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COMMENTARY



## Libya: mental health challenges a decade after the Arab spring

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Libya, the fourth-largest country in Africa, is to the north of and along the Mediterranean Sea. Both Egypt and Tunisia border Libya to the east and west, respectively. Tripoli is the largest city and capital. Libya's total population is close to 7 million, and the life expectancy at birth for males and females is over 70 years of age (World Bank [n.d.](#)).

Libya's mental health system has long been considered inefficient and inadequate for the needs of the last few decades (El Oakley et al. [2013](#)) and going through a civil war has not made things any better. The prevalence of common mental disorders (CMD) ranged from 4.3% to 58.6% for depression and 8.8% to 56% for anxiety (Abdulshafea et al. [2021](#)). Thousands of Libyans need treatment for mental health issues – more than ever before (Arie [2011](#)) – and the risks and pressures associated with the civil war have also significantly affected the health care workers (Elhadi et al. [2021](#)). In the past, access to mental health care was only available at government funded hospital settings, without many community outreach services providing psychological support (El-Badri [2013](#)). Residents of the smaller cities and rural communities, therefore, often struggle to access mental health services.

Currently, Libya has two major public mental health institutions, Alrazi Psychiatric Hospital, located in the capital city of Tripoli, and Ali Alrui'i Psychiatric Hospital, which is in Benghazi (Abuazza [2013](#)). Ali Alrui'i is formerly known as Benghazi Psychiatric Hospital, renamed after the Libyan legend of psychiatry, Dr Ali Alrui'i, in 2020 after his death. There are two other psychiatry departments in Tripoli, one at Tripoli Central Hospital in Shara' Azzawya Street and one at the National Centre for Disease Control in Gurgi Street. There are four separate outpatient psychiatric centres in the cities of Alkufra, Misrata, Sebha, and Zentan, all of which are government funded. Libya has seen a growth in private

psychiatry services in the past 10 years, where walk-in clinics are now seen throughout the capital of Tripoli. Many similar services have commenced in other cities. Many hospitals and clinics have provided telepsychiatry, online psychological support, and psychiatric counselling services since 2019 and great demand has been shown from both the patient and provider (El Hayek et al. 2020). However, these private consultation practices are not regularly controlled and monitored by the Ministry of Health, and further regulations are required to maintain standards.

Libyan physicians were not aware or accustomed to telehealth use before 2005 (El Gatit et al. 2008). Now health care providers provide digital medical services throughout the year, which have proven to be effective, especially in the field of psychiatry. Regardless of the prevalent stigma in society, many patients prefer this method of communication with their healthcare providers for several reasons, such as privacy, travel limitations, fear of contacting the COVID-19 virus and other communicable diseases, and as it is less time consuming. Many Libyans preferred video consultations to in-person appointments, which have proven convenient and effective (Elhadi et al. 2021). Telepsychiatry was started in Libya by Speetar, a telehealth-based application, launched in 2016 with the support of the UNDP, MIT Sandbox Innovation Fund, and Harvard University (UNDP 2020). Speetar platform has over 1500 doctors in over 20 specialities, with more than 30,000 users, with many in the field of psychiatry, delivering more than 850 virtual visits per month with a high standard of user privacy and confidentiality according to HIPPA (Health Insurance Portability and Accountability Act), and has achieved an NPS Score of 9+ (Campana 2020).

Libya's first free psychosocial hotline was established in late 2019, and service users were able to call or text 1417 from their mobile phones toll-free. Mental health advice, counselling, support, and legal advice were available 24 hours a day, 7 days a week from this project, a partnership between the Ministry of Social Affairs and the United Nations Population Fund (UNFPA) (UNFPA Libya 2019).

Libya has two new mental health associations established in the past few years, the Libyan Psychological Association and the Libyan Association of Psychiatry, Neurology and Neurosurgery (WPA n.d.). Both associations aim to expand mental health services throughout Libya, including to regional villages and the Sahara areas, improving training services and research. The Libyan Association of Psychiatry, Neurology and Neurosurgery successfully partnered with the World Psychiatric Association as a member association recently.

