



LIBYA

The Impact of Civil Conflict on the Health of a Nation

Presenter: Nicole L. Crowell

Global Health Issues, Spring 2021



ABOUT LIBYA

- Located in North Africa and borders the Mediterranean Sea
- Major cities include Tripoli (capital) and Benghazi
- Mediterranean climate along coast, but dry desert climate inland
- Population as of July 2021 was 7,017,224
- Immigrants represent 12 percent of the population
- GDP 90.89 billion (2016) (U.S. Embassy, n.d.; The World Factbook, 2021)





ABOUT LIBYA

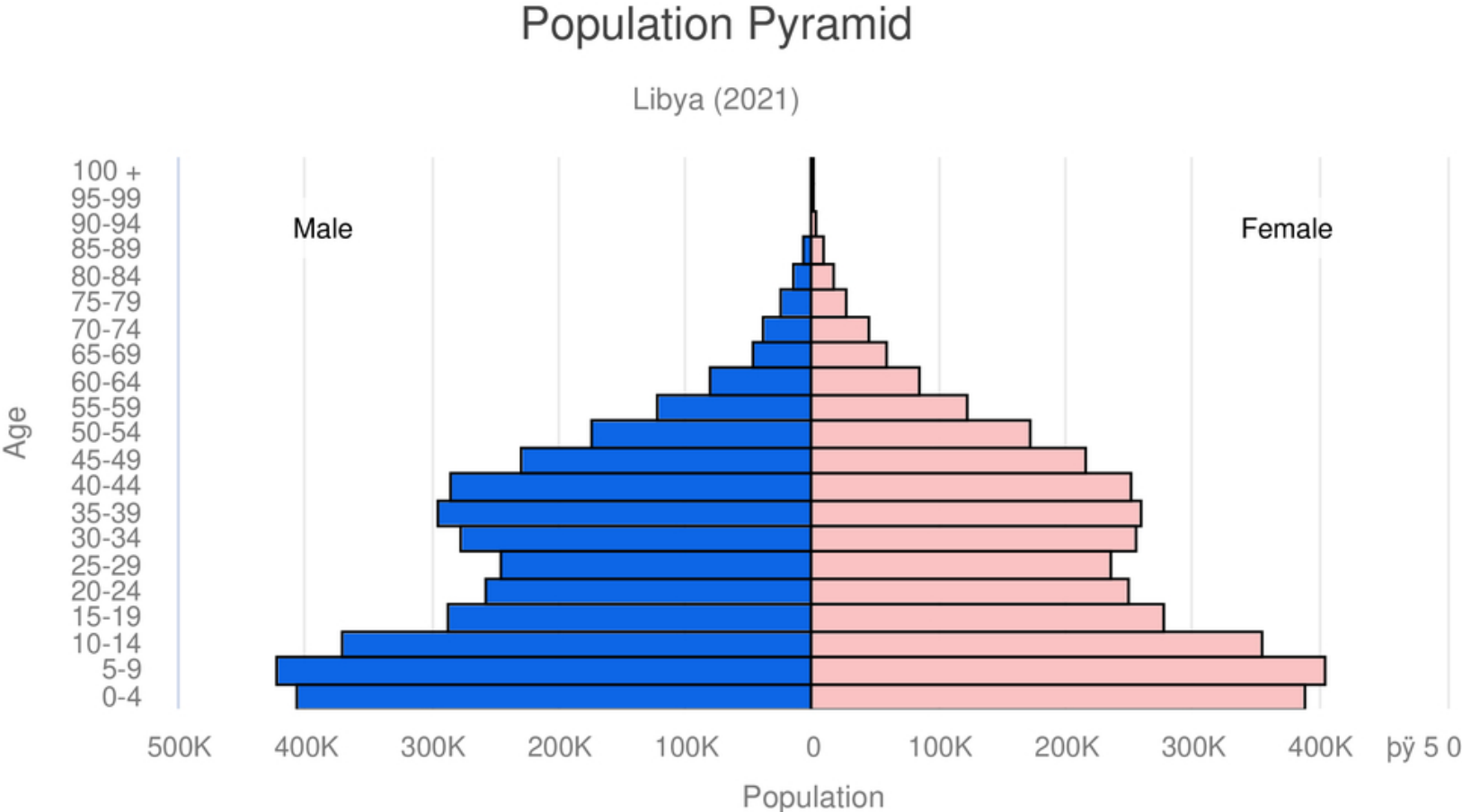
- Annual population growth rate is 1.76 percent (2021)
- Birth rate: 22.23 births/1000 population (2021)
- The maternal mortality rate is 72 deaths/100,000 live births (2017)
- Infant mortality rate is 11.48 deaths/1000 live births
- Life expectancy is 76.93 years (U.S. Embassy, n.d.; The World Factbook, 2021)



