

UNICEF intensified inclusive mental health and psychosocial support services (MHPSS) to girls, boys, and caregivers through mobile teams at eastern Libya in response to Daniel Storm and Floods



Humanitarian **Situation** Report No. 7

Reporting Period 1st to 30th of November-2023

Libya Storm Daniel & Flooding

HIGHLIGHTS

- •In the reporting period, UNICEF's Medical Mobile Teams provided essential health services to 2,094 children and accumulatively to 4,678 individuals since the beginning of the crisis.
- •Since the onset of the crisis UNICEF provided 5.5 million liters of safe water to 18,843 people and supported the rehabilitation of 10 boreholes in 3 flood affected municipalities.
- •UNICEF-supported 16 mobile teams provided Mental Health and Psychosocial Support (MHPSS) to 2,606 children in November alone.
- •Since the onset of the crisis, UNICEF supported cleaning and furnishing of 11 schools in Al Bayda and Shahat and furnishing of 3 schools in Al Qoba helping a total of 8,682 children to return to school.
- •During the reporting period, UNICEF in collaboration with the NCDC, launched Phase 2 of the "Safe Water: Healthy Lives" campaign, reaching 29,637 people with awareness messages on provision of safe water and prevention measures¹

SITUATION IN NUMBERS



100,000 Children in need of humanitarian assistance

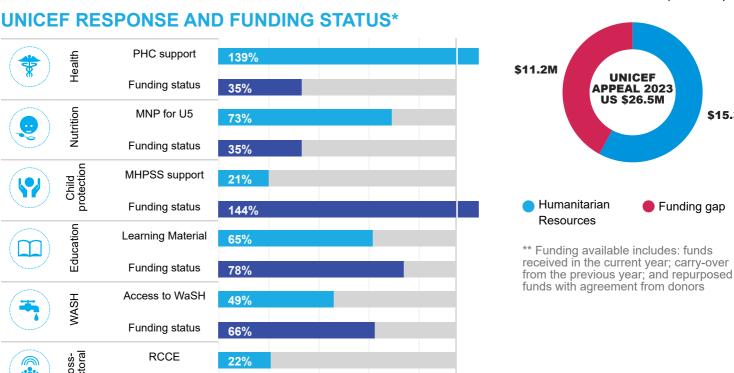


250,000 People in need of humanitarian assistance



44,862 People displaced due to the floods

FUNDING STATUS (IN US\$)**



^{*} UNICEF response % is only for the indicator, the funding status is for the entire sector.

Funding status

\$15.3M

FUNDING OVERVIEW AND PARTNERSHIPS

As the extent of the damage caused by Storm Daniel becomes clearer, more significant needs relating to the destruction of basic health, water, education, and child protection infrastructure are expected to emerge. UNICEF's initial response required US\$ 6.5 million to reach children with emergency services and supplies. UNICEF has now developed a revised appeal encompassing both humanitarian and recovery response for US\$ 26.5 million. UNICEF raised so far US\$ 15.3 million.

UNICEF humanitarian and recovery response efforts since the onset of the crisis were made possible with generous support from the African Development Bank (AFDB), Canada, Central Emergency Response Fund (CERF), the Czech Republic, Education Cannot Wait, The European Civil Protection and Humanitarian Aid Operations (ECHO), the German Agency for International Cooperation (GIZ), Italy, Japan, Norway, Spain, Switzerland, the United Kingdom, the United States of America and the UNICEF National Committees.

UNICEF is working closely with local authorities and institutes, International non-governmental Organizations (INGOs) and Local Civil Society Organizations (CSOs) to fulfill core commitments for children in humanitarian action in Libya, in additional to multiple government institutes, this also includes 4 local CSOs partners and 5 International partners.

SITUATION OVERVIEW AND HUMANITARIAN NEEDS

The situation in Eastern Libya remains challenging eleven weeks after Storm Daniel and flash floods hit the area, with children being the most impacted and vulnerable. While the number of casualties and missing people remain unchanged with 4,352 people dead and more than 8,000 people missing², the International Organization for Migration's latest Displacement Tracking Matrix (DTM) reports 44,862 Internally Displaced Persons (IDPs)³. Of these, an estimated 40 per cent are children living in unstable conditions, causing protection risks and increasing vulnerabilities. Nearly all (93 per cent) of displaced people remain in eastern municipalities, less than 5 percent of IDPs (640 individuals) remain in 7 collective centers across affected eastern municipalities with inadequate living conditions⁴.

