



# OPERATION UPDATE

## Libya, MENA | Storm Daniel

<b>Emergency appeal No:</b> MDRLY005 <b>Emergency appeal launched:</b> 13/09/2023 <b>Operational Strategy published:</b> 30/11/2023	<b>Glide No:</b> <b>FL-2023-000168-LBY</b>
<b>Operation Update #2</b> <b>Date of issue:</b> 4/11/2024	<b>Timeframe covered by this update:</b> From 13/09/2023 to 13/09/2024
<b>Operation timeframe:</b> 15 months (13/09/2023 - 31/12/2024)	<b>Number of people being assisted:</b> 200,000
<b>Funding requirements (CHF):</b> CHF 20 million through the IFRC Emergency Appeal CHF 25 million Federation-wide	<b>DREF amount initially allocated:</b> CHF 1 million

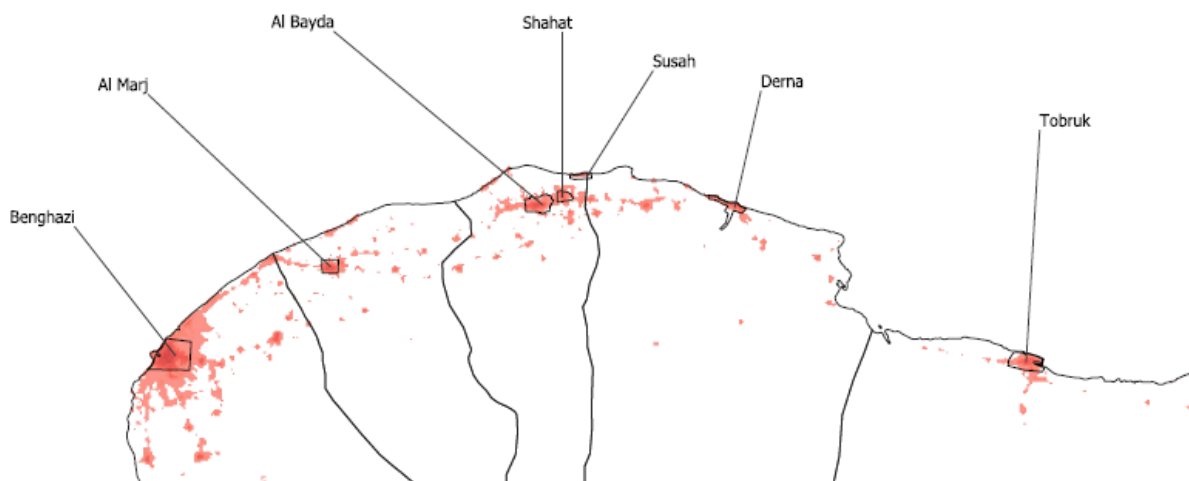


*To date, the revised Emergency Appeal, which seeks CHF 20,000,000 is 57 per cent funded. Further funding contributions are needed to enable the Libyan Red Crescent Society (LRCs), with the support of the IFRC, to continue providing humanitarian assistance and provide an integrated recovery approach to the affected population*

## A. SITUATION ANALYSIS

### Description of the crisis

Almost a year after Storm Daniel hit the northern and eastern sides of Libya, particularly Derna, the humanitarian response is beginning to shift from emergency relief to early recovery and reconstruction. The focus is now on addressing ongoing needs and building long-term resilience in the affected communities. The impact of Storm Daniel continues to be felt in the region, with its damage extending across all sectors, including health, water, sanitation, and food security. In Libya, the storm left a lasting mark, affecting hundreds of thousands of people and creating widespread challenges that persist months after the initial disaster.



*Population distribution across the northeastern coast of Libya*

Derna, a coastal city with a population of 130,000, was the most affected, with the death toll rising to more than 5,200 people and 8,000 still missing, according to OCHA<sup>1</sup>. The storm caused unprecedented destruction of infrastructure, homes, and public services, leaving many without access to necessities.

The health sector remains severely strained, with damaged facilities struggling to provide care and an increased demand for medical services. The water and sanitation infrastructure were particularly hard-hit, leading to significant challenges in ensuring clean water access and proper sanitation, which heightens the risk of waterborne diseases. Food security has also been compromised, as agricultural lands were flooded and food supply chains disrupted, leading to a protracted humanitarian crisis with many communities still reliant on external aid.

In response to these ongoing needs, the IFRC and the Libyan Red Crescent (LRC) have been working closely to transition from immediate emergency response to sustainable recovery efforts, restoring livelihoods, and strengthening community resilience against future disasters through awareness and health advocacy. Looking ahead, the focus will be on implementing long-term projects that promote self-sufficiency and resilience, ensuring that the affected populations are better equipped to face future challenges. This involves not only rebuilding physical structures but also addressing the psychological and social impacts of the disaster, fostering a sense of hope and stability within the communities.

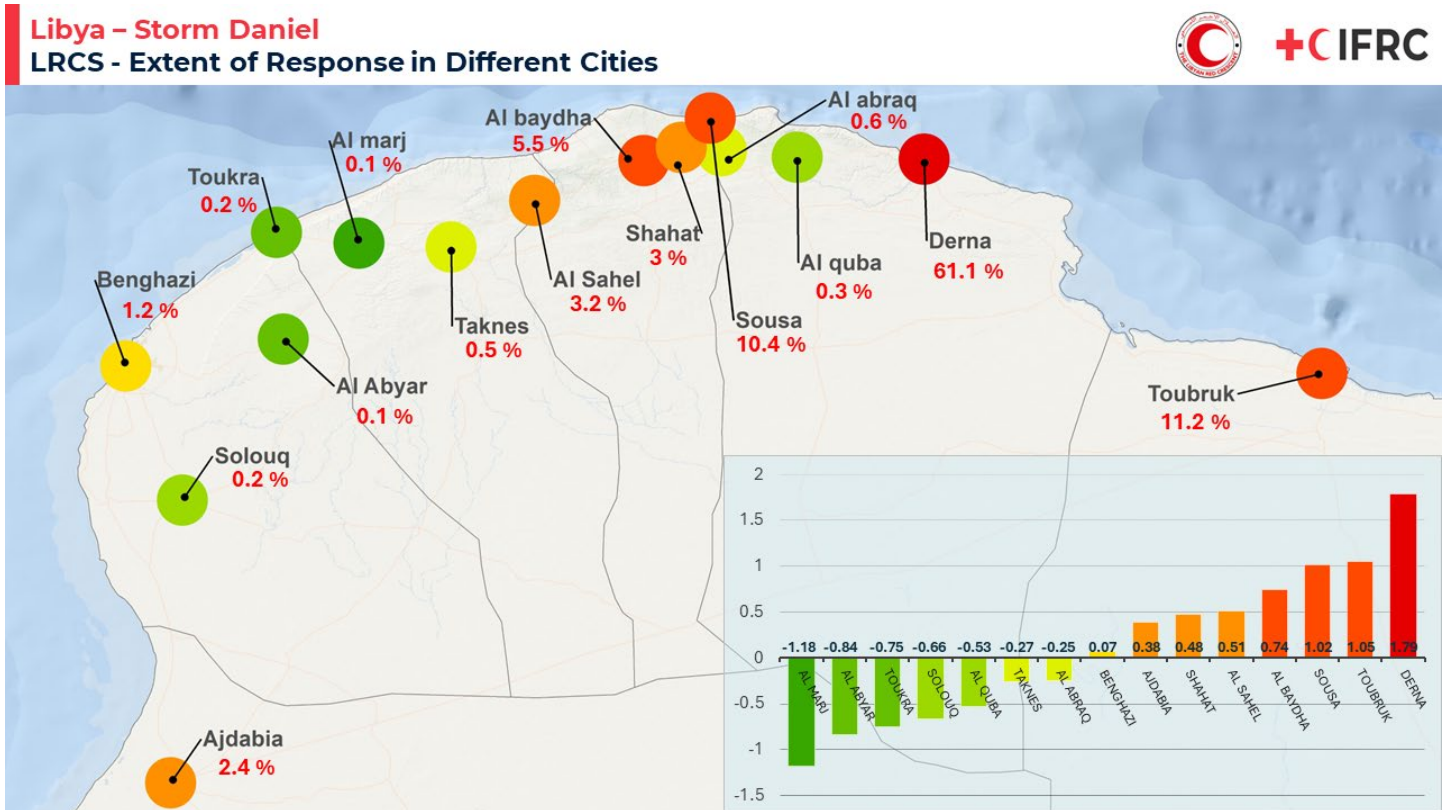
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<sup>1</sup> [Libya: Flood Response Humanitarian Update OCHA](#)

The Libyan Red Crescent Society (LRCS) maintains a strong presence and extensive local networks throughout Libya, enabling effective outreach to vulnerable populations often overlooked by other humanitarian organizations, particularly in remote and challenging areas. As an auxiliary to public authorities, LRCS serves as a vital national partner in disaster response and plays a crucial role in facilitating disaster preparedness activities through its branches nationwide.

With a longstanding commitment to delivering life-saving assistance, LRCS has established a reputation for acceptance and access throughout the country, allowing it to respond effectively to those in crisis. Established in

1957 and admitted to the International Federation of Red Cross and Red Crescent Societies (IFRC) in 1958, LRCS is the primary national humanitarian organization in Libya. It provides emergency response and services to vulnerable populations through a network of 38 branches, 655 staff members, and 3,000 volunteers.



*Distribution of emergency response efforts across the area (colors represent number of volunteers)*

## Summary of response

Following the event, on 16 September, the Prime Minister of the Libyan Government in the East declared a state of emergency, and an official request for immediate international support was announced. Local authorities, including the armed forces, surged with all capacity to support the responding teams to the crises, especially those that are members of the Libya Crises Cell, that included the LRCs. The government also took the lead in coordinating the distributions of relief items in coordination with the Libyan Relief Committee for all local actors.

From onset, the LRCs volunteers, particularly from the Derna branch, intervened from the start of the disaster by evacuating vulnerable people stranded by rising waters. LRCs teams from surrounding branches surged to provide immediate support on the ground. At the same time, LRCs headquarters (HQ) and branches in the eastern part of the country activated response mechanisms while coordinating closely with the IFRC and local authorities to assess the

situation, support search and rescue operations, and provided required support to those affected. A central emergency operations room was set up, as well as two others deployed to sites in Derna (Eastern and Western).

