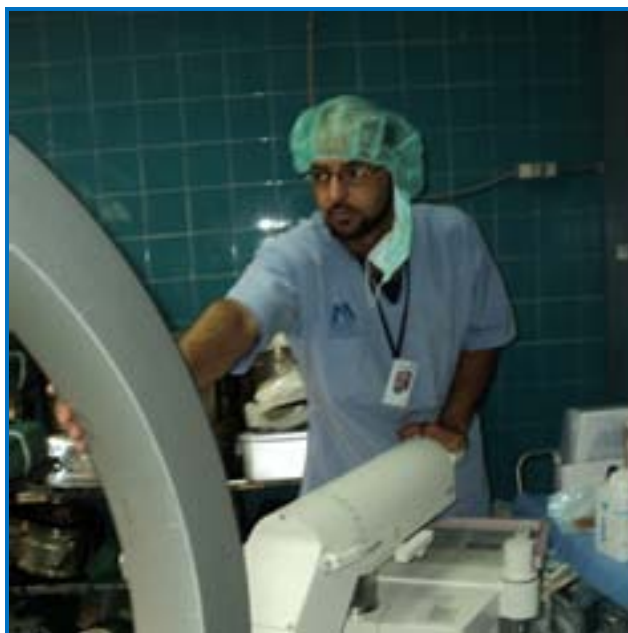
While care needed for conflict casualties has recently decreased in the Western Mountains, general medical and maternal health consultations have increased as people return to their homes. To provide assistance as the region recovers and begins to rebuild, International Medical Corps is continuing to provide assistance to health facilities.

Frontline Ambulances

In response to significant escalation in the fighting in the Western Mountains, International Medical Corps launched frontline ambulance services in July. Two ambulances were fully outfitted with lifesaving equipment and staffed with two doctors and two nurses to provide vital medical care to frontline casualties. Based out of Nalut and Yefren, the frontline ambulances provided medical evacuations along the al-Ghazaya and Tiji areas and the frontlines near Bir Ayyad and Al Qawalish.

As the fighting progressed, ambulance services also stretched as far as Gharyan to the east, and Bir Al Ghanem and Az Zawiya to the north. With the increased distance between frontline locations and receiving hospitals, International Medical Corps frontline ambulances filled a vital gap in stabilizing injured casualties. Due to the heavy fighting, there were periods when hospitals reported being at full capacity, requiring some casualties to be transported through to Tunisia to receive care.

During July and August, International Medical Corps frontline ambulances were highlight utilized, transporting approximately 116 rebel and Gaddafi force casualties through to medical facilities.



Tripoli

As rebels commenced their push into Tripoli International Medical Corps immediately responded to needs in the Libyan Capital.

International Medical Corps' major achievements in Tripoli:

- Surgeons and nurses on-the-ground within 24 hours of the outbreak of conflict within the city.
- Trained more than 200 frontline medics on first aid.
- Provided assistance to re-open the Mitiga and Al Khadra hospitals to begin providing care to casualties.
- Provided medical evacuations.
- Delivered 3 trucks of needed medicines and medical supplies within 48 hours of the outbreak of conflict.

Following the rebels offensive into Tripoli on August 21, an International Medical Corps team composed of relief experts, orthopedic surgeons, trauma surgeons, anesthesiologists, emergency physicians and nurses arrived on the ground less than 24 hours later. On route, trainings for more than 200 frontline medics on first aid were conducted, demonstrating International Medical Corps' focus on training even in the midst of emergency response efforts.

When the team first arrived in Tripoli on August 22, no hospitals were operating, only small clinics in people's homes, schools and mosques. International Medical Corps immediately began providing care to casualties at the Mitiga hospital to receive patients and commence surgeries. The medical team worked 72 hours straight to provide care and clear some of the patient backlog as well as reorganize the hospital and ER teams, open up a new ER section, support hospital management and separate pro-Gaddafi and rebel fighter casualties and ensure that all were treated equally.

Just 24 hours later, the first humanitarian supplies were delivered into Tripoli by International Medical Corps teams, with three trucks of needed medicines and medical supplies distributed to hospitals. Teams also helped to ensure the distribution of available supplies between hospitals, advocated for urgent needs such as external fixators and then supported correct distribution to enable surgeries to commence immediately. With oxygen generally in short supply in Tripoli, International Medical Corps also worked to refill oxygen cylinders from Misurata while the factory was not operational.