The impact of flooding on the healthcare system and infrastructure remains significant, with the World Health Organization (WHO) reporting 84 per cent of hospitals and 88 per cent of Primary Healthcare facilities (PHC) being non-functional or only partially functional in the eastern region 5. This puts children at a particularly vulnerable position. Despite UNICEF's Water, Sanitation and Hygiene's (WASH) immediate response through water trucking and delivery of safe drinking water, in addition to initiation of boreholes maintenance, the damage to the water infrastructure remains significant and still needs extensive long-term reconstruction support. The impact on water quality led to a recorded nearly 10,000 cases of diarrheal diseases since the beginning of the floods 6.

Housing continues to be a critical issue, particularly in Derna. Since many houses near the destructed Derna dams are either completely destroyed or severely damaged, the affected community is increasingly requesting cash assistance for rental expenses, in addition to a growing need for specific building materials, including doors, door frames, roofing materials, and safety essentials such as windows and electrical wiring⁷. Additionally, there is an immediate

requirement for non-food items (NFIs) related to shelter and winterization. Essential items encompass bedding, mattresses, sleeping bags, blankets, and clothing. Furthermore, there is a pressing need for cooking utilities and materials to clear debris and mud from homes that do not require rehabilitation, children are specially impacted by distortion of normalcy and familiar environment, which mandates support to social services that can support children and families coping capacities.

Although most schools in Derna and the affected areas have reopened and resumed activities, 9 schools in Derna, serving an estimated 4500 children remain closed. Those schools which have reopened still face high levels of overcrowding, as they have absorbed the IDP students and student populations from closed schools, the average class size for operational schools in Derna post floods crisis increased, ranging between 45 to 60 students per class. Despite the progress UNICEF and other humanitarian partners made in terms of providing the affected people and children with Mental Health and Psychosocial Support (MHPSS) services, particularly to IDPs, there is still a need for further support, as the national MHPSS hotline has been receiving calls from flood affected people expressing concerns that include overwhelming stress, persistent low moods, disrupted sleep patterns, heightened stress levels, and increased anxiety, largely attributed to the ongoing uncertainty around recovery from this disaster⁸.

UNICEF Child Protection team and partners conducted a postemergency Child Protection assessment. Assessment shows that an estimated 67 per cent of children have negative behavioral changes since the floods. 48 per cent of children are in critical need of continuous MHPSS, with the most affected at-risk groups being boys between age 5-12 years and adolescent girls aged 12-17 years, as well as girls under 5 years. Access to first line MHPSS services remains to be challenging due to limited availability of basic MHPSS service providing sites and gaps related to capacities of service providers in affected areas⁹.

SUMMARY ANALYSIS OF PROGRAMME RESPONSE

Health and nutrition

UNICEF continued to coordinate closely with local and central health authorities and partners to ensure that primary health services are available and accessible. In this regard, UNICEF in close coordination with the authorities started focusing more on recovery activities where the priorities are increasingly on health facilities rehabilitation, health care staff capacity building, procuring medical equipment and technical support to health workers in PHC facilities, while working towards gradual phasing out of the medical mobile teams (MMTs).

During the reporting period, UNICEF, in coordination with health authorities, finalized the detailed assessment of 13 primary health facilities and started the tendering process for their rehabilitation. UNICEF also continued to support 5 MMTs to bridge the human resources gap and ensure the provision of reproductive, maternal, child health, nutrition and MHPSS services: 2 MMTs are deployed to two facilities in Derna, and 3 MMTs were deployed to health facilities in Albayda, Soussa and Shahat. During the month of November, the teams provided childhood and neonatal consultations reaching 2,094 children (946 girls, 1,148 boys) with 961 consultations (458 girls, 503 boys) being provided to children under five, reproductive health consultations reaching 1,137 women, and MHPSS consultations reaching 69 adults and 55 children and adolescents. Cumulatively, since the start of the emergency response, MMTs have reached 4,678 people (2,852 females and 1,826 males) with essential care as

well as lifesaving medical assistance.