ABOUT LIBYA

- The total fertility rate is 3.13 children born per woman
- Contraceptive use is 27.7 percent
- There are 2.09 physicians/1000 population as of 2017
- As of 2017, there are 3.2 hospital beds available per 1000 of the population
- Percentage of underweight children under the age of 5 years is 11.7 percent
- A total of 91 percent of the population is literate (The World Factbook, 2021)

POPULATION DEMOGRAPHICS



CIVIL WAR

- Began in February 2011 under 42-year dictatorship of Muammar Gaddafi
- Gaddafi employed violence to end pro-democracy demonstrations sparking a civil war
- Gaddafi was removed from power in August 2011 by rebel opponents with western support
- Post-Gaddafi Libya is marked by division over the country's power, and oil wealth
- The conflict has resulted in violence, economic instability, decrease in oil prices, and loss of government funds (Zarocostas, 2018)

CONFLICT AFFECTED POPULATIONS

A total of 1.75 million people have been impacted by the conflict

More than 30,000 have been injured due to conflict

A total of 2.44 million including 348,000 children need protection and humanitarian aid

There are 435,000 internally displaced people (IDPs)

Large migrant/refugee population (585,000) at increased risk of harm (WHO, 2021; UNICEF, 2020)



HEALTH ISSUES CAUSED BY THE CONFLICT



Prior to the civil conflict, Libya was considered a model for delivering low-cost healthcare with good outcomes in developing countries (Sullivan et al., 2011). Since the start of the civil conflict:

- Approximately 681,000 people need health and nutrition assistance
- Libyan hospitals need 2,360 specialists, 4,997 nurses, and 359 midwives
- Deficit of 43 general practitioners in the south region
- Lack of safe drinking water – 315,000 people have a need for safe drinking water, sanitation, and hygiene (UNICEF, 2020)



HEALTH ISSUES CAUSED BY THE CONFLICT

- Pregnant women and those in need of surgical facilities have received compromised care as trauma patients take precedent
- Patients with chronic diseases, mental health disorders, and disabilities face deficiencies in care delivery due to limited of access to medical facilities
- Emergency transportation to hospitals has been compromised due to security issues, fuel shortages, and communication issues (WHO, 2015)



HEALTH ISSUES CAUSED BY CONFLICT

- Protective services are needed by 283,000 children
- Children are at increased risk for violence, trafficking, exploitation, gender-based violence, targeted recruitment for fighting and unlawful detention (UNICEF, 2020)



INFRASTRUCTURE

- Severe damage has occurred to housing structures, schools, and health facilities
- Gaps in medical staffing and supplies have been reported
- Irregular payment has led to workforce inefficiencies (WHO, 2017)
- COVID-19 has exacerbated infrastructure challenges, limiting laboratory capacity, causing water and electricity shortages, and closing schools since March 2020 (UNICEF, 2020)
- General Service Readiness based on amenities, equipment, standard precaution, diagnostic, medicine: 69 percent for hospitals, 37 percent for primary health care (PHC) centers (WHO, 2017)



INFRASTRUCTURE

- Only 40 percent of hospital inpatient beds are functional
- Current shortages of lifesaving medicines and equipment
- In 2017, 17 of 97 hospitals were closed and only 4 percent were functioning at 75-80 percent capacity
- Primary care network is debilitated and needs to be restored – 20 percent of primary care facilities are closed, and the others are not equipped to provide full services (WHO, 2017)