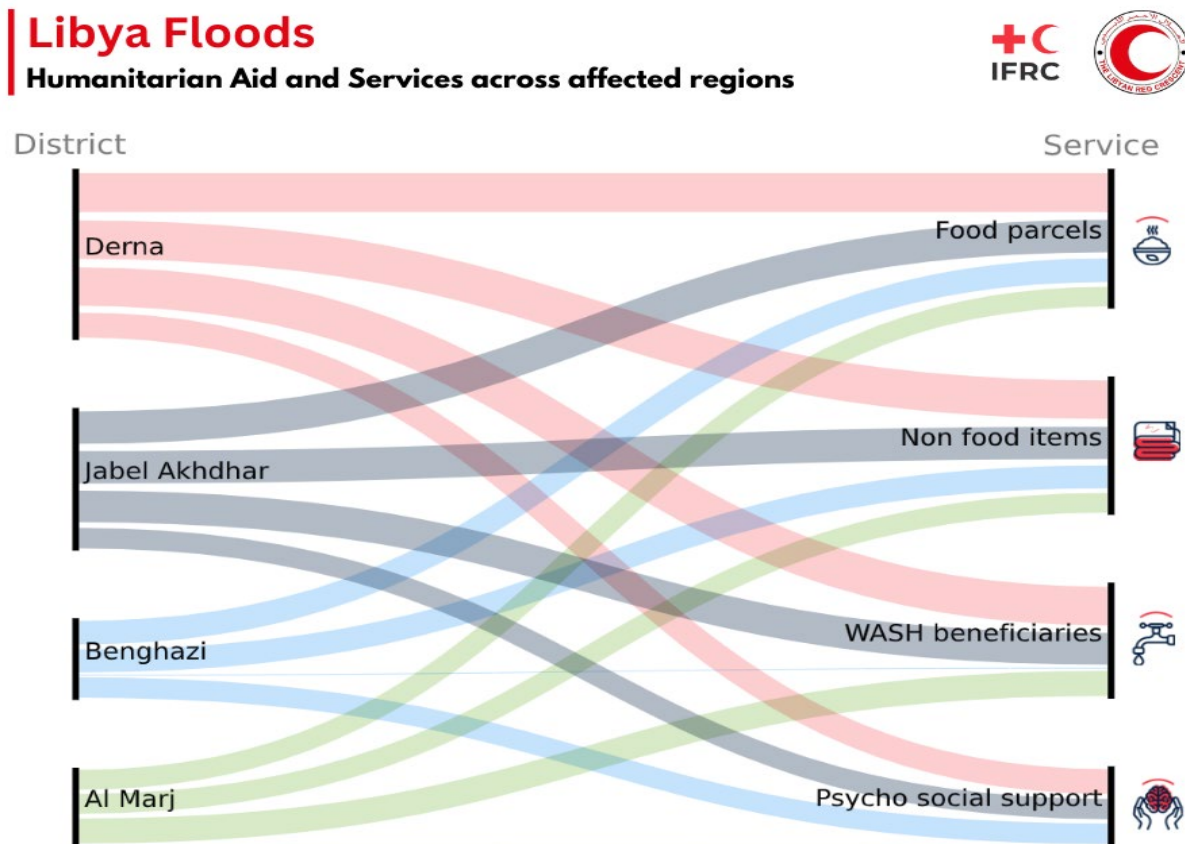
Emergency and rescue teams were initially tasked with rescuing survivors, while body management teams scanned vast areas, including streets and beneath the rubble of collapsed buildings, in search of survivors and victims. Additionally, teams extended their search 200 meters into the coast of Derna, where many buildings had been washed into the sea due to the widespread flooding.

Concurrently, teams provided urgent assistance, distributing basic aid and shelter to internally displaced persons (IDPs) in camps, many of which were set up in schools. They also offered necessary medical care, including first aid and psychosocial support, to those affected by the disaster. Volunteers played a crucial role, providing ambulance services and addressing reports of missing persons across impacted areas, including Derna, Ajdabiya, Al-Bayda, Al-Sahel, Benghazi, Shahat, Suluk, and Tobruk.

Under Libyan law regarding missing persons, an individual is not officially considered deceased until four years have passed since a missing person’s report was filed. Recently, however, a regulatory adjustment has allowed families to open cases and request death certificates to address social security and other administrative needs.

To date, the government has not issued an official declaration classifying all missing individuals as deceased. In the meantime, LRCS volunteers continue to manage requests for dead body management, with ongoing construction projects revealing additional remains each week.

LRCS played a pivotal role in coordinating and delivering essential humanitarian aid across the most severely affected districts. Guided by the results of the Multi-Sectoral Needs Assessment (MSNA) as follows:



Data Source : Libyan Red Crescent

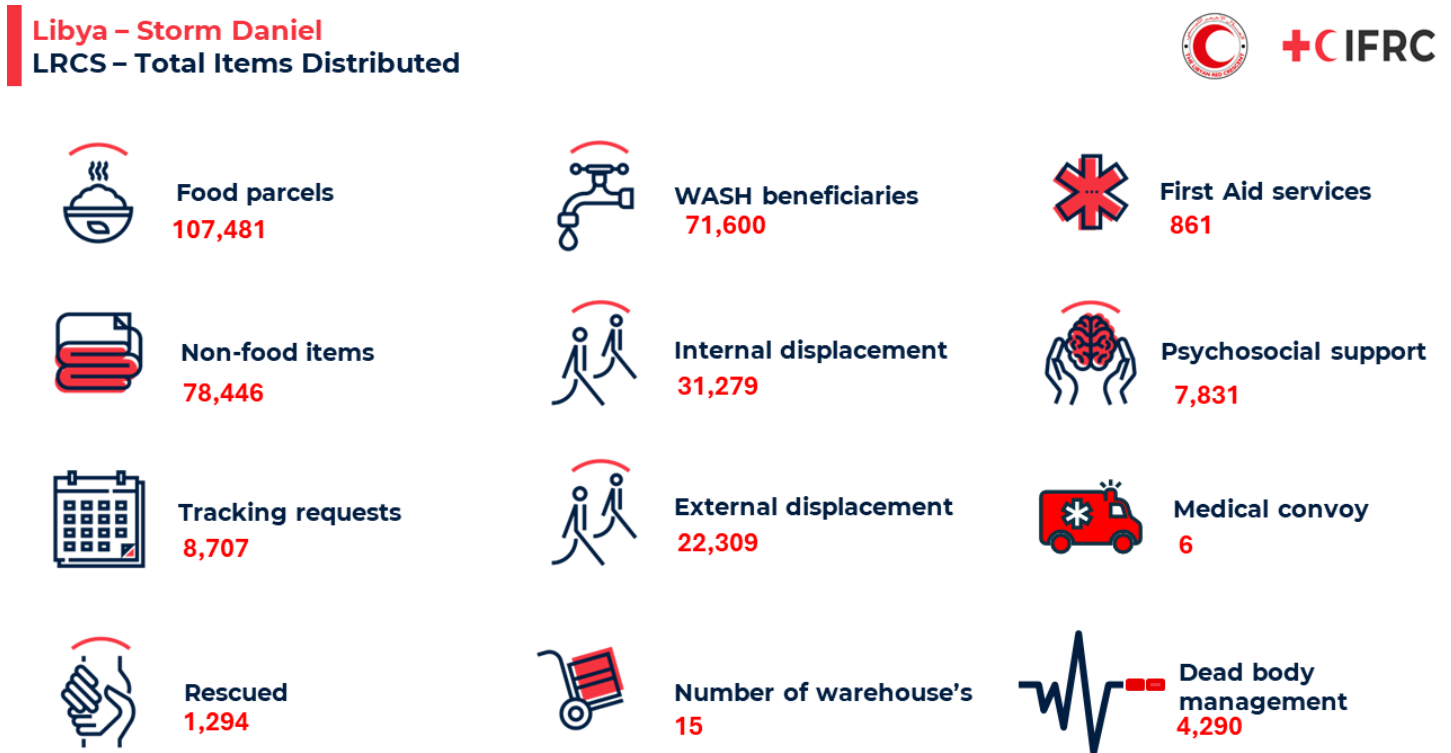
## Targeted Humanitarian response:

The Libyan Red Crescent Society (LRCS) concentrated its efforts on the districts most severely impacted by the flooding: Derna, Jabel Akhdhar, Benghazi, and Al Marj. Recognizing that each district had its own unique challenges, the LRCS customized its aid distribution accordingly:

- **Derna District:** Derna received the highest amount of food parcels and ready-to-eat meals, with **91,189** food parcels and **63,257** non-food items distributed, primarily in Derna city. Given the urgent need for necessities, the LRCS also provided substantial psychosocial support through the Derna PSS center, reaching **1,200** beneficiaries, mainly children under 15. The frequent visits to the center reflected the significant psychological impact of the disaster. Access to potable water was a critical issue due to damaged infrastructure. The LRCS distributed bottled water and facilitated water delivery via trucks, reaching **61,500** people with clean water. Additionally, other non-food items like kitchen sets, jerrycans, and thermal blankets were distributed across Derna city (**58,301** items), Sousa (**456** items), Tobruk (**20,000** items), and Guba (**248** items).
- **Jabel Akhdhar:** This district was prioritized for non-food items, particularly sleeping mats and thermal blankets, due to the drop in temperatures during winter. A total of **11,937** non-food items were distributed, mainly in the cities of Albayda (**7,936** items) and Shahat (**2,800** items). Along with this, **11,785** food parcels were distributed, and **8,800** people were provided with potable water. Psychosocial activities targeting children were also implemented in Albayda and Shahat, reaching **211** and **127** children, respectively.
- **Benghazi District:** Although Benghazi wasn't as severely affected, internal displacement occurred, particularly in the Al Hilis and Garyounis camps, where IDPs from Tawergha were based. The LRCS provided food parcels and non-food items (NFIs) to both relocated individuals and IDPs arriving from Derna, reaching **1,028** families and distributing **882** winter kits. The Benghazi branch was also active in providing psychosocial support, enrolling **350** children in recreational activities and primary PSS support.
- **Al Marj District:** The rural area of Taknus, south of Marj, was particularly affected by water insecurity due to its location in the path of the torrents. The LRCS responded by supplying fresh water to **1,300** beneficiaries. Additionally, **212** IDPs were relocated within Al Marj, and the LRCS distributed food parcels and NFIs to cover **100** families across the district.

From the outset, LRCs has been supported in its efforts by its Red Cross Red Crescent partners, inside and outside the country. The IFRC rapidly activated its Rapid Response Mechanisms, releasing CHF 1 million from its Disaster Response Emergency Fund (DREF) and launching an Emergency Appeal for CHF 10 million. An operation manager was deployed in Libya and an initial rapid response team of eight key function profiles, as well as a Health emergency response unit (ERU). Since the launch of the emergency appeal, LRCS has reached over **140,000** people (**28,000** households) across (15) Municipality.

