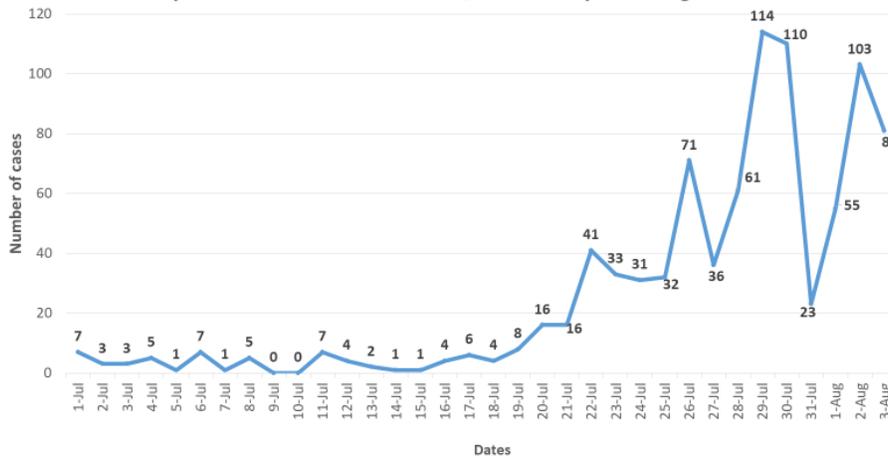


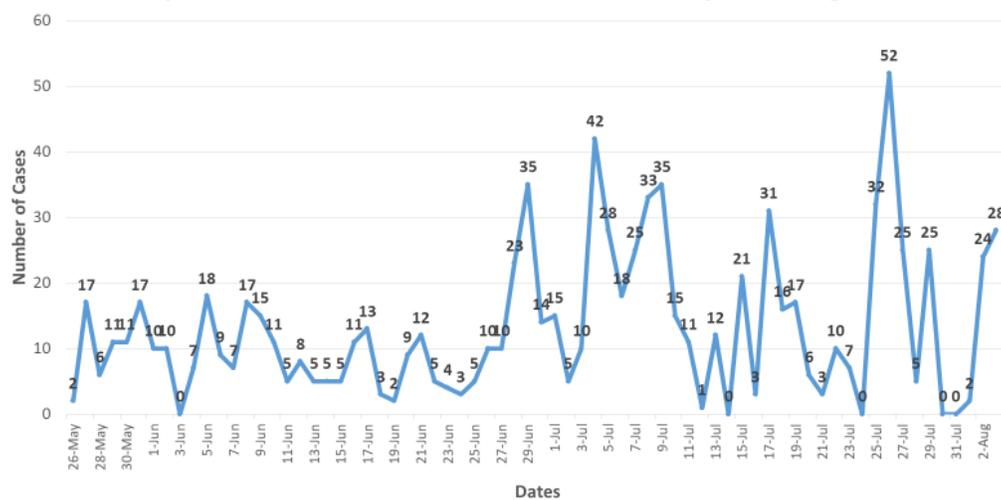
Testing per Laboratory – Epi week 32, (03/08/2020)

LABORATORY	3/8/2020	4/8/2020	5/8/2020	6/8/2020	7/8/2020	8/8/2020	9/8/2020	WEEK 32	% Contribution
NCDC TRIPOLI	320							320	29.4
NCDC MISRATA	545							545	50.0
NCDC SABHA	128							128	11.7
BENGAZI MC	43							43	3.9
KWEIFIA CHEST HOSPITAL	0							0	0.0
TRIPOLI UNIVERSITY HOSP	0							0	0.0
MEDICAL BIOTECHNICAL CENTER	0							0	0.0
ANIMAL HEALTH	0							0	0.0
TRIPOLI CENTRAL HOSPITAL	0							0	0.0
NCDC ZLITEN	26							26	2.4
GHARYAN NCDC	28							28	2.6
MAETIGA ISOLATION CENTER	0							0	0.0
AL-KHADRA HOSPITAL	0							0	0.0
AL-JAFRA	0							0	0.0
NCDC ZAWIYA	0							0	0.0
TOTAL	1090							1090	100.0