Along with the support of the World Health Organization, the Libyan Ministry of Health has strived to enhance access to mental health services since the civil war of 2011 (Rhouma et al. 2016). Projects are implemented to add mental health services to those provided in primary health care centres and community-based settings (WHO EMRO 2020). Psychological training has been provided by organizations, such as the Mental Health Gap Action Programme (mhGAP), to amplify

the skills and knowledge of primary health care providers. A pool of master trainers has been identified to build up the capabilities of non-specialists, and a six-month diploma programme has been implemented (WHO EMRO 2020a).

Despite the international support, Libya is still facing challenges due to stigma, lack of resources, and a shortage of qualified and trained psychiatrists who can provide psychiatric consultations and mental health services in the underserved and rural communities (Abuazza 2013). For example, the city of Misrata, located about 187 km east of Tripoli, and 825 km west of Benghazi, with a population of 881,000, the third-largest city in Libya, has only four qualified psychiatrists. Furthermore, the city of Zwara, with a population of 56,000, has only one qualified psychiatrist. Tripoli, Libya's capital and the most populated city with a population of 3,072 million, has fewer than 70 psychiatrists (CGTN 2021).

Most Libyan citizens are unable to seek private psychiatric care due to socioeconomic constraints (World Bank n.d.a). This leaves a burden on the public sector to care for the psychological distress and suffering of a majority. Recommendations to improve access to mental health services in Libya are detailed in Box 1. As in many parts of the world, stigma is evident in Libya; people are shy, embarrassed, and would prefer to seek the advice of cultural or spiritual healers (Abuazza 2013).

#### Box 1. Recommendations to improve access to mental health services in Libya.

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- Appoint a committee comprised of experts in mental health
  - Psychiatrists, psychologists, mental health researchers, and others
  - Experts who have experience in conflict-affected settings
  - Representatives from the government, funders, and non-governmental agencies

The joint committee will bring together in-depth practical knowledge of specific tasks with a broader overview of mental healthcare policies and management. Another significant advantage is the increased cooperation and unity among all levels of the workforce in addressing mental health and safety issues.
- Develop materials to promote mental health
  - Culturally appropriate and in local languages
  - To be used in printed, electronic, and social media platforms
  - Adapted from similar material used in other conflict settings

The focus of this promotional material would be to overcome stigma, increase awareness, to promote care of individual mental health, and to draw attention to services.
- Improve access to mental health care
  - Maintain the toll-free hotline to provide psychological first aid and support
  - Training teachers, nurses, and volunteers on providing psychological support
  - Tele-psychiatry services for general practitioners to connect with experts
  - Initiate and develop regional mental health mobile clinics to reach specific groups or geographical locations.

By scheduling regular biweekly visits from psychiatrists and other mental health care providers, we hope to reach out to underserved and rural communities across the country. This will reduce the burden on the main government hospitals while also assisting in the development of future plans to allocate and initiate more mental health facilities where they are most needed.
- Plan for long-term development
  - Develop and validate psychometric instruments for Libyans
  - Conduct pilot projects of psychotherapeutic interventions
  - Design a unique mental health service framework for Libya

Factors like demographic, cultural, socio-economic, genetic, social, conflict and war etc. must be considered while drawing up such mental health frameworks.

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Finally, Libya has been on a roller coaster of mental health challenges throughout its history. To overcome these ever-rising challenges, a coordinated response involving public, non-governmental, and private sector agencies is required.

## Disclosure statement

No potential conflict of interest was reported by the author(s).

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**SS:** Conceptualization, Formal analysis, Writing – original draft, Data curation, Validation, Visualization, Investigation, Project administration, Resources, Supervision, Writing – review and editing.

**RG, SMS & AB:** Formal analysis, Writing – second draft, Data curation, Validation, Visualization.

**MC:** Data curation, Formal analysis, Writing – review and editing, Investigation, Project administration, Resources, Supervision.

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