The following infographic presents an overview of key moments of IFRC support, detailed in **Part C** of this report :



### ***Humanitarian aid and services provided by Libyan Red Crescent Society***

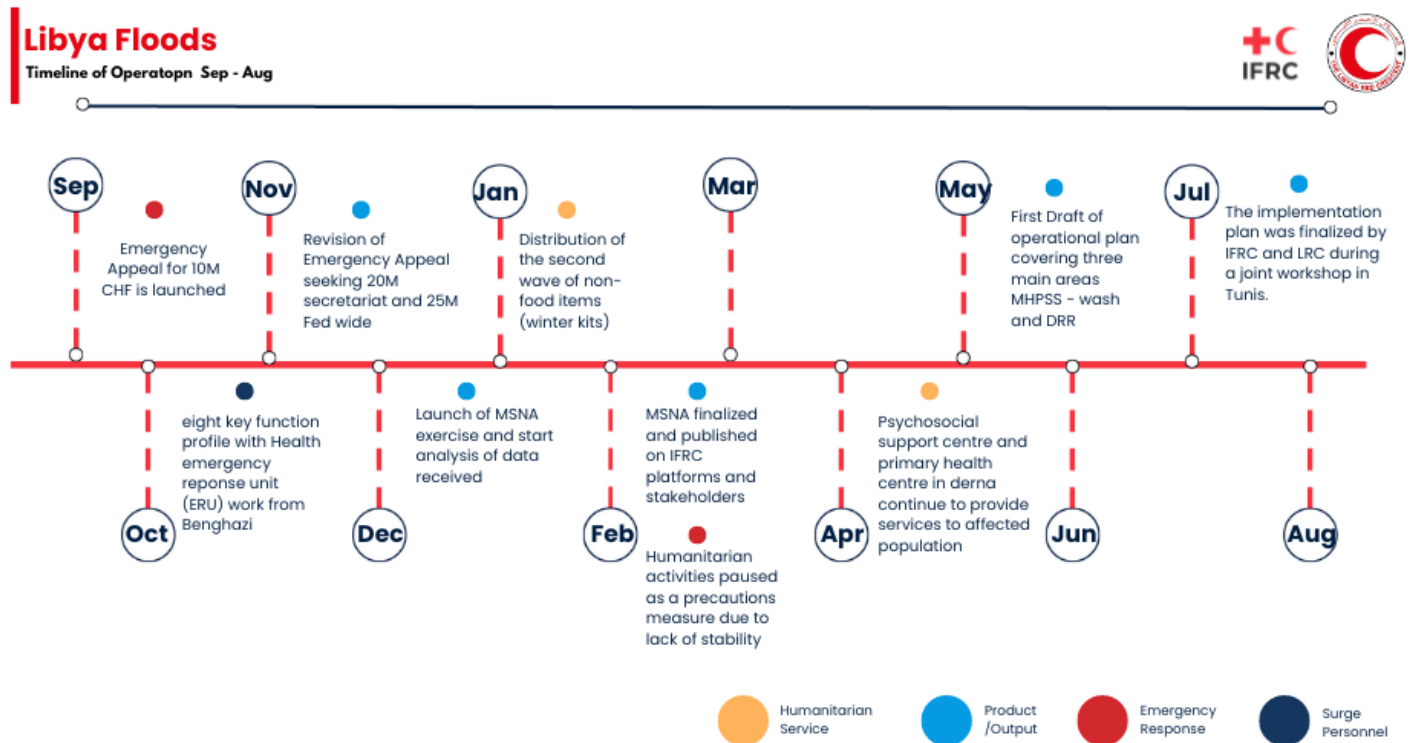
Partner National Societies (PNSs) and the IFRC were present from the start. Early relief distribution and activities at the disaster site were provisioned and carried out with the support of the Turkish Red Crescent, the Qatari Red Crescent, the Kuwaiti Red Crescent, the Emirates Red Crescent, the Saudi Red Crescent, the Tunisian Red Crescent, the German Red Cross, the Norwegian Red Cross, the Russian Red Cross, the French Red Cross, and Iranian Red Crescent.

The Norwegian Red Cross (NRC) initially supported the LRCs with the rapid health assessment, in addition to scaling-up the intervention of its two local mobile health teams in eastern Derna, namely Sousa and Qanduloa. NRC provided financial support for LRCs to implement a MHPSS training on Psychological First Aid (PFA) and self-care, while supporting MHPSS outreach activities in Derna LRCs branch. Currently, NRC supports the operation through four mobile clinics in the city and suburb of Bayda, and Derna city, and continues to provide MHPSS services to the affected population in Derna through LRCs Derna branch staff and volunteers

The German Red Cross initially implemented two Kit 15 systems (with the capacity to provide clean water for 15,000 people per day) to purify water from boreholes contaminated by the Derna floods. Technical personnel were deployed to train the LRCs in operating the systems. With changing needs, the two water treatment plants (M15) that had been installed were removed and replaced with reverse osmosis (RO filtration system), more suited to current needs. To date, five simple desalination plants have been installed, in addition to the maintenance of one groundwater well.

At the start of the response, the Turkish Red Crescent provided support with an operational setup comprising a field kitchen, a mobile catering vehicle, and a communications vehicle deployed to facilitate essential services. Additionally, a dedicated emergency response team from the Turkish Red Crescent (TRC), was actively engaged in flood-affected

areas, aiding including food parcels, hygiene kits, clothing, personal protective equipment (PPE), as well as various essential household items.



With a history of engagement in Libya since 2011, the ICRC organized teams and essential supplies to assist flood survivors, particularly in the hardest-hit areas. ICRC has been actively involved in critical activities, including managing mortal remains, reuniting families, and offering technical support for disaster management. Essential supplies like medicine, food, and household items were delivered to the affected families, with a focus on supporting Al Hawary hospital in Benghazi. The ICRC also supported to the Ministry of Health by providing materials, medications and covering operating costs for six primary health care (PHC) centres – two of them in Derna with the rest in other affected areas. The ICRC team also conducted WASH activities in Bayda city and suburbs and in Derna city by providing water trucking and installing bladder tanks. The LRCs also trained 17 volunteers in hygiene promotion and prevention of water borne diseases, in collaboration with the Norwegian Red Cross, and the ICRC. Looking ahead, the ICRC plans to continue its assistance efforts. This includes supporting primary healthcare centres, distributing aid to thousands of families, and providing emergency drinking water to 30,000 people. Long-term water repair projects are also being considered.

On the front lines, more than 700 volunteers participated in the immediate response. Tragically, four Libyan Red Crescent volunteers lost their lives in the disaster, three of them while helping to save the lives of others. In addition to those who lost their own lives, many volunteers in Derna suffered other types of losses due to Storm Daniel. The IFRC honours the bravery and selflessness of the Libyan Red Crescent teams, as well as volunteers around the world for their tireless efforts and sacrifices in the face of great dangers in 2023. Through these difficult times, the IFRC Emergency Response Unit deployed after the flood offers psychosocial support to all survivors, including volunteers. However, more will be done with a more long-term “Caring for Volunteers” program in development.

## Needs analysis

After a joint Multi-Thematic Rapid Needs Assessment (MTRNA), among UN agencies, the Libyan INGO Forum and Civil Society Organizations, coordinated by UNDAC was organized in the beginning of the response, with data collected by 13 partners. The MTRNA aimed to provide an initial overview of multi sectoral needs to inform the international response. The MTRNA report can be viewed [here](#).

Two months later, on 20 November, drawing on the MTRNA and subsequent secondary data available, the IFRC Assessment Cell published a comprehensive [secondary data analysis report](#), including more information on the scope and scale of the crisis, the operational constraints and a pre-crisis overview of affected areas. From the two reports, the following were identified as priority needs, areas of intervention and affected groups:

<b>Priority need #1</b> <b>Shelter</b>	<b>Priority need #2</b> <b>Health</b>	<b>Priority need #3</b> <b>WASH and Hygiene</b>
<b>Priority area #1</b> <b>Derna</b>	<b>Priority area #2</b> <b>Jabal al Akhdar</b>	<b>Priority area #3</b> <b>Al-Marj</b>
<b>Affected group #1</b> <b>Migrants and IDPs</b>	<b>Affected group #2</b> <b>Children</b>	<b>Affected group #3</b> <b>Women and girls</b>

The Secondary Data Analysis Report represented a significant initial phase in the Multi-Sectoral Needs Assessment (MSNA) process that was supported by IFRC and implemented by LRCS staff and volunteers. The assessment objective aimed to inform LRCS response plans and enhance stakeholders understanding of both immediate and long-term needs arising from the humanitarian landscape. Through a systematic analytical approach for the collected data, the report laid the groundwork for a comprehensive evaluation of the challenges faced by affected communities. This information was instrumental in guiding recovery responses and shaping implementation plans that are responsive to the actual needs on the ground. The collaborative efforts between the IFRC and the LRCs underscore a commitment to evidence-based decision-making, ensuring that interventions are not only timely but also tailored to effectively address the evolving circumstances of those we serve.

The **Multi-Sectoral Needs Assessment (MSNA)** conducted between December 3 and December 20, 2023, provided a comprehensive analysis of the impact of Storm Daniel on various sectors across the affected communities. The key findings from this assessment are as follows:

- **Health:** 31% of households faced significant barriers to accessing healthcare due to a lack of medical equipment, medicines, absence of female healthcare staff, and high costs of services.
- **Shelter:** In Al Wardiyeh, every surveyed household urgently needed emergency non-food items, underscoring the severe impact on living conditions. The village's location between two valleys made it particularly vulnerable, resulting in significant damage. This led to a subsequent increase in aid directed to Al Wardiyeh.
- **Food Security:** Food insecurity was particularly severe in Al Wardiyeh, with 92% of households struggling to access food. Additionally, 38% of households across surveyed areas lost their savings due to the storm, exacerbating their vulnerability.
- **Water, Sanitation, and Hygiene (WASH):** 41% of households reported a lack of access to potable water, with 39% citing economic barriers as a significant obstacle to securing safe water.

- **Education:** The storm disrupted education for many, with 40% of households reporting that at least one child aged 5-17 was no longer enrolled in school. Additionally, 37% of households noted that nearby public schools were affected, with substantial gaps in sanitation facilities (32% adequate) and safe drinking water provision (12%).
- **Availability of Essential Services:** There were severe gaps in essential services, with half of the respondents having no access to any services. Access to water supply networks, solid waste services, and public transport was particularly low, at 33%, 24%, and 9%, respectively.
- **Socio-Economic Impact:** 38% of households reported losing their savings, particularly in Derna. Despite these economic hardships, 36% of households maintained their eating habits, though many adopted coping mechanisms like reducing meal frequency or switching to less expensive foods.
- **Community Engagement:** 66% of respondents expressed a need for more information about available assistance and future emergencies, indicating a demand for improved community engagement and communication.
- **Market Access and Price Perception:** While 74% of households did not face challenges accessing markets, 26% did. There was also a widespread perception of increased prices, especially for dairy products and cleaning supplies.

The assessment faced several challenges, including data loss due to technological limitations, weather-related delays, cultural barriers in interviewing women, and issues with survey validity. Despite these obstacles, the MSNA provided a solid foundation for guiding targeted humanitarian interventions

The findings from this MSNA were instrumental in directing aid to where it is most needed, addressing the vulnerabilities identified, and ensuring that the most affected populations receive the necessary support to restore stability and resilience in the aftermath of the storm.

For more information and updates on the MSNA, please visit the IFRC [Go platform](#).

## Operational risk assessment

Libya has endured significant operational risks stemming from widespread civil unrest, and political instability since 2011. While the humanitarian situation has improved since the October 2020 ceasefire agreement, the country's population continues to suffer the effects of ongoing political and economic instability. Vulnerable populations, including asylum seekers, internally displaced persons (IDPs), migrants, and refugees, remain at high risk.