During the reporting period, UNICEF continued capacity building activities for health staff as part of the exit strategy for the MMTs where 68 female health staff from Om Arrazam and Jardas Alabeed municipalities participated in Infection prevention and control (IPC), medical waste management, basic nursing skills, and Basic Life Support (BLS) training sessions, which brings the total Health Care Workers (HCWs) who benefited from the training to 183 (166 females and 17 males).

Moreover, during the month of November, UNICEF distributed another package of Inter Agency Emergency Health Kits (IEHK) and Obstetric Surgical kits to 13 health facilities in Derna, Jardas Alabeed, Benghazi, Soussa, Shahat, Labraq, and Alsahel, which are able to cover 150,000 people for three months. This brings the population who could benefit from UNICEF medical supplies during floods crisis to 240,000 people for three months, based on technical specifications of estimated reach for provided health supplies packages.

Earlier, and during the month of October, UNICEF ensured the operationalization of four prefab trailers installed in Derna, Almkhili and Albayada health facilities to be utilized as temporary clinics.

In terms of Nutrition response, the Medical Mobile Teams (MMTs), working in coordination with Primary Health Care Institute (PHCI) and local East health authorities with support of UNICEF, played a vital role in identifying and addressing malnutrition among children in flood affected areas. Through nutrition screening efforts, appropriate management, referral and educational interventions, nutritional status and overall well-being of both children and mothers in the community are improved through active engagement and provision of essential nutrition services and interventions.

Since the beginning of the crisis, 4,158 children (2,236 boys and 1,922 girls) underwent malnutrition screening. Out of the screened children, 1366 children were identified to have some form of malnutrition, among these cases 54 children were classified to have Moderate Acute Malnutrition (MAM) comprising a prevalence of 1.2%, while 33 children were classified to have Severe Acute Malnutrition (SAM) comprising a prevalence of 0.8%, All children diagnosed with malnutrition, especially MAM and SAM cases were provided with nutritional management, including referral when needed, distribution of Ready to Use Therapeutic Food (RUTF), which are specially formulated nutritional supplements designed to provide essential nutrients and calories as well as provision of micronutrients, which are crucial vitamins and minerals needed for healthy growth and development.

In addition, MMTs extended their capacity to provide nutritional services to mothers. Since the beginning of crisis, the teams conducted screening for 1,568 mothers to identify any nutritional concerns, none of the mothers screened were classified to be under MAM or SAM categories.

Furthermore, since the onset of the crisis, the team provided nutritional guidance and support to 1,285 pregnant and lactating women on integrated Infant and Young Child Feeding (IYCF) practices.

Water, sanitation and hygiene

UNICEF's WASH interventions witnessed some significant achievements in providing support right after Storm Daniel and Flash Floods. Through its partners, UNICEF contributed to the reactivation and rehabilitation of water infrastructure in areas affected by storms and flooding. For instance, as part of its earlier response since the beginning of the crisis, UNICEF had reactivated a water truck loading point at the Sousa desalination plant and rehabilitated a water filling point at the Derna desalination plant.

Since mid-September UNICEF delivered 5.5 million litres of safe water in Derna, Sousa, Shahat, and Albayda through water trucking, benefiting 18,843 people for 45 days. In terms of infrastructure support, and during the reporting period, UNICEF completed the rehabilitation of ten boreholes in most flood affected areas, including four boreholes in Derna, four boreholes in Albayda and two boreholes in Shahat. Within the same context, UNICEF is working towards rehabilitating of an additional six boreholes in Albayda during the month of December. Overall, boreholes maintained with support of UNICEF are estimated to benefit approximately 50,000 residents in Derna, Shahat, and Albayda, improving their access to a reliable water supply.