1.3 million people in need

of health humanitarian aid in 2017 (HRP estimates for 2017)



SHORTAGES
OF MEDICINES



MALDISTRIBUTION OF
HEALTH WORKFORCE



SHORTAGES
OF RESOURCES

OUT OF
97
HOSPITALS



80 are partialy or fully
functional

17 are non functional

OUT OF
1,355
PHC CENTERS



1 082 are partialy or fully
functional

273 are non functional



ONLY 18 PHC
CENTRES PROVIDE

**FAMILY
PLANNING**



568 PHC
CENTRES PROVIDE

**TREATMENT
FOR NCDs**



ONLY 184 PHC
CENTRES PROVIDE

**ANTENATAL
CARE**

Inpatient beds

39%

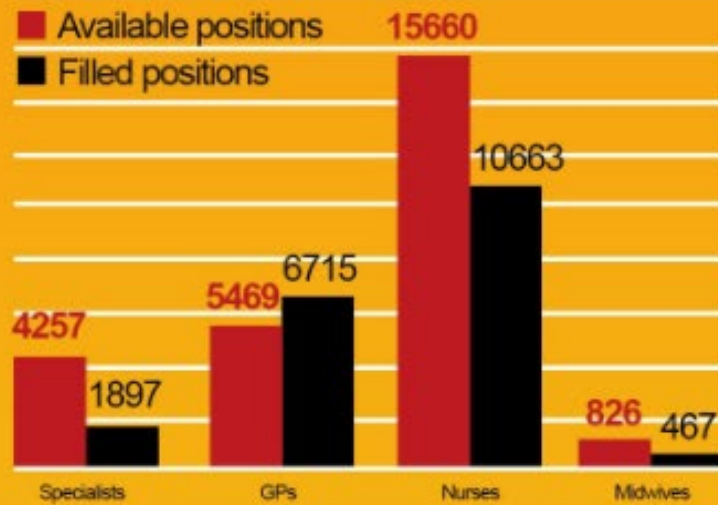
of available hospital beds
are currently functional

15 beds

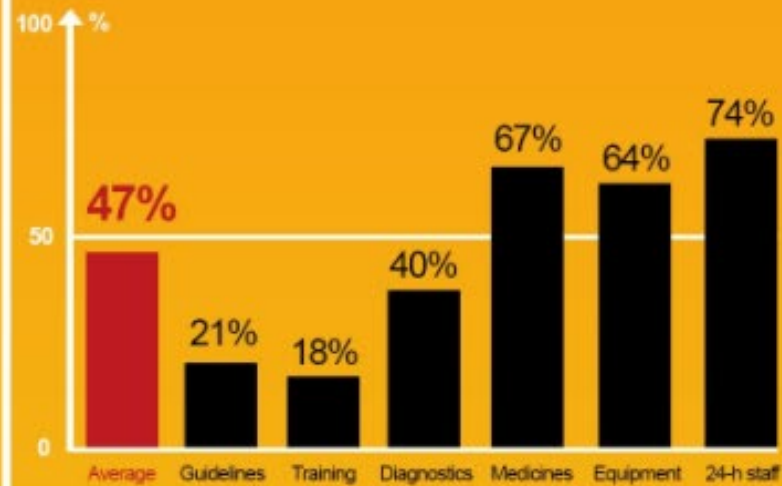
per 10 000 population are
currently available, against a
target of 25 beds per 10 000
population