Libya's position as a major transit country for refugees and migrants from Sub-Saharan Africa has exacerbated the country's challenges. As of December 2023, the International Organization for Migration (IOM) estimated that over 706,000 migrants were present in-country. The influx of more than 125,000 migrants from Sudan in the wake of the April 2023 conflict has further strained the country's resources and services. The conflict in Sudan has led to the displacement of almost 11 million people. More than 2 million have crossed into neighbouring countries including Libya. According to the Ministry of Health in Kufra, Libya, about 70,000 displaced Sudanese have arrived in the area, highlighting concerns of a potential humanitarian disaster if urgent aid is not delivered. Immediate needs include health and mental health services, food, shelter, essential household items for the displaced and logistical support. Migrants in Libya face a range of protection risks, including arbitrary detention, forced labour, restricted freedom of movement, and sexual violence, as well as limited access to housing and essential services.

The conflict risk in Libya is assessed as "Significant." The country's history of conflict and political instability are key drivers of vulnerability. The delayed 2022 elections fuelled tensions, and Libya's limited territorial integrity contributes to low resilience. Weak state institutions and a fragmented political landscape have allowed armed non-state actors to flourish, further exacerbating the humanitarian crisis and prolonging the displacement of vulnerable populations.

Climate risk in Libya is also "Significant." Water scarcity, temperature rises, and extreme events threaten the country's water resources, agriculture, and livelihoods. Governance deficits and a lack of national strategies have magnified the impact of climate-related disasters, as evidenced by the 2023 Derna incident.

The economic landscape in Libya faces "Minor" risk, primarily due to food insecurity caused by declining agricultural outputs and heavy reliance on food imports. Prolonged conflict, the disruption of agricultural services, and global food price shocks have contributed to the country's economic challenges. Libya's overreliance on hydrocarbons and lack of economic diversification have limited its resilience to external shocks, including the COVID-19 pandemic and oil blockades.

Libya's social risk is assessed as "Moderate." While the situation has improved marginally since 2010, challenges remain, including high unemployment, especially among young people and women, and limited resilience due to low female labour force participation. The country's healthcare system faces obstacles, including inadequate resources, limited access in certain areas, and the lingering effects of conflict.

Institutional risk in Libya is "Severe," marked by fragmentation, competing power centres, and a lack of an effective central authority. Competing armed factions and conflicting interests contribute to the division of the nation and the deepening of mistrust. Corruption and tribalism persist, hindering governance and financial control. Although a Government of National Unity has been established, it has struggled to unify contested institutions, further undermining the country's resilience.

Libya's operational risks remain significant, with the country facing substantial challenges in the areas of political division, climate, economy, social welfare, and institutional governance. Addressing these multifaceted risks will require a comprehensive, coordinated, and sustained effort by the Libyan government, international partners, and civil society organizations.

The operational risks and constraints mentioned in the [revised Operational Strategy](#) which relate to finance, security LRCs response capacity, access, and the political context in Libya, remain relevant and closely monitored. At this stage of the response, the difficulty of accessing the disaster areas is no longer considered a major operational constraint.

Threats	Situation	Risk	Mitigation
<b>Direct or indirect violent attacks</b>	Although the hazards and risks are lower compared to previous years, in the affected area, there are no or limited direct threats.	Low	Access and acceptance of the LRCs is strong. Area-specific security risk assessments are undertaken, and risk mitigation measures are put in place. Security regulations and procedures will be strictly followed.
<b>Stress</b>	Libya can be a moderate to high-pressure and complex operating environment, and this can take a toll on members of the deployed personnel in the country.	Moderate	Ensure that all staff are aware of the availability of the psychological support programme (stress counsellors) for them and adhere to rest and relaxation, and annual leave regulations.
<b>Institutional risks</b>	The LRCs went through leadership and organizational changes, which influence the availability of information related to completed activities, and sharing of data which may raise questions and concerns by partners and donors to which IFRC will have to respond.	High	Continue to maintain key messages that address the questions and reaffirm the humanitarian mandate of the LRCs. Investigate reported cases and explain the advantages of the role of the LRCs as the focal point between humanitarian actors and government bodies.
<b>Lack of access</b>	International staff may have limited or no access to visit Libya or some field locations of the response activities due to the impact of extreme weather and other factors affecting the routes.	Moderate	The Government of Libya is expediting security clearance for international staff following the floods. Planning for field visits will take into account the risks. Ensure that donors are aware of possible challenges to access and, therefore, to reporting on field projects.
<b>Safeguarding (Child Safeguarding and PSEA)</b>	Forms of abuse, particularly sexual abuse and exploitation are heightened in the presence of power imbalances. Emergencies cause a breakdown in the protective social mechanisms and norms that govern behaviours, threaten basic livelihoods, and increase food insecurity, causing existing power inequalities to be reinforced, with children and women being particularly vulnerable. The control of resources, services, information, and opportunities is also a form of power and is open to abuse by humanitarian workers, especially those who make decisions about who can access aid or services, when they can access them, and how often.	Moderate	The LRCs has recently adopted PSEA and child safeguarding policies and is currently working with different partners to strengthen safeguarding systems, including handling sensitive complaints through the complaints and feedback mechanism, investigations, and survivor support. IFRC policies, including a confidential Integrity Line, provide the mechanism for reporting and follow-up.

<b>IFRC Access</b>	IFRC does not have a legal status for its presence in Libya and depends on accessibility of National Society to ease operations.	Low	IFRC working and advocating with LRCS to obtain its legal status, to extend its presence and reach and further support the NS in its operations and activities.
<b>Financial Capacity</b>	Financial Capacity of LRCS Finance team	Low	working with other partners in supporting the NS e.g. Norwegian Red Cross building capacity of both strong financial systems and human resources, while working with NS staff as support.
<b>Human Resources</b>	HR related risks i.e. lack proper job descriptions and overlapping between different positions.	High	LRCS management should conduct a comprehensive review of the salary structure and employee benefits, ensuring clarity in job roles and responsibilities to minimize overlap and align staff incentives with organizational goals.

## B. OPERATIONAL STRATEGY

### Update on the strategy

The Operational strategy was first published on 7 November and can be found [here](#), reflecting first assessments and analysis of the disaster situation. During the first weeks of the operation, humanitarian needs were predominantly tied to search and rescue efforts, as well as to the delivery of immediate life-saving assistance. The situation has evolved, and new needs and interests have been identified, necessitating new capacities. The Operational Strategy was therefore revised to reflect this understanding, building on the most recent available assessments and analyses. The revision of the Operational Strategy includes:

1. Increased attention to recovery and resilience planning and implementation.
2. Strengthening the National Society's capacity.
3. Enhancing security management.

The severity of needs is likely to continue evolving, with additional complexities and scenarios arising based on how the recovery progresses in the medium and long term. Ultimately, strengthening the capacities of the LRCs, a respected and trusted humanitarian institution in the country, is foundational and will reduce the loss of life and the suffering of the Libyan people when faced with contextual changes.

The original IFRC Appeal for Libya, thanks to the generous donors from the international community was able to reach its original funding targets. Based on current assessments, anticipated needs and changes in the Operational Strategy, the Federation-wide funding requirement of this Emergency Appeal has been increased from CHF 7 million to CHF 20 million, to effectively respond to the ongoing and medium- to long-term recovery needs on the ground. The revised Operational Strategy is available [here](#).

In response to the organizational changes within the national society both before and after the Storm Daniel disaster, as well as due to prevailing political and operational dynamics that imposed restrictions on the humanitarian community to the affected areas the operations had encountered significant operational challenges. While LRCS, as an auxiliary body, has maintained access to affected communities, these challenges have impacted the continuity of activities outlined in the emergency appeal since January 2024.

To maintain the highest standards of efficiency and effectiveness, and to uphold commitments made to back donors, both LRCS and IFRC have implemented precautionary and corrective measures. These measures included the temporary suspension of planned activities until a clear organizational structure is established and the operational context is conducive to resuming activities. This decision reflects both organizations' commitment to ensuring that all interventions are coordinated and effectively, aligning with the evolving political circumstances.

During this interim period, the IFRC and LRCS have demonstrated a strong commitment to enhancing support for the affected communities. This has involved conducting comprehensive risk assessments and implementing necessary corrective risk measures to navigate this transition and reinforce national society operational capacity.

Additionally, collaborating with the national society during the transition phase supporting their new organizational structure has been a priority, along with recruiting personnel to establish a stable, long-term human resources framework that supports the development of the national society. Key technical positions are being revised and added, including profiles in finance, national society development, procurement delegates, and an operations manager, to support the national society's efforts in responding to evolving humanitarian needs. During the reporting period, a technical mission to enhance quality assurance standards including planning and monitoring evaluation reporting is being conducted in September 2024. These measures agreed upon during the kickoff meeting workshop in Tunisia held in August 2024 following the signing of project agreement between both IFRC and LRCS were essential for resuming activities aimed at improving the planning and execution of operations.

In the second quarter of 2024, four key projects were initially drafted, focusing on WASH, Health and MHPSS, Cash, Integrated Assistance and Disaster Risk Reduction. These projects were later refined and finalized during an intensive, collaborative workshop between IFRC and LRCS, involving all IFRC Libya office staff and NS staff different levels that was dedicated to designing and finalizing the revised implementation plan.

The implementation plan has now been fully finalized and approved, with activities scheduled to commence at the beginning of September. This coordinated approach ensures that LRCS is well-positioned to deliver impactful and sustainable results. Below are some of the key activities expected to be implemented before 31<sup>st</sup> December 2024:

- The rehabilitation of water wells
- Installation of water purification units at household, schools and health facilities level
- The distribution of drinkable water through mobile water truck and providing hygiene awareness sessions to affected population
- The rehabilitation of WASH facilities at affected schools
- Providing medical equipment to Derna PHC
- Providing primary health services through Derna PHC and mobile health clinics
- Equipping LRCS with 4 Mobile health units and 5 Ambulances
- Providing static and mobile focused PSS services to children and adults
- Self-care training for LRCS staff and volunteers
- Cash voucher assistance to the affected population
- Distribution of hygiene kits, mattresses, blankets and paint to the affected population
- Afforestation campaign in the affected areas
- The adaptation of the emergency response tool kit through workshops conducted with relevant branches
- Awareness sessions on road accidents
- Rehabilitation of LRCS HQ warehouses including the installation of a racking system
- Supporting the establishment of the EOC at LRCS new HQ in Benghazi
- Equipping LRCS with 7 vehicles( pick-up trucks and mini-buses)


## C. DETAILED OPERATIONAL REPORT

### STRATEGIC SECTORS OF INTERVENTION

Following the emergency response in September 2023, humanitarian operations continued with LRCS volunteers tirelessly providing essential services and aid to all affected populations.