Misrata daily confirmed cases of COVID-19, from 01 July to 03 August 2020



Sabha daily confirmed cases of COVID-19, from 26 May to 03 August 2020



Highlights

- Under WHO's transmission scenarios, Libya's status has been revised from "clusters of cases" to "community transmission". A total of 4224 people in Libya have been infected with COVID-19. Of this number, 3495 people remain actively infected, 633 people have recovered, and 93 people have died. (This translates to 614 confirmed cases and 13 deaths per 1 million population.) The national case fatality rate is 2.27%.
- The municipalities reporting a significant increase are Tripoli, Misrata, Sebha, Zliten Ashshatti, Benghazi, Ubari, Janzour and Zawiya.
- Thus far, a total of 68 027 specimens have been tested. This number includes 38 784 in Tripoli, 14 045 in Benghazi, 8604 in Misrata and 5389 in Sebha.
- Nationwide, there are severe shortages of GeneXpert cartridges and laboratory reagents used for virus extraction.
- On 31 July 2020, the Government of National Accord (GNA) declared a five-day lockdown starting the same day.
- Misrata is emerging as a hotspot. The city has the second largest number of people infected with COVID-19.

Collaboration with national authorities

- On 4 August 2020, the Libyan Ambassador to the United Nations met WHO's Director-General to discuss the evolving COVID-19 situation and request increased support from WHO.
- WHO is continuing to brief Ambassadors to Libya on the COVID-19 situation and the challenges faced by WHO in its efforts to support the national response.

Response

Pillar 1: Coordination

- WHO is continuing to disseminate daily updates showing new and cumulative figures for COVID-19. It also attends the weekly meetings of the National Centre for Disease Control's (NCDC) COVID-19 steering committee.
- WHO reviewed the stakeholder analysis for the UNSMIL/UNDP health diplomacy project, which aims to use COVID-19 as an example to build health as a bridge to peace..
- Following the registration of the first case of COVID-19 in Tobruk, WHO participated in the emergency meetings of the local medical advisory committee and facilitated discussions between the Ministry of the Interior and the COVID-19 advisory committee in Tobruk.
- WHO is in daily contact with the Sebha crisis committee and the local health authorities. It participated in a meeting with the DG and staff of Sebha Medical Centre to explore the support needed to maintain essential health services that have been disrupted due to the spread of COVID-19 in the city.
- With the Health System Department in the regional office in Cairo, WHO is reviewing the potential role the private health sector in Libya could play in responding to COVID-19.

Pillar 2: Risk communication and community engagement (RCCE)

- Preparations are in place for printing flyers and posters, installing billboards and procuring time slots for COVID-19 messages in radio and television in Libya.

Pillar 3: Surveillance, rapid response teams and case investigation

- WHO is continuing to follow up on all newly registered cases across the country. Several municipalities including Tripoli, Misrata and Tobruk have seen a rise in cases over the past two weeks.
- Publication of the MoH's weekly EWARN bulletin has resumed. The bulletin now includes COVID-19 data.
- Following discussions with EMRO and HQ on strengthening EWARN in Libya in the context of COVID-19, WHO has prepared an action plan to strengthen current reporting sites and add new ones (including private facilities) through training staff, procuring IT equipment, and other measures.
- Following a review of the transmission scenario classification for Libya, WHO has reclassified the country as "community transmission". Tripoli and Sebha have community transmission and eight municipalities have clusters of cases.

Pillar 4: Points of entry

- Flights from Libya to other countries resumed on 26 July 2020. Air travel into the country has been suspended for the duration of the new lockdown.
- WHO participated in a technical meeting with IOM and the NCDC on using EWARN to improve community-based surveillance and track migrant flows.

Pillar 5: National laboratory

- There are acute shortages of GeneXpert cartridges across the country. On behalf of the MoH, WHO is following up with different vendors to ascertain the availability of these supplies.
- There are also widespread shortages of virus extraction laboratory reagents.
- WHO has facilitated the distribution of a new RT-PCR machine to the laboratory in Al Bayda. In coordination with WHO, the head of the COVID-19 laboratory in Benghazi has visited Al Bayda to assess the laboratory and initiate pre-installation arrangements.

Pillar 6: Infection prevention and control (IPC)

- WHO organized three workshops on COVID-19 case management and IPC for primary health care doctors and nurses (in Benghazi, Alkoms and Albayda).
- WHO coordinated virtual training courses (delivered by Medical Training Innovation) for staff from Sebha Isolation Centre, Brak Ashshatti Isolation Centre, Sebha Medical Centre, Sebha Triage Centre, Sebha University, Tragen General Hospital, Bent Baya Rural Hospital, Berket PHC in Ghat and Tasawah Rural Hospital. The trainings covered COVID-19 infection and cardiac complications, respiratory support and proning techniques, and laboratory genotyping protocols.