LIBYA HEALTH SYSTEM OVERVIEW - 2017

HOSPITAL WORKFORCE



READINESS OF HEALTH EMERGENCY SERVICES



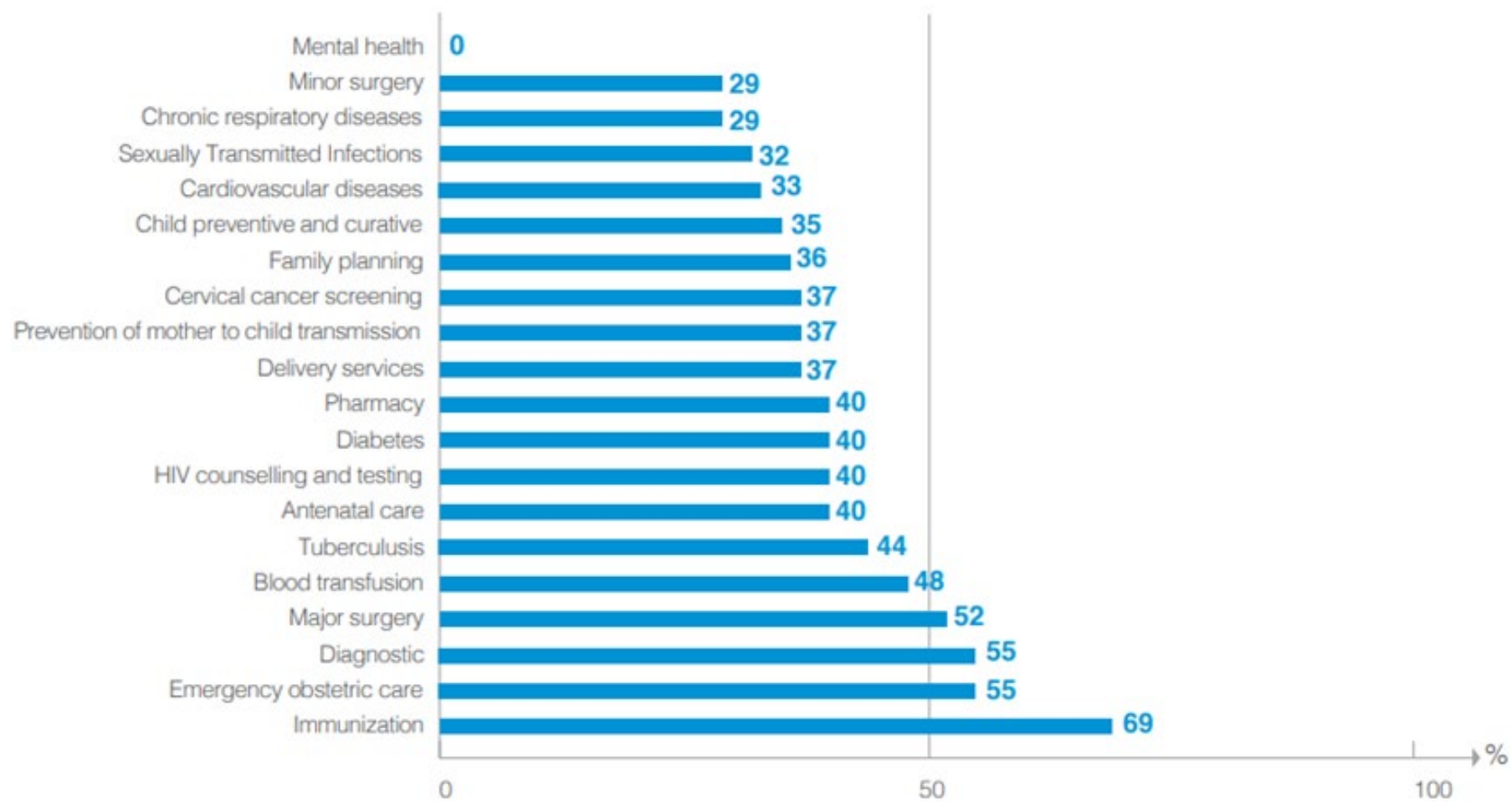
8 out of 22

districts have maternal bed density lower than WHO standard of 10 beds per 10 000 pregnant women