As the immediate response efforts transitioned, with the support of IFRC, LRCS's focus shifted to preparing for the harsh winter conditions. This involved distributing winter sets and supplies to the most impacted areas, as well as to other regions identified as vulnerable to the upcoming winter season in late 2023.

Out of the 300,000 individuals targeted by the Operational Strategy, LRCS has successfully reached 140,000 affected individuals so far with food items and ready to eat meals, nonfood item i.e. blankets, jerrycans, sleeping mattresses and kitchen sets and hygiene kits.

	<b>Shelter, Housing and Settlements</b>	<b>Female &gt; 18:</b> 20116	<b>Female &lt; 18:</b> 12473
		<b>Male &gt; 18:</b> 29541	<b>Male &lt; 18:</b> 16316

<b>Objective:</b>	<i>Enable communities in disaster and crisis-affected areas to restore and enhance their safety, well-being, and long-term recovery through effective shelter and settlement solutions. Provide essential humanitarian aid and winter supplies to the most vulnerable communities in need.</i>		
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Key indicators:	Indicator	Actual	Target
	Number of beneficiaries reached with relief items (thermal blankets, kitchen sets, stove/heaters, bedding units /mattresses)	78,446	10000
	Number of thermal blankets distributed to affected population	6000	-

With the support of the IFRC's rapid response surge system, the Libyan Red Crescent (LRC) coordinated the distribution of over 75,000 non-food relief items, focusing on winter essentials such as high thermal blankets and mattresses. This operation involved contributions from numerous partner National Societies, including those from Turkey, Qatar, Kuwait, the UAE, Saudi Arabia, Tunisia, Germany, Norway, Russia, France, Iran, Canada, the UK, and Denmark. These supplies reached families in the most affected regions, ensuring that vulnerable communities were well-prepared for the harsh winter conditions.

LRC concentrated its efforts on delivering high and medium thermal blankets, especially in Derna, Shahat, Al Bayda, and Tobruk, as part of a broader winter relief initiative. Additionally, essential items like jerry cans, sleeping mattresses, and kitchen sets were distributed to provide comprehensive support during the cold season. This large-scale distribution was a collaborative effort, supported by various partner National Societies, and successfully reached families across all affected areas.

In particular, the Libyan Red Crescent significantly increased its distribution efforts during the winter season, focusing on delivering high and medium thermal blankets to the most vulnerable areas, particularly in Derna, Shahat, Al Bayda, and Tobruk. As part of this comprehensive winter package, the LRC also distributed jerry cans, sleeping mattresses, and kitchen sets, ensuring that the most in-need communities were adequately supported during the cold season.

During the emergency phase ,LRC has received five flights and six shipments loaded with a variety of relief items, including blankets, body bags, hygiene kits, kitchen sets, tents, face masks, chlorine tablets, Kit 5, and ERU OPD, MHPSS equipment, and solar lamps. These items were either distributed immediately in response to emerging needs or used to replenish LRC stocks. These relief shipments included generous in-kind contributions from the Canadian Red Cross, French Red Cross, British Red Cross, and Danish Red Cross.

Given the saturation of humanitarian needs in the affected areas and the governmental intervention and given the emergence of new needs in Alkufra due to climate change, the LRC, in alignment with its mandate, strategically prepositioned some of its stocks at the Al Kufra branch. This proactive measure ensures that the LRC can respond swiftly and effectively to the growing humanitarian needs in the area.

Following the Multi-Sectoral Needs Assessment (MSNA) conducted in late December, the data analysis revealed that over 50% of households reported an urgent need for blankets, 37% expressed a need for sleeping mattresses, and 32% indicated a need for kitchen supplies and utensils. This data has been vital in guiding LRC's ongoing distribution efforts, ensuring that resources are allocated to meet the most pressing needs of the affected populations.

Building on the workshop conducted with LRCS in August 2024, it was agreed to implement a relief assistance program in the remaining period of the emergency appeal. Accordingly, procurement is ongoing for 20,000 mattresses, 1000 carpets, 1000 household wall paint and 24640 hygiene kits as well as implementing a rehabilitation project for the main warehouse of LRCS in Benghazi to enhance the logistical capacities of storage and distribution accordingly. At the time of writing this report, most procurement have been finalized and are at the purchase order stage. In parallel, LRCS is updating its household selection criteria to identify the ones going to receive the relief items. A verification exercise will be conducted by the PMER team ahead of informing the selected households for the distribution dates. Similarly, a post distribution monitoring exercise will be conducted with a selected sample from the overall number of households assisted. LRCS will use undistributed items to replenish their stock and ensure adequate preparedness for emergencies.



## Livelihoods

Female > 18:

Female < 18:

Male > 18:

Male < 18:

### Objective:

*Communities, especially in disaster and crisis affected areas, restore and strengthen their livelihoods*

### Key indicators:

#### Indicator

**Actual**

**Target**

Number of food assistance rations distributed (bulk baskets and food parcels) segregated by item

107,481

-

Number of LRCs volunteers and staff trained on livelihood programming

73

-

The LRCs, with the support from its partners including but not limited to Turkish Red Crescent, Kuwaiti Red Crescent, and Qatari Red Crescent, delivered 107,481 food parcels to people affected.

Moreover and during the workshop conducted with LRCS in August in Tunis, the livelihood programing was discussed. It was proposed to explore the possibility of implementing a livelihood project targeting micro and small enterprises affected by the floods. At the time of writing this report, LRCS finalized the feasibility study related to distributing grants to affected enterprises. The results showed significant risk in implementing such project within the remaining time of the emergency appeal. Accordingly, it was decided to focus on Livelihoods programing during 2025.



## Multi-purpose Cash

Female > 18:

Female < 18:

Male > 18:

Male < 18:

<b>Objective:</b>	<i>Households are provided with unconditional/multipurpose cash grants to address their basic needs</i>		
<b>Key indicators:</b>	<b>Indicator</b>	<b>Actual</b>	<b>Target</b>
	Number of individuals and households benefitting from MPCA assistance	-	1000
	Number of LRCs volunteers and staff trained on CVA	31	5
	Number of LRC's volunteers and staff trained on market analysis	15	

An IFRC regional cash and voucher assistance (CVA) specialist was deployed to Libya for a month in November and December, to support LRCs in assessing the feasibility of implementing a CVA program and develop a cash program proposal. To this end, for future activities, and to develop internal capacity in cash programming, the LRCs has appointed two cash and voucher assistance (CVA) focal points at its headquarters, who will act as coordinators. In addition, two CVA focal points have been appointed within the Derna and AL Bayda branches of LRCs. Four areas were targeted from LRCs to implement CVA intervention (Derna, Al Bayda, Tobruk, and Benghazi), based on the following criteria: most affected areas, number of IDPS, presence of LRCs.

The feasibility study process included a secondary data analysis covering information on government policies, earlier market assessments, in-country financial service providers and delivery mechanisms, previous experiences of international organizations in Libya and cash working groups initiatives. The feasibility study also included primary data analysis from field visits to Derna and AL Bayda.

The field visits in Derna and Al Bayda were organized primarily to meet key Informants from the main governmental banks (Alwihda, Altijari al Watni, Al Jamhouria) for a better understanding of their services and capacities for cash transfer programming. Market assessments visits and key informant interviews with traders and wholesalers were conducted, as well as key informant interviews with local authorities. The feasibility study also included an assessment of the National Society capacity at headquarters and branch level. The relevant assessment tools (traders and wholesalers; focus group discussion survey) were designed in collaboration with LRCs. The resulting CVA project proposal was completed and shared in December.


In December, a meeting was organized with the LRCs management team to present the results of the feasibility study and together review the options available to provide cash to the affected communities; the collaboration

mechanisms and the challenges to overcome to successfully implement the program. The CVA coordinator also advocated for the creation of an internal technical working group to facilitate the implementation of the CVA program. The terms of reference (ToR) of this technical working group were shared with the National Society for discussion.

On December 11 and 12, CVA training on cash feasibility, markets assessment, delivery mechanisms, response options analysts, risk analysis and assessment in emergency took place for the branches of Al-Bayda and Derna. Thirty-one (31) volunteers and the two branches CVA focal points (9 women, 24 men) took part in the training aimed at increasing the capacities of field workers for effective implementation.

Additionally, specific CVA questions on markets, financial service providers (FSP), community preferences and delivery mechanisms were drafted for inclusion in the IFRC-led multi-sectoral needs assessment (MSNA) covering all affected areas by storm Daniel in eastern Libya. Prior to the rolling out of the assessments by volunteers, a training session on CVA was facilitated as part of the broader two-day MSNA training.

Building on the feasibility study results and the capacity building initiative to LRCS, a pilot CVA project is planned to be conducted starting from mid-November 2024. At the time of writing this report, a procurement process is ongoing to contract dedicated supermarkets that will partner with LRCS and IFRC in reaching 1000 households affected by the floods in north east Libya. The main areas targeted are Al-bayda, Al-sahel, Derna and Tobruk. Each household will receive a voucher with a value of 790 LYD that could be utilized in a specific timeframe of 2 weeks and in dedicated supermarkets. The selection of households will occur based on existing list of households affected by the floods in each area and in close coordination with relevant local authorities. LRCS together with IFRC will ensure coordination with other CVA actors in the area to avoid duplication and ensure such services reach the most vulnerable households.

 <b>Health &amp; Care</b> <i>(Mental Health and psychosocial support / Community Health / Medical Services)</i>	Female > 18: <b>11933</b>	Female < 18: <b>4784</b>	
	Male > 18: <b>5881</b>	Male < 18: <b>5744</b>	
<b>Objective:</b>	<i>Enhancing the overall health and well-being of individuals and communities affected through targeted community interventions and the strengthening of health systems.          Increasing awareness of critical health risks and the prevention of communicable diseases.</i>		
<b>Key indicators:</b>	<b>Indicator</b>	<b>Actual</b>	<b>Target</b>
	Number households assessed through MSNA	2,136	2,432
	Number of individuals reached through LRCs polyclinic operation and two mobile health teams	21,432	2000
	Number of emergency clinical care units equipped and strengthened	-	5
	Number of volunteers trained in PFA and other MHPSS trainings	318	20
	Number of individuals who received mental health and psychosocial services from LRCs	11,010	1000

Number of polyclinics and outreach mobile health teams equipped	1	4
Number of people reached with health promotion activities related to CD, NCD management and safe motherhood in emergencies	3413	-
Number of staff and volunteers trained on the community awareness and community engagement approaches	-	-

In the immediate aftermath of Storm Daniel, particularly following the collapse of the Derna dams, the Libyan Red Crescent (LRC) swiftly mobilized its emergency and rescue teams to deliver critical aid. This included providing essential medical care to the injured, as well as offering first aid and psychological first aid (PFA) to those deeply affected by the disaster. In support of these efforts, the Norwegian Red Cross initially deployed two mobile health clinics, reaching over 600 individuals with first aid and extending PFA to 7,000 people.

Despite the extensive damage to its facilities, especially in Derna, the LRC remained committed in its dedication to saving lives. The tireless efforts of National Society volunteers resulted in first aid services being administered to 861 individuals, with 426 of these in Derna alone.