During the month of November UNICEF concluded the four rounds of water quality monitoring training, which build the capacity for 60 technicians since the beginning of crisis response, technicians are from the General Company of Water and Wastewater (GCWW), Man-Made River Project (MMRP), National center of Disease Control (NCDC), and the General Desalination Company (GDC), thereby enhancing their capacities to conduct water sources surveillance. UNICEF had provided GCWW with 2.5 tons of water treatment materials since the beginning of the crisis able to treat 400,000 litres of water per day for a period of 3 months. Since the start of floods response, UNICEF provided 400,000 water purification tablets to its implementing partners to be distributed in areas with high reports of Acute Diarrhea cases.

In East Derna, during the month of November, UNICEF and its partners continued to actively work towards establishing safe water points, including two water treatment units: a 12,000-litre/day water treatment unit at Al-Ghufran Mosque in the Bab Tobruk area and a 12,000 litre/day water treatment unit at Al Miqdad Mosque in Al Fatiah area, providing a reliable source of safe water to benefit up to 10,000 residents in Derna the work on both sites is expected to be completed in the first week of December.

In Qandula, during the reporting period, UNICEF supported the city's water supply system by rehabilitating a 600-meter water main pipeline, connecting the central groundwater tank with the elevated tank and installing of a booster pump, which was successfully completed. These rehabilitation efforts not only improved access to safe drinking water for 96 per cent of the city's residents but also involved the disinfection of two main water tanks, further ensuring the quality of the water supply. UNICEF has also extended support to the maintenance technicians of the GCWW in Derna by providing them with the necessary tools and equipment. This assistance enhances their capacity to carry out essential repairs and maintenance work.

Moreover, since the beginning of the crisis and as part of delivering critical WASH supplies, UNICEF distributed family hygiene kits to 53,730 people in flood affected areas, family hygiene kits composition ensures meeting the basic hygiene needs for different needs including Menstrual Health and Hygiene (MHH) needs of adolescent girls and women.

Child protection, GBViE and PSEA

As a result of the identified needs for child protection services following the recent child protection assessment, UNICEF deployed 16 mobile teams in affected areas and scaled up its MHPSS interventions for communities (girls, boys, women, and men). During the reporting period, 2,606 children (1,469 girls, 1,138 boys) were reached with MHPSS activities through mobile response teams in affected areas. These activities include Psychological Fist aid (PFA) and recreational activities that significantly contribute to children's recovery after traumatic events of the floods. PFA provided immediate emotional support, helping children process the shock and distress developed. It also fosters resilience by offering a safe

space to express feelings and regain a sense of control and self-awareness of the child engaged in activity. Recreational activities further aid in healing, as they enable children to engage in positive, enjoyable experiences, promoting emotional well-being, and help restore a sense of normalcy, build social connections, and alleviate anxiety. Since the beginning of the crisis, UNICEF and partners reached 8,109 children and 300 adults with MHPSS activities.

During November, 38 vulnerable children (13 girls, 25 boys) were provided with case management and referrals to healthcare and legal aid services. In addition, 58 women and 105 men participated in awareness sessions on parenting, which emphasized the significance of mental health, self-care, and seeking assistance when necessary. The sessions focus on enhancing adults' ability to manage their emotional well-being and provide guidance to caregivers in supporting their children through healing, promoting open communication, and understanding, creating a supportive environment where adults can rebuild their lives with increased emotional resilience, while also helping their children cope with trauma, ultimately contributing to the well-being of families and communities.

During November, UNICEF and its partners contributed to the capacity development of service providers and government institutions in the east through Training of Trainers (ToT) for 25 frontliners (19 women, 6 men) on overall child protection basics with a focus on essential aspects of mental health and self-care, providing a strong foundation for individuals involved in disaster response and humanitarian work. This (ToT) will cascade to around 1,000 social workers, teachers and health workers working in the field and in direct contact with children. Cumulatively since the beginning of the crisis, UNICEF, with partners, has trained 127 service providers on the essentials of child protection and MHPSS.