Al Khadra Hospital Emergency Department Struck by Missile



An International Medical Corps ambulance provided care to casualties of the fighting for Gaddafi's Bab al-Azizyah compound.

During this time, International Medical Corps also provided assistance to re-open the Al Khadra hospital and provided support for staffing and supplies in partnership with Libyan Volunteer Doctors. Support was also provided to a medical outpost in Bab al-Aziziya operated by Libyan volunteers through provision of medical supplies and some equipment. In addition, an ambulance was provided and a second was equipped to provide transfers of patients from frontline locations. A small clinic for dressing changes was also opened in Souq al Jomah, where combatants were located and

assessments to advocate the urgent needs major hospitals, as well as morgues and a prison clinic were conducted.

As the city recovers and rebuilds, International Medical Corps is continuing to provide support to hospitals in Tripoli, including staffing, management, training and supply support. Mental Health and Psychosocial Support (MHPSS) and Gender Based Violence (GBV) assessments have also been undertaken, with International Medical Corps teams focusing on training needs and the integration of mental health services into primary health care services.



Clinical Management of Rape Survivors in collaboration with the Libyan Center for Disease Control in Tripoli

Sirte, Bani Walid & Sabha

As the conflict continued in pockets of Libya, International Medical Corps has been continuing in response activities. Heavy fighting in the towns of Sirte, Bani Walid and Sabha has not only inflicted a high number of casualties, but also imposed difficult conditions on civilian populations, including shortages in food, water and medical care and large numbers of people fleeing these towns. In response, International Medical Corps has been providing needed staffing, emergency medicines and medical supplies, technical assistance and logistical support to a number of facilities in the affected regions.



At the Ibn Sina hospital, the largest facility in Sirte, International Medical Corps provided assistance to resume operations in the intensive care unit, emergency room and operation theatre departments. At the Sirte 50km location (outside of Sirte), International Medical Corps has been working with Libyan volunteer doctors at the field hospital to provide lifesaving care to those injured in the conflict and providing care at the clinic for fleeing civilians.

On the front-lines, we have been assisting with medevac operations by ambulance to medical facilities in Sirte or, for the most critical patients, by helicopter to Misurata. Furthermore, International Medical Corps has also provided necessary medicines, supplies and equipment for nine Misurata Ambulance Service frontline ambulances servicing Sirte and Bani Walid locations, ensuring the timely transfer of war casualties from the frontlines.

At IDP settlement locations being newly established outside of Sirte and Bani Walid, International Medical Corps has a mobile medical team providing medical care to these populations. In addition, International Medical Corps has also been coordinating with other humanitarian actors to provide conflict-affected communities with clean water, food, hygiene kits, and shelter.

While in Sabha, in the south of Libya, International Medical Corps has deployed staff and medical supplies to the Sabha Central Hospital in response to significant staffing shortages, a lack of critical supplies and operational limitations. This support is greatly aiding hospital functioning.

Future Response Efforts: From Relief to Self-Reliance

In addition to proven emergency response experience with demonstrated success in saving lives, International Medical Corps has extensive experience in recovery and re-building efforts, including technical assistance, training and implementation of programs which directly contribute towards bringing a country towards self-reliance. In Libya, International Medical Corps plans to continue working closely with the newly formed MoH to support their aims and objectives as the country recovers and strives to strengthen health care for all Libyans.

Rebuilding Health Systems

With significant experience and capacity for rebuilding disrupted health systems, International Medical Corps offers expertise, tools and country-specific models for health authorities to chart a course and begin to implement activities to rebuild Libya's healthcare systems over the long-term. Integral to these efforts, are education, training and technical assistance to provide guidance for a systemic approach to health care and rebuilding disrupted health infrastructure.

Technical Assistance

In rebuilding the post-conflict Libyan health system and adapting to the inherent changes and challenges that arise, International Medical Corps stands ready to provide health authorities with technical support on best practices in establishing well-functioning health systems, adapted to the Libya context. Over the past months, International Medical Corps has seconded an advisor to the MoH and will build upon this collaboration for future health system needs.