Ten months on, the LRC continues its commitment to Mental Health and Psychosocial Support (MHPSS) for the affected populations, including support for its own volunteers and staff. Under the IFRC Appeal, the Health Emergency Response Unit (ERU) team, after a rapid assessment in collaboration with LRC and local authorities, concentrated its efforts in Derna. They established a MHPSS Community Center, housed in a newly leased and renovated building, which provides a safe place for community members to engage in MHPSS activities, recreational activities and primary psychosocial support, while also offering a supportive environment for LRC staff and volunteers. To date, the center has successfully aided 1,200 individuals struggling with the psychological impacts of the floods.

Outside Derna and following the Training of Trainers that was done in Benghazi under guidance of the IFRC MHPSS coordinator, MHPSS activities have been extended to other affected cities i.e. Albayda 211 individuals, Shahat 127 individuals, Ajdabiya 210 individuals and Benghazi 350 individuals, these activities mainly targeted children under the age of 15.

The ERU team also finalized the MHPSS human resource's structure and service offerings, including a clear referral pathway to advanced mental health services at nearby hospitals and clinics. The Center's organizational structure comprises a MHPSS center manager, coordinator, two team leads, and a logistics assistant. So far, 318 volunteers (144 women, 174 men) have been trained in Derna and other affected cities to implement MHPSS activities and conduct outreach.

In further support, the LRC, with IFRC's assistance, is establishing a volunteer support system. The MHPSS framework has been updated, and a policy for caring for volunteers has been developed. Additionally, two workshops on rapid MHPSS assessment were conducted for LRC branches in Derna and Al Bayda, training eight volunteers.

The LRC's Derna branch, which also houses the LRC polyclinic, suffered significant damage during the floods. As the branch and polyclinic undergo rehabilitation and re-equipment, their services have been temporarily relocated. The National Society Development (NSD) team oversees the renovation, while the health department manages the procurement of necessary equipment and materials with support of the British Red Cross.

Complementing the polyclinic, the Qatar Red Crescent has supported the deployment of two mobile clinics. These clinics, based at the Derna branch, serve not only Derna but also patients from Bayda and Tobruk. Furthermore, 11 medical convoys were deployed across the eastern region in areas hardest hit by the floods

and in dire need of medical care. Together, these healthcare services have provided critical healthcare to 21,432 beneficiaries through the medical convoys and the LRC polyclinic in Derna:

Male > 18:	Female > 18:	Male < 18:	Female < 18:
3586	9964	3979	3903

In addition to medical care, health awareness campaigns were conducted to bolster community resilience and support the medical convoys by encouraging medical care-seeking behavior. As a result, 3,413 individuals were reached through health messages and awareness campaigns on topics including communicable diseases, non-communicable diseases, and maternal and childcare.

LRCS is still planning in the last 3 months of the emergency appeal to conduct static and mobile PSS activities with children and adults. At the time of writing this report, trainings have been finalized for all volunteers from relevant branches on LRCS PSS modality. IFRC is continuing to support the MHPSS centre in Derna and is expected to be operational during the last 3 months of emergency appeal.

Additionally, LRCS's health team anticipates that it will be fully operational by December, supported by a dedicated group of doctors and nurses, as one IVECO MHU has been designated for LRCS and is expected to be delivered by the beginning of December 2024. Furthermore, the IFRC is assisting LRCS in expanding its health fleet, with plans for the arrival of 3 additional mobile health units and five ambulances by the end of January 2025.



## Water, Sanitation and Hygiene

Female > 18:	Female < 18:
1093	1334
Male > 18:	Male < 18:
1292	1148

### Objective:

*Ensure safe drinking water, proper sanitation, and adequate hygiene awareness of the communities during relief and recovery phases of the Emergency Operation, through community and organizational interventions*

### Key indicators:

Indicator	Actual	Target
Number of households assisted with access to lifesaving and secured safe drinking water, sanitation, hygiene, and waste management (segregated by service)	2615	12000
Number of people reached with hygiene promotion and awareness sessions	2187	12000
Number of households receiving essential WASH items (segregated by item)	2615	12000
Number of facilities (schools, healthcare, community centers, etc.) supported with improved and rehabilitated WASH services and waste management	89	130
Number of LRCs staff and volunteers who have received training and capacity building on emergency WASH topics	65	210

Number of hygiene kits distributed to affected population	1850	10000
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From the onset of the response, LRCs, with its Movement partners, has been addressing the critical water, sanitation, and hygiene needs of the affected population with, at the start of the crisis, the distribution of around 240,000 bottles of waters, the distribution of approximately 5,973 hygiene kits, while taking the responsibility for three shelters at El-Khlood school, Om-Elmoamnin school, and the high institute. For these institutions, the LRCs handled the preparation, cleaning, and provision of cleaning kits for the restrooms, along with other WASH activities. The German Red Cross supported LRCs with the installation of two water treatment plant (M15). Those were recently replaced with reverse osmosis (RO) filtration systems to better respond to evolving needs. To date, five simple desalination plants have been installed, in addition to the maintenance of one groundwater well. ICRC also conducted WASH activities in Bayda city and suburbs and in Derna city by providing water trucking and installing bladder tanks. The LRCs also trained 17 volunteers in hygiene promotion and prevention of water borne diseases, in collaboration with the Norway red Cross, and the ICRC.

Under the IFRC Appeal funding, with recovery in mind, a WASH recovery and resilience response proposal accompanied by a work plan was prepared in collaboration with LRCs, including a detailed budget and a 12-month timetable. The proposal is currently being reviewed for approval. The project takes a comprehensive approach to addressing the WASH crisis, including physical rehabilitation of public facilities, community engagement initiatives, and strengthening of the National Society. At the same time, a water trucking proposal for Derna was developed and submitted with success to Qatar Red Crescent.

The WASH response proposal was drafted following WASH needs assessments for all affected areas, gathering primary data to comprehensively understand the situation and identify existing gaps.

Among the initiatives that inspired the project proposal, are three WASH feasibility studies prepared by the WASH coordinator, based on field visits in Derna carried out in October, November and December: on collection of primary and secondary data, as well as on coordination and exchanges with stakeholders.

In the context of the MSNA conducted throughout December, two WASH assessments were designed, one to fit the MSNA format and another WASH rapid assessment to delve deeper into complementary technical aspects. The WASH rapid assessment was shared with the LRCs data team and carried out during the MSNA field work, under the supervision of the information management (IM) team and in coordination with WASH. The results of these two assessments will complement the WASH feasibility studies and inform the project strategy and implementation plan. The WASH rapid assessment form has been shared with WASH TWG for reference.

Along with the proposal, the WASH technical files are also being finalized to ensure support to the LRCs and IFRC implementation team for a smooth start in all distinct aspects of the operation. Topics included are aligned with the proposed program and cover implementation standards and guidelines, training manuals, water trucking, clear descriptions of WASH rehabilitation activities, rapid wash assessments, among others.

The WASH coordinator conducted a WASH rapid assessment workshop to the 20 volunteers taking part in the MSNA training with a view to deploying assessment activities in the field. With the same idea of strengthening WASH capacities, the IFRC collaborated with LRCs to establish the capacity building plan for LRCs volunteers involved in the WASH response. A comprehensive capacity building program for LRCs staff and volunteers has also been prepared, including a series of training modules ranging from basic to advanced then specialized.

Regular coordination and working meetings were organized with LRCs to finalize the WASH strategy, framework, proposed WASH programs, technical files among others, as well as weekly technical coordination meetings with the IFRC regional office WASH team. A first WASH coordination meeting with RCRC and other partners took place. LRCs/IFRC also participated in weekly Technical Working Group (TWG) meetings hosted by UNICEF. Continued


engagement within the thematic group facilitated technical support and information sharing on the situation in other affected areas. Additionally, regular coordination with the German Red Cross is in place to ensure integrated and complementary interventions regarding water trucking and building capacities.

During the joint implementational plan workshop between IFRC and NS staff, a WASH coordinator from IFRC supported LRCS's WASH officer in finalizing the implementation plan for WASH and the rehabilitation of wells and boreholes in many affected locations in accordance with the WASH assessment carried out by the WASH assessment team.

Until the end of 2024, the planned WASH activities are:

- Installation of 2000 RO filters in the most affected areas of the storm. This installation will help in enhancing the quality of water and reduce the risk of water borne diseases in the area.
- The rehabilitation of 15 water wells in the most affected areas. This activity will ensure access to the minimum quantity of safe water.
- Water trucking: The purchase of a water truck will support the LRCs with it is preparedness to respond in potential similar crisis and will help supporting the affected areas with the needed temporary access to water, till the water well with be rehabilitated and will provide more sustainable solution in water provision.
- Capacity building of the LRCs in water testing to ensure the quality of water in the affected areas. This activity will include the purchase of water testing kits and the training of LRCs volunteers on water testing in emergencies.
- Distribution of 1000 hygiene kits for the most affected households to ensure access to the basic hygiene items and reduce the risks of water and vector borne diseases. Hygiene promotion campaigns will accompany the distribution of the hygiene kits to ensure the best hygiene practices among all members of the targeted households.

All the planned WASH activities will take in consideration the PGI components in the design of the project and the participatory approach in decision making with the maximum possible participation of women, youth, elderly , PwDs and IDPs.

 <b>Protection, Gender and Inclusion</b>	Female > 18:	27	Female < 18:	-
	Male > 18:	56	Male < 18:	-
<b>Objective:</b>	<i>Communities identify the needs of the most at risk and particularly disadvantaged and marginalized groups, due to inequality, discrimination and other non-respect of their human rights and address their distinct needs</i>			
<b>Key indicators:</b>	<b>Indicator</b>	<b>Actual</b>	<b>Target</b>	
	Number of staff, and volunteers trained on PGI, safeguarding (including tools, mechanisms and reporting channels focused on PSEAH and safeguarding)	83	20	
	Number of referrals to specialized protection services by National Societies	-	50	
	Percentage of activities with PGI mainstreamed minimum standards considered	-	-	

LRCs has policies on protection against sexual exploitation and abuse (PSEA), child safeguarding and protection, and whistleblower protection, and has in place a code of conduct signed by staff.


During this reporting period, referral and safe identification standard operation procedures (SOPs) were finalized and adapted to the emergency context. Adequate communication and community outreach modalities will be determined based on the preferred outcomes of MSNA respondents.

In collaboration with [UNFPA](#), service mapping for reproductive health service points and contacts was finalized. Referral collaboration is activated.

In collaboration with the Violence Against Women Thematic Pillar and the Protection thematic Pillar working groups, service mapping for gender-based violence (GBV) services are underway using an inter-agency modality. The mapping of child protection related services is being developed by the Child Protection Thematic Pillar for Derna floods and will be shared with IFRC once finalized.

A rapid assessment of the Protection, Gender and Integration (PGI) capabilities of the Derna Branch was carried out through interviews with different departments at the branch level to identify priorities for capacity building.