UNICEF has a "Policy on Conduct Promoting the Protection and Safeguarding of Children" (available here). UNICEF ensured all partners working since beginning of crisis to commit to Protection from Sexual Exploitation and Abuse (PSEA) policy upon Programme document signature and to ensure a functional and accessible child safeguarding mechanisms in place as part of the organizational capacity and risk assessment-including recruitment screening practices, reporting procedures, risk identification and management tools. UNICEF Libya's PSEA country level action plan focuses on prevention, response-including safe and accessible reporting, accountability, and investigations. Both PSEA and Child Safeguarding measures contribute to UNICEF's Accountability to Affected Populations (AAP) which is an active commitment by humanitarian actors to use power responsibly in relation to leadership, transparency, feedback and complaints, participation, and design, monitoring and evaluation. Gender Based Violence Risk Mitigation is also a focus throughout UNICEF Libya's Child protection programme implementations as part of the commitments UNICEF has on ensuring safe spaces for girls and women are in place, this includes ensuring safe access to WASH facilities and supporting continued enrollment in education programmes and access to reporting for girls and women affected by violence. Children, parents, and community members provided with Child protection services (including MHPSS And awareness sessions/ positive parenting sessions and Case management) have knowledge and access to protection from sexual exploitation and abuse reporting channels and mechanisms.

Education

UNICEF Libya's education programme framed its response to the crisis around supporting children to return to education in safe learning environments, minimizing the disruption to education, and providing professional and wellbeing support for teachers and educational staff.

In the immediate aftermath of the floods, and as a cumulative result for UNICEF education programme, UNICEF and its partners conducted a rapid mapping of infrastructural damage to education facilities in the affected areas, which informed both the immediate response and early recovery phase. Based on the results of this mapping, UNICEF coordinated with regional education authorities to identify schools with minimal structural damage that could be supported to reopen through cleaning and provision of furniture. UNICEF subsequently cleaned 11 schools in Al Bayda and Shahat, providing furniture for those and an additional 3 in Al Qoba, supportinga total of 8,682 children to return to school. In addition, 100 Early Childhood Education (ECE) kits were distributed in Derna, Sousa, Shahat and AlBayda since the beginning of the crisis, in coordination with the Ministry of Education (MoE), to support recreational activities across schools, reaching 5,000 children.

During the month of October, UNICEF established 10 temporary learning spaces for up to 300 students, using tents as a short-term measure to alleviate the issue of overcrowding. In parallel, since the start of floods response, UNICEF provided 200 school-in-box kits to 72 schools in Derna; each kit caters to 40 students and hence supported the swift re-establishment of learning environments for up to 8,000 students. Further support to mitigate the negative effects of displacement on education is planned through the provision of individual school bags for IDP children in Derna. Additional medium-term support is planned through the provision of prefab classrooms, and in the longer-term, through light rehabilitation of 4 schools in Derna and Al Bayda. These schools have been identified in coordination with the regional authorities, and an engineering assessment is ongoing.

Beyond access support, and as part of early recovery plans, UNICEF's response will include teacher training on child-centered pedagogies and classroom management for 500 teachers. In addition, in order to support teachers as they return to teaching children suffering from psychological distress, UNICEF is providing MHPSS and frontline worker wellbeing training for teachers. A cohort of 'Master Trainers' was trained and will cascade the training to 250 teachers in flood-affected areas. As part of its longer-term response, UNICEF is establishing the Learning Passport in Libya, an online platform tailored to meet the educational needs of Libyan children and ensuring continuous access to education. UNICEF is working with a committee of Inspectors and Curriculum Specialists from the MoE to populate the platform with suitable content and in tandem is preparing a sign-up campaign for the affected areas.

Cross-sectoral (HCT, C4D, RCCE and AAP)

In continuation of integration of social and behavioral change activities in response to humanitarian situation post Daniel storm, UNICEF in collaboration with the National Center for Disease Control (NCDC), launched Phase 2 of the "Safe Water: Healthy Lives" awareness campaign. The main aim of this campaign is responding to the rise in acute diarrhea and respiratory infectious diseases linked to contaminated water and prevailing humanitarian conditions post floods in Albayda, Derna, Benghazi, and nearby areas as well as providing information about positive behaviors and protective services available at flood affected areas. Phase 2 of the campaign aimed to increase knowledge about these diseases, their causes, symptoms, and methods of prevention, while encouraging health-seeking behaviors like immunization and good hygiene.