LIBYA HEALTH SYSTEM OVERVIEW - 2017

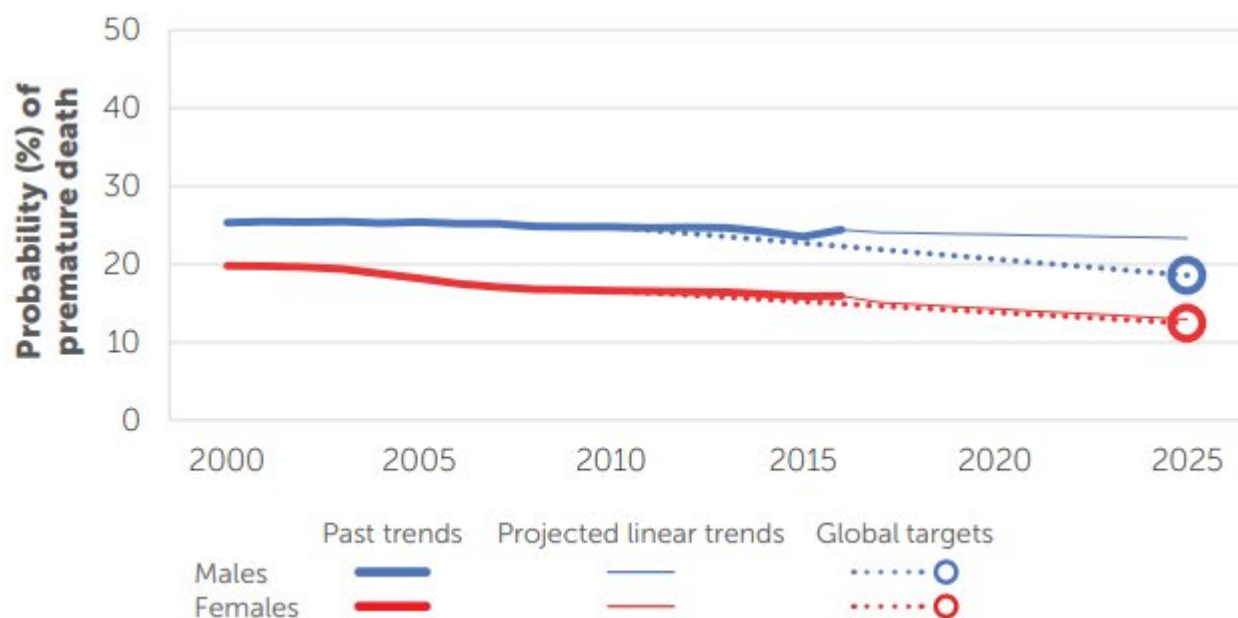
Specific Health Service Readiness, Libya, 2017



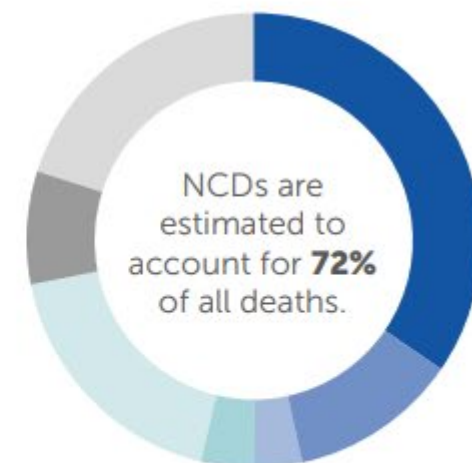
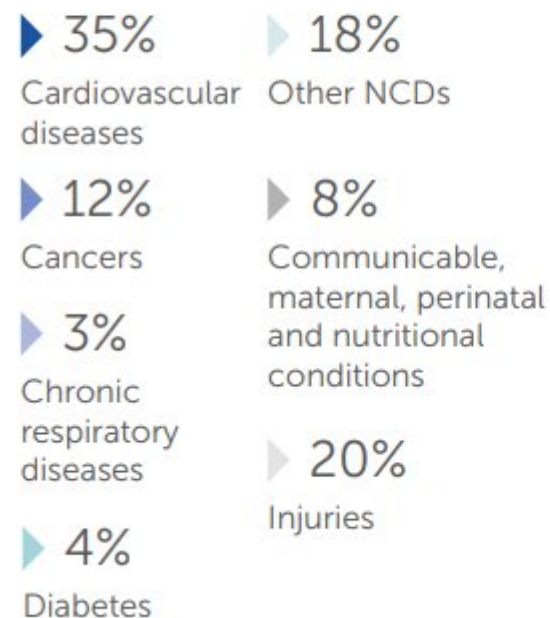
LIBYA