At the time of writing this report and from beginning of October 2024, mobile and static PSS activities are ongoing in north east Libya. Accordingly, LRCS is planning 2 workshops with protection actors active in the targeted areas to review the existing referral pathway and ensure it updated on regular basis. In parallel and during the month of November, a refresher training on safe identification and referral pathway is planned to all volunteers implementing PSS activities with children and adults.

 <b>Migration</b>		Female > 18:	Female < 18:
		Male > 18:	Male < 18:
<b>Objective:</b>	<i>Communities support the needs of migrants and their families and those assisting migrants at all stages of migration (origin, transit and destination)</i>		
<b>Key indicators:</b>	<b>Indicator</b>	<b>Actual</b>	<b>Target</b>
	Number of Humanitarian Service Points established and operated effectively	-	-
	Number of people reached through humanitarian service points (migrants and displaced people)	-	-
	Percentage of IDPs and returnees registered with the support of LRCs.	40,000	-
	Number of assessments conducted to identify migrant and displaced population-specific needs	1	-

As Libya remains actively engaged in relief efforts along its eastern coast, a new humanitarian challenge has emerged. Since April 2023, armed conflict in Sudan has resulted in an influx of approximately 99,600<sup>2</sup> Sudanese refugees into Libya, many seeking refuge in Kufra as follows:

	<b>&lt;4 yrs</b>	<b>5-11yrs</b>	<b>12-17yrs</b>	<b>18-59yrs</b>	<b>60+ yrs</b>
<b>Male</b>	8%	9%	8%	31%	1%
<b>Female</b>	8%	8%	5%	22%	1%

This population includes a range of vulnerable groups, with most refugees housed in informal gathering areas, such as farms and other temporary shelters. These settings often lack basic sanitation and hygiene facilities, posing health risks and creating unsafe environments, particularly for women and children.

To address the needs of these refugees, Libyan Red Crescent (LRC) branches in Kufra and nearby areas have swiftly mobilized, providing food, essential medical supplies, and non-food items (NFIs). Additionally, the Libyan government, with support from WHO, established a centralized emergency response committee. Despite these efforts, refugees continue to face challenges, especially in securing permanent shelter, as the government views their stay as temporary.

The IFRC has supported LRC's branches in responding to the influx by delivering body bags, medical supplies, kitchen sets, and other essential non-food items. Furthermore, LRCS PMER team has facilitated a rapid needs assessment to monitor and support families with specific needs.

The IFRC has played an active role in coordination meetings and events addressing the refugee crisis in Libya. A prominent example was the European-African Migration Conference held in Benghazi, where the Head of Delegation delivered a speech emphasizing the Federation's commitment to managing migration and supporting displaced populations. HOD also gave a brief on IFRC's MENA Migration Framework included strengthening capacity for humanitarian response, enhancing regional coordination, and promoting evidence-based strategies to meet the needs of migrants effectively. Finally HOD also highlighted the importance of establishing humanitarian service points for vulnerable migrants and empowering national societies to advocate for essential services.

During this conference, critical goals and agreements were established, focusing on protecting migrant rights, improving coordination across African and European nations, and addressing root causes through sustainable development, employment opportunities, and stability initiatives. Additional goals included the creation of an African Development Fund to support vital sectors and encourage migrants to remain in their home countries. The IFRC and other participants endorsed the need for collaborative strategies that transcend security-focused solutions, advocating instead for holistic measures such as improved infrastructure, healthcare, and educational development across the continent. A commitment was made to enhance the safety, dignity, and rights of migrants, aligning with international protocols and regional cooperation frameworks set forth during the conference.

<sup>2</sup> [UNHCR Inter-agency bi-weekly update 16-30 September 2024](#)



## Risk Reduction, climate adaptation and Recovery

Female > 18:

Female < 18:

Male > 18:

Male < 18:

### Objective:

*Communities in high-risk areas are prepared for and able to respond to disaster*

Key indicators:	Indicator	Actual	Target
		Number of individuals trained on disaster risk reduction-related areas (vulnerability and capacity assessment or climate change adaptation, first aid, contingency planning, or emergency response)	2
	Number of early warning systems and early action mechanisms developed	-	1

LRCS emergency team continued to work on the EOC guidelines post the training received by them in Qatar. From 24<sup>th</sup> to 30<sup>th</sup> of August, 2 LRCS staff attended an EOC ToT which provided them with the knowledge required to set up the EOC in Benghazi.

Furthermore and building on previous initiative in 2022 that allowed for the completion of the preparedness for effective response (PER) assessment, LRCS will continue to work on the plan of action (POA) and shape it further according to the changes in the context within east Libya. Similarly, LRCS will continue working on its DRM policy which was designed in 2023 and finalize it within the last 2 months of the emergency appeal.

Together with LRCS Operations Director, further key activities are planned under the emergency appeal, and they include:

- The adaptation of the emergency response tool kit through workshops conducted with relevant branches
- Awareness sessions on road accidents
- Supporting the establishment of the EOC at LRCS new HQ in Benghazi
- Afforestation campaign in the affected areas

Finally, IFRC will support the training of the LRCS's NRT, ensuring alignment with global IFRC standards. This training will enhance LRC's ability to respond to both local and national disasters, ensuring better coordination, timely deployment and effective humanitarian service delivery. The training is scheduled to occur in end of November and subject to obtaining timely security clearances for the trainers.

## Enabling approaches



### National Society Strengthening

Objective:	<i>Communities in high-risk areas are prepared for and able to respond to disaster</i>		
<b>Key indicators:</b>	Indicator	Actual	Target
	Number of volunteers and staff trained on disaster management and response capacities to enable immediate service delivery	0	20
	Number of volunteers and staff trained in HR, CEA, PMER, Finance and IM	20	40
	Number of branches implementing Branch Plan of Action based on PER assessment	1	5
	Percentage of rehabilitation of Derna branch achieved	5	100
	Number of HQ and Branches equipped with communication equipment, logistics capacity strengthening, DM needs and IT (segregated by service/support)	0	6
	Number of volunteers insured and equipped	500	1,000
	Number of volunteers and staff who benefitted from MHPSS services	20	40

Through this appeal, IFRC is actively supporting the LRCs in several key areas to enhance its capacities and effectiveness in serving the Libyan communities. Here is a summary of the main activities:

- 1. Build a robust emergency response system:** IFRC is providing critical support for the construction, furnishing, and equipping of a dedicated Emergency Operations Centre (EOC) at LRCs headquarters. The EOC will serve as the nerve center for coordinating disaster response efforts across the country. A plan of action to construct and furnish the EOC is already agreed with LRCs, as well as the development of standard operating procedures (SOPs) through facilitation workshops for LRCs staff and volunteers to create standardized protocols for various emergency response scenarios. This ensures coordinated and effective action during critical situations.
- 2. Enhance Communication Capabilities:** To strengthen the LRCs communication department, IFRC is providing Information Technology (IT) equipment, tools, and programs to improve the department's ability to communicate effectively with the public, media, and partners. This will enhance transparency and improve the impact of LRCs activities.
- 3. Develop Logistics Capacity:** Through a joint effort, IFRC and LRCs are finalizing rehabilitation plans for five warehouses. This will significantly increase storage capacity for essential relief and medical supplies, ensuring preparedness for future emergencies.

An ERU Base camp–facility assessment specialist was deployed to Libya to determine the needs of the Libyan Red Cross as part of its response to Storm Daniel. A base camp assessment was conducted at the site of the LRCs future

National Operational Center, the new temporary location of the Derna Branch and the former polyclinic as well as at the site of the MHPSS community center in Derna. Given that in the meantime, suitable locations and facilities had been identified, to provide space for the local branch and reactivate the activities of the polyclinic as well as a space for the MHPSS center, the conclusions of the ERU facility assessment focused on the supply of equipment, furniture, medical and office materials for these structures. The ERU also offered its assistance in the functional organization of the internal spaces of the new Derna branch location and offered to share guidelines and SOPs on development and management of the Emergency Operation Center (EOC), adapted to the context.

On November 21 and 22, as part of the preparation for the MSNA, a two-day training was organized in Benghazi for 20 PMER focal points (7 women, 13 men) from eleven eastern branches of the National Society. The first day, led by the PMER coordinator, was focused on PMER support and data collection with training on program cycle and the monitoring, evaluation, accountability, and learning (MEAL) framework. The second day of the training, led by the Assessment Cell, which included the Assessment Coordinator and the Humanitarian Information Analyst, focused on the ethical and behavioral aspects of data collection, particularly for enumerators. The training also covered the effective and respectful use of the Kobo Toolbox questionnaire, which was set to be implemented in the field by volunteers. Additionally, the training featured specialized briefings from the WASH Coordinator and the CVA Coordinator, focusing on their respective areas within the MSNA. The aim was to ensure thorough preparation and understanding of the MSNA process among the volunteers.



*The photo on the left showcases the LRCs MHPSS volunteers trained and on the right the MSNA two-day training participants.  
Photo:LRCs*

The MHPSS Coordinator led a five-day training of trainers (ToT) on the Caring for Volunteers program in collaboration with LRCs. A total of 19 volunteers (12 men and 7 women) from nine LRCs eastern branches took part in the training from November 6 to 10, which was designed to create a support network for the National Society volunteers and staff.

To lead the MSNA process, IFRC deployed an assessment coordinator and a humanitarian analyst, supported by information management (IM) and SIMS surge capacities, to work with LRCs. Storm Daniel MSNA is the largest needs assessment of LRCs to date. Go through the process of preparing the proposal, developing questionnaires and tools; the training of LRCs volunteers, and the deployment of the assessment at the field level constitute an interesting and capacitating experience for the National Society and the IFRC.

Planning, monitoring, evaluation and reporting (PMER) and IM skills were also used to develop a monitoring dashboard highlighting the progress of the response to Storm Daniel on the ground. The dashboard scope has since expanded to encompass other LRCs programs or activities, with the aim of maintaining the dashboard on an ongoing basis.



## Coordination and Partnerships

**objective:** *Communities in high-risk areas are prepared for and able to respond to disaster*

Key indicators:	Indicator	Actual	Target
	Number of Movement coordination meetings organized, and updates are provided to the Movement partners	-	1
	Number of External partners coordination meetings organized and/or attended	-	1

The Libyan Red Crescent Society (LRCS) is maintaining close coordination with various local authorities, in line with its auxiliary role to public authorities, while ensuring neutral and independent humanitarian action. Among its key collaborations, LRCS is working closely with the Ministry of Health on mobilizing teams for medical convoys and delivering essential medical equipment. Additionally, the International Federation of Red Cross and Red Crescent Societies (IFRC) Secretariat supports briefing sessions and information sharing with government and institutional donors, further strengthening its engagement.

Both IFRC and LRCS continue to advocate for humanitarian diplomacy and coordinate with other humanitarian actors, including UN agencies and international NGOs (INGOs). IFRC is an observer to the Humanitarian Country Team (HCT) and actively participates in the Inter-Cluster Coordination Team (ICCT) and relevant working group meetings, offering platforms for information sharing, planning, analysis, and strategic coordination. These efforts help enhance response effectiveness across various sectors.