The campaign's design evolved from community feedback and precampaign assessments. Training in Risk Communication and Community Engagement (RCCE) was provided to frontline responders and healthcare workers. Religious leaders in nearly 100 mosques helped disseminate key messages to about 10,320 people during Friday prayers. In schools, 23 institutions engaged in awareness sessions, impacting 16,901 students and their families. Street-to-street sessions targeted labor workers, reaching 245 individuals, activities also targeted other various locations including gas stations, bakeries, barbershops, local shops and banks, reaching a total of 489 individuals, totaling 734 individuals. Health sector engagement involved awareness sessions at four health centers, reaching 210 individuals. Additionally, awareness corners at Benghazi Benina Airport, and various marketplaces contacted 584 individuals.

The campaign's educational materials were widespread, with 3,000 booklets and 1,000 flyers distributed, and 40 stands deployed. In addition to radio broadcasts and campaign materials on billboards, the messages of the campaign have been spread through various social media platforms utilizing local influencers. Notably, the campaign directly reached 29,637 people, including workers, religious leaders, and community members. Indirectly, it is estimated to have reached around 2,408,000 individuals through mass media. This extensive outreach marked a significant stride in raising awareness and promoting positive health behaviors in the wake of the Daniel storm crisis in eastern Libya.

As part of UNICEF's efforts to mainstream and strengthen Accountability to Affected Populations (AAP) in the emergency response, UNICEF in coordination with its partners, took several initiatives to ensure that people are consulted with, and are able to share their feedback through different channels across programs, including inquiring about services through the interagency Community Feedback Mechanism (CFM) focused on building the partner's capacity and knowledge of AAP, by training them on the fundamentals of AAP and how to integrate it into their work, to date, UNICEF conducted two rounds of training for implementing partners, including training a total of 20 participants, representing 10 humanitarian organizations.

UNICEF also worked on mainstreaming community feedback in the emergency response through field monitoring, by using post-distribution monitoring forms, to ensure collecting feedback from affected populations on the assistance provided by UNICEF, to ensure usefulness of package of assistance provided, and to receive suggestions on how to improve the supplies package.

HUMANITARIAN LEADERSHIP, COORDINATION AND STRATEGY

UNICEF leads the Nutrition, Education and Water, Sanitation and Hygiene (WASH) Working Groups, the Child Protection sub-WG and is an active member of Health, Cash and Early Recovery WGs.

During November 2023, The WASH Thematic Working Group (TWG) revised activities reporting mechanisms with participation of 15 WASH partners, Additionally, the Post Daniel storm east WASH response dashboard was launched on 15th November 2023. Wash Thematic Working Group organized two meetings on 23rd and 27th of November with the latter specifically dedicated to addressing urgent WASH issues in the Albayda municipality. These issues included the identification of contaminated boreholes and the challenges faced by partners in augmenting water-trucking capacity to the people in need. The TWG partners reached a consensus to hold its coordination meetings on a biweekly basis.

UNICEF continues to co-lead the Education TWG with the Norwegian Refugee Council (NRC). Recent efforts have focused on the coordination of distribution locations amongst partners providing individual kits for children in the East, support for partners in addressing access issues in flood-affected areas, and harmonization of the rehabilitation response in Derna. UNICEF is also providing coordination support for the upcoming REACH-led sector needs

assessment, which will begin in December with support from multiple sector partners. The assessment will provide an updated analysis of school infrastructural needs in the flood-affected areas with a breakdown of rehabilitation requirements, together with an assessment of the needs of teachers and social workers in schools.

UNICEF continues leading the Nutrition thematic working group, underscoring its commitment to addressing the nutritional challenges in the country. As part of its leadership role, UNICEF co-chairs the working group alongside the Ministry of Health, indicating a collaborative approach in tackling nutrition-related issues. Despite the efforts made by UNICEF and other stakeholders, the nutrition sector in Libya remains with limited activities and faces significant challenges including inadequate integration in essential health services package at PHC level, and gaps in knowledge about proper nutrition practices amongst health care providers.