Strengthening Primary Health Care

In leveraging its experience in rebuilding disrupted health care systems in many countries around the world, International Medical Corps has the expertise to assist the MoH to formulate and implement a coordinated and coherent effort to enhance basic PHC in Libya. Strengthening PHC services will optimize universal access to care in both rural and urban settings and strengthen both preventative and curative health services. Based on International Medical Corps experience in providing and

assessment of PHC services in Libya, focus areas of services to include: community and family medicine, maternal/women's health, pediatrics, prevention and treatment of chronic diseases. Support will also be required for secondary healthcare to ensure that PHC facilities are integrated with and support primary care.

Continuing Medical Education and Professional Development

To equip healthcare staff with enhanced skills, continuing medical education (CME) and continuing professional development (CPD) programs will be of paramount importance in strengthening the Libyan healthcare system. International Medical Corps has implemented CME and CPD programs across numerous post-emergency countries, with demonstrated successes in establishing effective accreditation programs. In Libya, particular focus areas for CME and CPD include nursing, primary care providers and clinical psychology and social work. Due to the significant shortages of nurses, longer term training programs will be needed to provide Libyans with the education, training and skills to become nurses. However, until nursing programs can be implemented and begin to generate graduate nurses, nursing support will be needed in the interim to address these critical shortages.



Chronic Diseases

While the emergency situation has recently dominated health care demands, chronic diseases such as diabetes, cardio-vascular disease, hypertension and chronic lung disease account for significant mortality and morbidity in Libya. To meet the significant burden that these diseases have on the health system, resources will need to be directed toward the care of chronic diseases, including for both treatment and preventative care. International Medical Corps stands ready to work to address medical supply needs as well as the training of staff in the management of chronic diseases to assist staff in the transition.

Emergency Medical Care Development

To improve access to quality emergency medical care for the local population, International Medical Corps undertakes a system-wide approach to strengthening emergency care. Through International Medical Corps' long history of strengthening health systems in challenging environments, in addition to its established relationships with international emergency medicine experts and partnering organizations, International Medical Corps has developed an Emergency Medical Care Development (EMCD) program that utilizes a tested package of interventions aimed at building and strengthening emergency trauma and medical care in various settings. Spanning the bystander, pre-hospital, and hospital settings, the EMCD program aims to improve a country's or region's emergency medical

care, and elevate it to international standards via a tested combination of technical assistance, training, and capacity building.

Rehabilitation Services

The conflict in Libya has resulted in large numbers of people who have been wounded, often with severe, life-altering wounds including amputations and head wounds, in addition to psychological wounds as profound as the physical. International Medical Corps is committed to relieving the pain and suffering of those who have been affected, already commencing rehabilitative services in Benghazi. In efforts to expand these services to those in need across Libya, International Medical Corps is working to rebuild and strengthen rehabilitation services that will be community-based, holistic, and comprehensive, addressing the physical and psychological trauma that the war has inflicted on the Libyan people. True to International Medical Corps' mission from relief to self-reliance, rehabilitation activities will include training components to train staff in advanced skills of rehabilitative care for war-wounded patients.



Women and Children

In conflict and post-conflict environments, women and children are especially vulnerable. International Medical Corps prioritizes the needs of women and children through the provision of maternal and child health services - such as the integrated management of childhood illnesses (IMCI) - as well as psychosocial support and protection needs. Training, education and awareness programs empower the local community and strengthen local capacity to address the needs and issues that women and children in Libya will face in recovering from the current crisis gripping the country.

Mental Health Care and Psychosocial Support

War exacts a toll on the population that does not end when the active conflict ceases. The provision of psychosocial support and mental health care has been identified as an important need for those affected by the conflict in Libya. International Medical Corps is working to address this need with ongoing training of staff involved in providing this care and through the development of support programs. In particular, International Medical Corps prioritizes the integration of mental health services into PHC as a way of improving access and reducing stigma associated with mental health care. At all levels, International Medical Corps aims to incorporate its extensive experience in programming for protection, gender-based violence, and community-based psychosocial support into emergency, primary, secondary and tertiary care programs across Libya.

