



Col Masood, Head of Coast Guards Libya, Dr Jaffar Hussain Head of Mission WHO Libya, Mr Mohammad Ali Bishr, Head of DCIM, MOI Libya, Dr Osama Sharif, Technical Officer WHO Libya (standing), H.E Dr Omar Bashir Al Taher, Minister of Health Libya, Dr Raniero Guerra, ADG/WSI WHO headquarters, Dr Fadel Kaabar Advisor to Minister of Health Libya (standing), Dr Santini Severoni, Coordinator RGO/PCR WHO Regional Office for Europe, Dr Ali Ardalan Emergency Coordinator WHO Libya09 May 2018 – A high level mission of the World Health Organization (WHO) visited Libya from 4 to 7 May to review the migration health situation in Libya and to identify key public health immediate needs that WHO may consider. The mission met several stakeholders and promoted actively a universal health coverage approach to make sure that migrants and displaced population are not left behind.

The mission was led by Dr Raniero Guerra, WHO Strategic Initiatives Assistant Director General, accompanied by Dr Syed Jaffar Hussain, WHO Representative and Head of Mission in Libya; Dr Santino Severoni, the Coordinator of Public Health Migration of WHO Regional Office for Europe; and Dr Ali Ardalan, the Emergency Team Lead of WHO Libya.

The mission met high level stakeholders, such as H.E. the Special Representative of Secretary General ; H.E. the Minister of Health; H.E. the Minister of IDPs; and the Commander in Chief of the Coastal Guard as well as the DG of Directorate for Combatting Illegal Migration (DCIM). Bilateral meetings were also held with heads and senior staff of IOM, UNHCR, and UNFPA as well as IMC and other NGOs and bilaterals such as the Italian Embassy representative.

A government led detention center, as well as a migrant's community centre was visited.

Libya continues to present one of the most complex mixed migration situations, with groups having different immediate needs and falling under different protection frameworks. The visit to

Libya re-confirmed that the migrant populations are at risk for poorer health outcomes, impacted by the type of migration, the burdens and stressors experienced during the journey, and the provision of health care in transit and destination countries.

“Libyan health systems must adjust to the needs of migrants and displaced population through the integration of their access to the health services while promoting health coverage for the whole population and definitely not at the detriment of Libyans”, said Dr Guerra. Achieving this goal requires a sustainable system approach to address the health of migrants as well as the host community, rather than short term humanitarian assistance.

As such “WHO Libya has supported MOH to launch a specialized unit on Migrants’ Health aiming at minimizing the public health risks of migrants and displaced populations and promoting their health status in whole Libya through enhanced coordination, improved evidence, and timely and quality provision services”, announced by Dr Syed Jaffar Hussain, WR and head of Mission In Libya.

“The WHO high level mission to Libya is an opportunity for WHO to initiate a multi-regional collaboration, sharing good practices and policy dialogue and proposing a roadmap of interventions to promote health of migrants and displaced population in Libya. This may be done by establishing and supporting cross border multi-country operations and collaboration of WR offices in countries that share borders or that are involved in the regional movement of migrants, refugees and IDPs. Collaboration between WHO EURO and EMRO will be promoted mobilizing also the Libyan Ministry of Health Officials and health experts in study tours, participating in the WHO EURO Summer School on health and migration and inter-regional migration health activities”, announced Dr. Santino Severoni, Migration Health Coordinator, WHO Regional Office for Europe.

Finally, WHO will continue to support the MoH in setting up an advocacy and external communication programme addressing the general audience to overcome stigma, promote integration and support with and by the hosting communities, as well as advocating for additional investment in the active offer of diagnosis and treatment for such key diseases as HIV, TB, hepatitis, but also for diabetes, hypertension, cancer.

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