2016 TOTAL POPULATION: 6 293 000
2016 TOTAL DEATHS: 34 000

RISK OF PREMATURE DEATH DUE TO NCDS (%)*



PROPORTIONAL MORTALITY*





BARRIERS TO GLOBAL ASSISTANCE

- Violence hinders access to the provision of humanitarian aid
- Some areas are inaccessible because of ongoing conflict
- Healthcare workers have been attacked by armed groups which may increase difficulty in recruiting outside medical workers (United Nations, 2018)
- Fewer patients can be sent abroad for medical treatment due to budgetary deficits (WHO, 2015)

CURRENT NEEDS FOR HEALTH IMPROVEMENT

National health policy
and strategy
development is
needed

Human resource capacity needs to be strengthened

Deficits in healthcare system infrastructure need to be addressed

Government and donor funding is needed to adequately address healthcare issues

Consistent supply of essential medicines and supplies needs to be restored (WHO, 2017)

CURRENT NEEDS FOR HEALTH IMPROVEMENT

Health emergency management program should be implemented

Emergency and essential health services need to be restored

Early warning and response system for disease outbreaks needs to be strengthened

Specialized services for people with disabilities must be established (WHO, 2017)



REFERENCES

Institute of Medicine. (2016, July 20). IOM 65th anniversary: *Libya evacuation* [Video]. Youtube.

<https://www.youtube.com/watch?v=uM2v07zFYwQ>

Sullivan, R., McQuinn, B., & Purushotham, A. (2011). How are we going to rebuild public health in Libya? *Journal of the Royal Society of Medicine*, 104(12), 490–492.

<https://doi.org/10.1258/jrsm.2011.110230>

The World Factbook. (n.d.) *Libya*.

<https://www.cia.gov/the-world-factbook/countries/libya/map>

The World Factbook. (2021, February 25). *Libya*.

<https://www.cia.gov/the-world-factbook/countries/libya/#people-and-society>

UNICEF. (n.d.). *Libya appeal*. <https://www.unicef.org/appeals/libya>



United Nations. (2018, May 22). *Libya: Healthcare under attack*.

https://www.ohchr.org/Documents/Countries/LY/21052018_Attacks_on_Health_Care_EN.pdf

United Nations Human Rights. (2018, May 13). *Healthcare under attack in Libya* [Video]. Youtube.

<https://www.youtube.com/watch?v=GdcYfiRIDxc>

U.S. Embassy. (n.d.). *U.S. Embassy in Libya*.

<https://ly.usembassy.gov/our-relationship/policy-history/information-about-libya/>

World Health Organization. (2015, May). *Humanitarian crisis in Libya*.

https://www.who.int/hac/crises/lby/libya_phra_may2015.pdf

World Health Organization. (2021). *Humanitarian health action*.

<https://www.who.int/hac/crises/lby/appeals/en/>

World Health Organization. (2017). *Libya health emergencies and humanitarian update*.

<https://www.who.int/hac/crises/lby/libya-health-situation-report-june-july2017.pdf?ua=1>



World Health Organization. (2017). *Libya health situation reports*.

<https://www.who.int/hac/crises/lby/sitreps/en/>

World Health Organization. (2018). *Noncommunicable Diseases (NCD) Country Profiles, 2018*.

https://www.who.int/nmh/countries/lby_en.pdf?ua=1

World Health Organization. (2011, April). *Photo of Libyans fleeing conflict*.

https://www.who.int/features/galleries/libyan_conflict_photo_gallery/en/

Zarocostas, J. (2018, March 2014). Libya: War and migration strain a broken health system. *The Lancet*, 391.

<https://www.thelancet.com/action/showPdf?pii=S0140-6736%2818%2930505-1>