To address these issues effectively, it is crucial to prioritize and give more attention to the nutrition sector. This entails placing a greater focus on developing and implementing comprehensive strategies and interventions that target improved nutrition outcomes for the emergency affected population.

HUMAN INTEREST STORIES AND EXTERNAL MEDIA



UNICEF deputy Representative for Programmes engaging with children at school sheltering IDPs in Derna

A firsthand account by Marie-Consolee Mukangendo , Deputy UNICEF Representative in Libya after a field mission to the epicenter of the crisis:

As I reached the area of Derna, the air was thick with a mix of hope and despair. The picturesque city, affectionately known as the "Jasmine City," had been ravaged by the unforgiving forces of nature.

One cannot speak of Derna without acknowledging the scale of devastation. Home to over 100,000 people, almost one-third of its infrastructure has been decimated. Essential facilities like hospitals are limping back to normalcy, relying heavily on generators.

I met children and families grappling with a high psychological burden including Heba, a 15-year-old girl hosted with her family in one of the shelters where UNICEF is providing Psychosocial services to the survivors through recreational and counseling activities amongst other support. She was in extreme distress, had not been able to sleep for days and was struggling to interact and play.

She explained how she woke up in the middle of the night with water

reaching up to her neck in her room located at a fourth floor of a building and how she struggled with her siblings to reach the roof for safety. A beacon of hope, she was just grateful to be alive and only wished to go back to school soon."

Despite the horrors, I'm glad I was able to witness the best of humanity response of the Libyans and international community to rescue and aid the affected populations. The ravaged streets of Derna, Albayda echoed tales of massive destruction, but human resilience still prevailed.

World Children's Day: In commemoration of World Children's Day, UNICEF Libya placed a special emphasis on the plight of children in Derna, who were disproportionately affected by Storm Daniel. UNICEF conducted two events for World Children's Day; one in Derna and another in Tripoli to reflect on the challenges and rights of children in Libya with special featured inspirational stories from Derna.

UNICEF published its monthly newsletter Issue #15 with substantive coverage and updates on response in the East affected by Storm Danie

- Human Interest Story First Hand Encounter
 https://english.elpais.com/opinion/2023-10-10/libya-faces-the-aftermath-of-an-unprecedented-catastrophe.html
- Social Media engagements, reminder to children rights on World Children Day https://twitter.com/UnicefLibya/status/1726548297299669
 016
- UNICEF Libya November Filed Mission to Derna https://twitter.com/UnicefLibya/status/1726344450744717

 520
- Community-based MHPSS services through mobile teams supported by UNICEF https://www.facebook.com/unicef.libya/posts/7159682838 94570
- UNICEF Newsletter for October.2023 https://mailchi.mp/459eedbbe2e0/test-wcow4yvhyq-13563857
- UNICEF Libya Representative's message from Derna on World children's day https://twitter.com/UnicefLibya/status/1726512150204874811?s=20

HAC APPEALS AND SITREPS

- Libya Appeals
 https://www.unicef.org/appeals/libya
- Libya Situation Reports https://www.unicef.org/appeals/libya/situation-reports
- All Humanitarian Action for Children Appeals https://www.unicef.org/appeals
- All Situation Reports https://www.unicef.org/appeals/situation-reports

NEXT SITREP: JANUARY.2024

ANNEX A - PROGRAMME RESULTS

Consolidated Programme Results

Sector	UNICEF and IPs response				
Indicator	Disaggregation	Total needs	2023 targets	Total results	Progress*
Health					
Children and women accessing primary healthcare in UNICEF- supported facilities ¹⁰	Total	-	207,456	288,085	~ 74%
Nutrition					
Primary caregivers of children 0-23 months receiving infant and young child feeding counselling ¹¹	Total	-	39,338	1,869	▲ 1%
Children 6-59 months receiving micronutrient powder	Total	-	26,520	19,420	▲ 6%
Pregnant women receiving preventative iron supplementation	Total	-	52,500	17,600	▲ 1%
Child protection, GBViE and PSEA					
Children, adolescents and caregivers accessing community-based mental health and psychosocial support 12	Total	40,000	40,000	8,409	^ 7%
Education					
Children accessing formal or non-formal education, including early learning	Total	-	50,000	8,682	▲ 5%
Children receiving individual learning materials	Total	-	20,000	13,000	0%
Water, sanitation and hygiene					
People accessing a sufficient quantity and quality of water for drinking and domestic needs	Total	-	175,000	85,000	▲ 6%
People reached with hand-washing behaviour-change programmes	Total	-	10,000	6,584	▲ 6%
People reached with critical WASH supplies	Total	-	175,000	85,000	^ 6%
Cross-sectoral (HCT, C4D, RCCE and AAP)					
People reached through messaging on prevention and access to services	Total	-	250,000	54,791	▲ 10%