Pillar 7: Case management

No update.

Pillar 8: Operational support and logistics

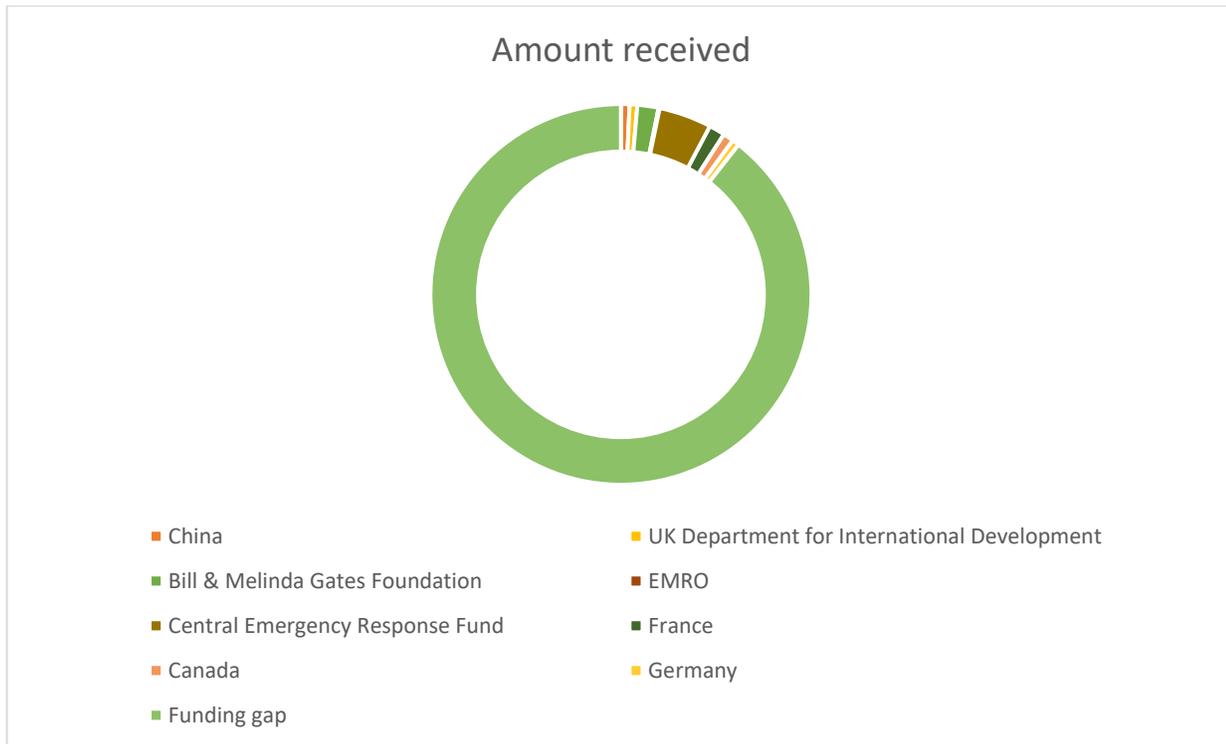
- A shipment of COVID-19 PCR laboratory supplies has arrived at Misrata Airport.
- WHO supported the delivery of extraction kits, dry swabs, swabs, extraction machines and transfer tubes from the NCDC in Tripoli to Benghazi.

Pillar 9: Maintaining essential health services

- WHO dispatched laboratory reagents and IEHK modules to health facilities in Sebha, Brak and Murzuk.

FUNDS RECEIVED BY WHO

WHO has requested USD 22 300 000 to support the response to COVID-19 in Libya. Thus far, it has received USD 2 362 300 in contributions and firm pledges. It has submitted funding proposals to the African Development Bank (USD 500 000), USAID (USD 925 550) and the EU (EUR 6 million each for WHO, UNICEF and IOM).



Donor	Amount received
China	162,500
UK Department for International Development	145,000
Bill & Melinda Gates Foundation	400,000
EMRO	20,000
Central Emergency Response Fund	1,000,000
France	300,000
Canada	200,000
Germany	134,800
Funding gap	19,937,700