In engaging with key stakeholders, the IFRC and LRCS regularly share the latest developments and strategic priorities, placing a special focus on the humanitarian-development nexus. They emphasize the need to prioritize vulnerable groups in Libya, such as migrants, internally displaced persons (IDPs), and people with mental health conditions.

At the national level, the IFRC continues to coordinate closely with the International Committee of the Red Cross (ICRC) and other Movement partners to align efforts in supporting LRCS's response. Two rounds of mini summits have been convened between IFRC, ICRC, and LRCS to establish a coordinated approach in their support for LRCS's operations.

IFRC/LRCS also plays a central role in the United Nations Disaster Assessment and Coordination (UNDAC) in Libya, with established thematic working groups focusing on areas such as WASH, Health, Cash, and Assessment and Information Management. These groups, attended by surge personnel in coordination with LRCS, aim to improve collaboration and streamline efforts in these critical sectors.

In response to Storm Daniel, the Flood Response Assessment Working Group (AWG), guided by the Data Analysis & Assessment Thematic Working Group and chaired by REACH, IFRC, IOM, and OCHA, is dedicated to enhancing information management and coordination of post-disaster assessments. By standardizing data practices, promoting information sharing, and developing common data sets, the AWG ensures cohesive and efficient data collection and analysis, minimizing duplication of efforts.

Additionally, LRCS has established a WASH working group that includes key partners such as IFRC, ICRC, the German Red Cross, and UNICEF, further enhancing cooperation and effectiveness in delivering WASH services to affected communities.



## Secretariat Services

**Objective:** *Communities in high-risk areas are prepared for and able to respond to disaster*

### ***Human Resources (HR)/administration:***

Since the onset of the crisis, IFRC activated its rapid response mechanism (RRM) to ensure required capacity are in place to support the LRCs' response in managing the operations as close as possible to the disaster. During the first three months of the emergency, more than 18 surge personnel, deployed in-country or working remotely, supported LRCs with following positions: Ops Manager (2 rotations), Health Coordinator, WASH Coordinator, Security Coordinator (2 rotations), Communications Coordinator, PMER Coordinator, Logistics Coordinator, Assessment Coordinator, Humanitarian Info Analyst and SIMS Coordinator (2 rotations), MHPSS Coordinator, Basecamp Facility Assessment Configuration, Procurement Coordinator, MHPSS Officer, and CVA Coordinator

In addition to the surge deployments, a health emergency response unit (ERU) was deployed. This ERU included both an outpatient department (OPD) and a mental health and psychosocial support (MHPSS) module.

The surge window period was closed on January 9, with the last rotation. Currently, the country delegation with the HR department and technical departments are finalizing the pre-selection phase for the long-term positions. As soon as this step is finalized, the recruitment process will continue in order to have the needed positions starting onboard as planned by February 2024.

Two organizational charts options have been developed for the response covering the entire duration of the operation. IFRC will maintain a structure of 23 staff to support the LRCs.

A revised security package is shared with membership partners arriving to provide support to the operation, while a comprehensive security assessment and risk management is continuously updated with mitigation measures to ensure the safety and security of deployed teams deployed in the field.

### ***Information Management (IM)/SIMS and Planning, Monitoring, Evaluation and Reporting (PMER):***

The IM and PMER teams have been supporting the MSNA, including survey design, tool development, volunteers training, data collection, and currently the analyzing and reporting of the results. This has been led by the in-country assessment cell with some support from the regional office surge and SIMS.

The regional IM team and SIMS have also provided maps and infographics to demonstrate the progress of the response. These include an operational overview, timeline and other visualizations that show what goods have come into the country and the work that LRCs has already carried out.

Alongside the MSNA, there has also been a WASH rapid assessment and MHPSS research supported with the design of indicators and the analysis to inform the response in these sectors.

### ***Communications:***

In the aftermath of the floods, IFRC MENA and IFRC global communications teams have implemented a very comprehensive communications plan to present the work of the LRCs, the coordination role of IFRC, and the support of PNSs (social media assets and proactive media interviews).

An IFRC communications coordinator from the MENA regional office was deployed for 20 days to support the LRCs communications team in drafting content and highlighting their response, the role of volunteers, and the needs of the affected population. This included developing an action plan to commemorate the 66<sup>th</sup> anniversary of the LRCs through engaging influencers like the Lebanese singer Elissa and conducting joint media interviews for IFRC and LRCs leaders and teams. With the support from field communications, content, B rolls, photos, and social media assets were gathered, and two stories were published on IFRC.org in two languages. Key messages were constantly updated based on field observations, like recommending cash assistance based on cultural aspects, focusing on wash, and Psychosocial Support services.

In addition to making the voice of the LRCs heard at Xspace and among the movement meetings, the shipments of aid received by IFRC and other partner National Societies (Kizilay, Qatar, Canada RCs) were highlighted, and the reputational risks of the national society was managed during the transition in leadership.

For the next phase, IFRC has agreed on providing capacity-building to LRCs (Training for trainers - Storytelling - strategic communications- media policy, and guidelines) and equipment for the communications department (cameras, laptops, and smartphones).

#### ***Humanitarian diplomacy:***

IFRC uses its humanitarian diplomacy efforts to engage with relevant actors to secure support for the response efforts while ensuring LRCs's commitment to neutrality, impartiality, and independence. Additionally, the IFRC works closely with the LRCs to advocate for access and ensure that the delivery of assistance is not hampered by political or security considerations.

#### ***Membership coordination***

In-country partners engaged within the framework of IFRC's Agenda for Renewal's New Way of Working (New WoW) throughout the reporting period. Among others, some PNS are currently engaged in discussions with IFRC to explore pursuing shared leadership in the implementation of the IFRC Emergency Appeal operation, leveraging their expertise, knowledge, and technical capacities.

IFRC and LRCS are in close coordination with PNS to keep them updated on the most current humanitarian situation on the ground, the evolving operational context, and highlight any new risks in security or the overall operations. These updates have been well received by PNSs as they provide good information on ground realities which supports PNS with their internal discussions on Libya and influencing engagements with their back donors.

#### ***Movement coordination and cooperation***

Movement partners in-country continue to coordinate closely in line with existing Movement Coordination and Cooperation mechanisms anchored under a Movement Cooperation Agreement (MCA). An Emergency Response Taskforce (ERT) was agreed to be responsible for developing and monitoring the LRCS operational strategy, with LRCS at the centre and the IFRC Secretariat providing strategic coordination for the benefit of the IFRC Membership.

#### ***Cluster Coordination***

Supported by IFRC , LRCS were engaged with various cluster members such as UN TWG's to ensure alignment and interventions following the agreed model and the common minimum standards by the Clusters.

IFRC is continuing its coordination and taking part in different meetings with the cluster. And engaged on a monthly basis in these platforms to avoid duplication and have a consistent approach of all partners in their support for operational activities, During the reporting period, three meetings were held and IFRC participated in each of them. The meetings provided a platform for cluster members to share progress, discuss challenges and

new guidelines and share information on what the partners were doing in terms of various interventions to avoid duplication and ensure timely coordinated and integrated humanitarian services.

Furthermore, an NSD Delegate has been appointed in moving forward with its NSDI and NSD Roadmap with the view of accelerating organizational strengthening in line with LRCS strategic plan. Recruitment of operations manager, procurement delegate took place early June to boost some of the operational activities that were put on hold since December 2023

### **Orientation of LRCS senior management and staff**

LRCS has undergone several changes for their management structures since August 2023. As such, a key priority has been to provide orientation for the new management on Movement Principles, key IFRC policies and procedures, and various humanitarian standards. During May, LRCS held its general assembly which brought together head of branches across the country, regional, and branch levels covering various topics whom endorsed the strategic directions of the new management, as well as the corrective measures and actions taken by the new management on fraud and corruption prevention, integrity, and safeguarding .



## **Community Engagement and Accountability**

### **Objective:**

*Communities in high-risk areas are prepared for and able to respond to disaster*

<b>Key indicators:</b>	<b>Indicator</b>	<b>Actual</b>	<b>Target</b>
	Number of feedback comments collected, disaggregated by sex, age, and disability, including sensitive feedback linked to SEA, fraud, corruption or protection concerns	-	-
	Percentage of project activities that have successfully integrated and implemented safe and accessible feedback and complaints mechanisms	-	-
	Percentage of Staff, volunteers, and leadership, trained on Community Engagement and accountability (disaggregated by staff, volunteers, and sex)	-	-
	Number of activities/interventions that are followed by satisfaction surveys	-	1
	Number of accessible feedback and complaints mechanisms developed and functional	-	-

Community engagement and accountability (CEA) is mainstreamed throughout the response in support of ongoing LRCs operations. Ensuring strong participation and information sharing with affected populations and all stakeholders is a key objective. Progress has been made during this reporting period.

A CEA Rapid Capacity assessment was conducted and used to inform the CEA capacity-building action plan which was developed targeting the LRCs branches in Derna and surrounding areas, as well as LRCs headquarters.

The management feedback policy has been reviewed and technically approved by LRCs to ensure an institutional framework for feedback and complaints mechanisms. The standard operation procedures (SoPs) for complaints and feedback mechanism are finalized and adopted for the emergency response. Adequate modalities of community communication and outreach will be put in place based on the results of the MSNA in terms of community preferences. An IFRC technical mission to support LRCS efforts in enhancing its CEA mechanisms , quality assurance and accountability feedback platforms are planned in September 2024.

## **D. FUNDING**

To date, 57 percent of the IFRC revised Emergency Appeal's funding needs have been covered (see [Donors' Response](#)). The IFRC and the LRCs express their gratitude to the generous donors and kindly encourage continued donations to support this Emergency Appeal in order to enable the Libya Red Crescent Society to continue providing support to meet the immediate, medium, and long-term needs of the populations affected by the earthquake.

## Contact information

For further information, specifically related to this operation please contact:

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### For In-Kind Donations and Mobilization table support:

- **Global Humanitarian Services and Supply Chain Management Unit, MENA Regional Office:** Cornelis Jan Dees, Regional Head, [cornelis.dees@ifrc.org](mailto:cornelis.dees@ifrc.org)

### Reference documents



Click here for:

- Previous [Appeals and updates](#)
- [Operational Strategy](#)

## How we work

All IFRC assistance seeks to adhere the **Code of Conduct** for the International Red Cross and Red Crescent Movement and Non-Governmental Organizations (NGO's) in Disaster Relief, the **Humanitarian Charter and Minimum Standards in Humanitarian Response (Sphere)** in delivering assistance to the most vulnerable, to **Principles of Humanitarian Action** and **IFRC policies and procedures**. The IFRC's vision is to inspire, encourage, facilitate and promote at all times all forms of humanitarian activities by National Societies, with a view to preventing and alleviating human suffering, and thereby contributing to the maintenance and promotion of human dignity and peace in the world.