^{*}Progress in the reporting period 1st to 30th of November-2023

ANNEX B — FUNDING STATUS

Consolidated funding by sector

		Funding available			Funding gap	
Sector	Requirements	Humanitarian resources received in 2023	Other resources used in 2023	Resources available from 2022 (carry over)	Funding gap (US\$)	Funding gap (%)
Health and Nutrition	7,500,000	2,649,716	-	-	4,850,284	65%
Child protection, GBViE and PSEA	3,000,000	4,325,634	-	-	-	0%
Education	3,000,000	2,354,177	-	-	645,823	22%
Water, sanitation and hygiene	9,000,000	5,927,813	-	-	3,072,187	34%
Social protection	3,500,000	44,696	-	-	3,455,304	99%
Cross-sectoral: PSEA, AAP, SBC, Evaluation and RRM	500,000	32,363	-	-	467,637	94%
Total	26,500,000	15,334,399	0	0	11,165,601	42%

^{*}repurposed other resources with agreement from donors

ENDNOTES

- 1. Data on provision of services provided with support of UNICEF reported as total number of people/ individuals with no further disaggregation based on age and sex due to challenges related to data reporting from UNICEF partners responding to emergency, partners are still familiarizing themselves with reporting tools and platforms including e-tools and activity info, all gaps in data reporting are expected to be bridged before end of the year through direct capacity building to partners and through allocation of dedicated reporting officers
- 2. Based on: OCHA -Libya Flood Response Humanitarian Update (as of 28 November 2023)
- 3. IOM Libya Impact of Storm Daniel, An Update on displacement and needs following the floods in North Eastern Libya- November 2023
- 4. Based on: OCHA -Libya Flood Response Humanitarian Update (as of 14 November 2023)
- 5. World Health Organization (WHO)-Libya, Situation Report, Libya Flood Response, 11.October.2023
- 6. Libya National Center of Disease Control(NCDC) Report No.70 on epidemiological situation at eastern of Libya, 30 November 2023
- Based on: IFRC Secondary Data Analysis Report, Storm Daniel, Eastern Libya, 20. November. 2023
- 8. International Medical Corps (IMC)- Libya, Libya Flooding: Situation Report #9 (November 21, 2023)
- 9. Post Emergency Questionnaire For Child Protection Dashboard, November.2023 Link: https://app.powerbi.com/view?r=eyJrljoiODlkZWlwZTUtYzVjOC00MjNkLWlzM2UtZTMwZTcyYjNhNDhiliwidCl6ljc3NDEwMTk1LTE0ZTEtNGZiOC05MDRiLWFiMTg5MjAyM:
- 10. This result is to be broken down as follows: 1). 6,585 people reached through medical consultations and screening. 2). 250,000 people covered for three months through medical supplies distributed to health facilities. 3). 31,500 people assisted through improved access to health care through installation of prefab trailers.
- 11. IYCF counseling and other nutrition activities reach is limited due to challenges related to reporting of nutrition activities by IYCF/Nutrition focal points from MOH trained by UNICEF, as simple tools like google forms are being used in inconsistent manner instead of utilization of DHIS.2 endorsed by Health Information Center (HIC), UNICEF Health and Nutrition team is following up closely with HIC and DHOs to improve health and nutrition data reporting.
- 12. Progress in providing Mental Health and Psychosocial Support assistance is still limited, due to bureaucratic access impediments, affecting operationality of implementing partners, UNICEF is advocating with authorities to promote humanitarian access and progress in providing MHPSS services is expected to improve in the upcoming months.