International Medical Corps' Mission:

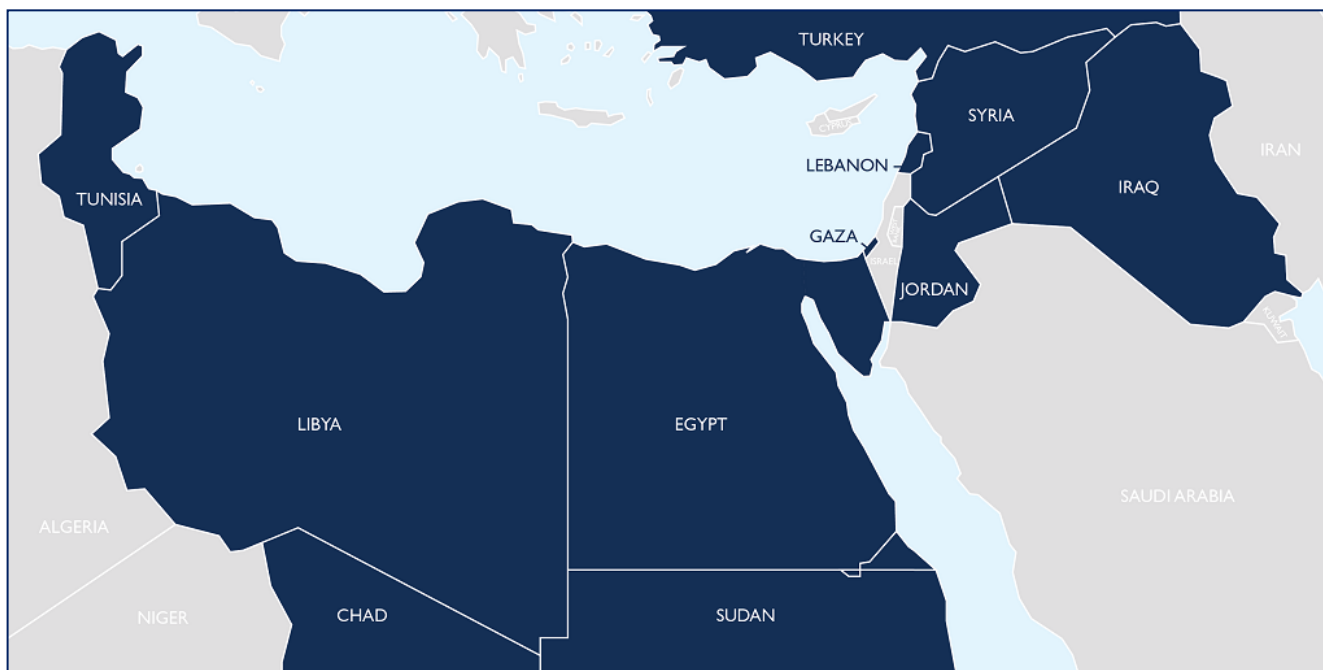
From Relief to Self-Reliance

International Medical Corps is a global, humanitarian, nonprofit organization dedicated to saving lives and relieving suffering through health care training and relief and development programs. Established in 1984 by volunteer doctors and nurses, International Medical Corps is a private, voluntary, nonpolitical, nonsectarian organization. Its mission is to improve the quality of life through health interventions and related activities that build local capacity in underserved communities worldwide. By offering training and health care to local populations and medical assistance to people at highest risk, and with the flexibility to respond rapidly to emergency situations, International Medical Corps rehabilitates devastated health care systems and helps bring them back to self-reliance.

International Medical Corps in the Middle East

International Medical Corps began operations in the Middle East in 2003, as one of the first international NGOs to enter Iraq following the start of war. Since then, International Medical Corps has expanded its presence in the region, implementing programs in Syria, Lebanon, Jordan, Gaza and now recently in Libya, Egypt and Tunisia in North Africa. Within the region, International Medical Corps has implemented numerous programs with demonstrated success and long-lasting results that range from humanitarian relief, to community development and government capacity building including:

- **Health, Mental Health & Protection Services**
- **Emergency Medicine Development**
- **Continuing Medical Education**
- **Community Development**
- **Women and Youth Empowerment**
- **Early Childhood Development**
- **Health Systems Strengthening Programs**
- **Water, Sanitation and Hygiene**



International Medical Corps Globally

International Medical Corps has delivered lifesaving care in more than 65 countries worldwide, responding to nearly every emergency in the last two decades including famine in Somalia, ethnic cleansing in Bosnia, the Rwandan genocide, and atrocities against children in Sierra Leone. More recently, International Medical Corps was a first responder after the 2004 tsunami in southeast Asia, the 2005 earthquake in Pakistan, the 2010 Haiti earthquake, the 2011 conflict in Libya, the 2011 disaster in Japan and is among the dwindling number of humanitarian agencies still working in Darfur and Iraq. Current operations extend across more than 30 countries worldwide.



www.InternationalMedicalCorps.org

