

HIGHLIGHTS (29 Apr 2020)

- Civilians continue to bear the brunt of ongoing fighting. Between 1 January and 31 March 2020, at least 64 civilians have been killed and 67 others injured.
- One year on, Tripoli remains affected by conflict. Around 200,000 people have been displaced since conflict reignited in April 2019.
- Displacement continues to increase due to insecurity and hinders people's ability to return home - 374,000 remain displaced across Libya.
- As of 28 April 2020, there are 61 confirmed cases of COVID-19 in Libya, including two COVID-related deaths.



Explosive ordnance disposal teams working in Tawergha (Rabie Jawashi/3F)

KEY FIGURES

0.9M

People in need

0.3M

People targeted

374k

People displaced in Libya

654k

Migrants and refugees in Libya

138k

People reached

FUNDING (2020)

\$114.9M

Required

\$13.5M

Received



12%

Progress

FTS: <https://fts.unocha.org/appeals/931/summary>

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BACKGROUND (29 Apr 2020)

Situation update

Despite calls for a truce, conflict continues throughout Libya, impacting civilians and civilian infrastructure. Between 1 January 2020 and 31 March 2020, the UN Support Mission to Libya (UNSMIL) has documented at least 131 civilian casualties (64 deaths and 67 injuries). This figure represents an overall increase in civilian casualties of 45 per cent compared to the previous three months.

Heavy shelling and fighting has caused further displacement, destroyed people's homes and damaged critical civilian infrastructure. In the last month, this includes new displacements from Abusliem and surrounding areas, as well as from neighbourhoods surrounding Tarhuna. *See our displacement article later in this report.*

As of 21 April 2020, there has been 11 conflict-related incidents recorded this year on field hospitals, health care workers, ambulances and medical supplies, killing five people, injuring 17 others and affecting five health facilities. On 6 April 2020, as a result of heavy shelling in Tripoli, the Al Khadra General Hospital was hit, injuring at least one health worker and damaging the fully functioning 400-bed medical facility. The hospital was one of the potential COVID-19 assigned health facilities. Heavy clashes also saw closures of four hospitals in Sabratha and Surman that were providing an average of 18,000 medical consultations per week.

There have also been two attacks on the Man-Made River Project this year, that provides around 60 per cent of the country's fresh water. On 6 April, a water valve near Shwerif was shut down by an armed group. As a result, more than 2 million people, including 600,000 children, in the Greater Tripoli area (Tripoli, Tahouna, Bani Walid and Gharyan) were without water for more than a week. These water cuts coincided with power outages that affected many parts of western Libya. Water systems in Libya have already been badly damaged as a result of the ongoing conflict. These attacks impact on the country's ability to combat the COVID-19 pandemic.

In Tripoli, internally displaced families, refugees and migrants who remain close to the front lines, along with host communities providing them with shelter, remain at significant risk. In conflict-affected areas, people face increasing challenges in gaining access to basic essential goods and public services and being able to make a living. The situation for many people caught in conflict areas, as well as across the country, has been exacerbated by the impact of COVID-19 on people's livelihoods and their ability to meet their basic needs and access to health and other assistance. *This is covered in more detail our COVID-19 article below.*

While the situation has become more complex with escalating conflict and COVID-19 prevention measures, the humanitarian community is committed to staying and delivering humanitarian assistance to address the most severe needs. UN agencies, international and national NGOs continue to work on the front lines, in difficult operating conditions, having reached more than 138,000 people in 2020 with some form of humanitarian assistance. This includes provision of unconditional food assistance, including to 2,300 newly displaced people reached through the Rapid Response Mechanism (RRM). Health care services were also provided through deploying mobile medical teams, health kits as well as providing training for medical staff. The Education Sector through its partners reached more than 18,000 school-aged children with school feeding. Children were also reached by other services including psychological and recreational activities.

FEATURE (29 Apr 2020)

Tripoli: One year on

The fourth of April 2020 marked one year since forces of Libyan National Army (LNA) launched their offensive to seize Tripoli, Libya's capital. The one-year long war has taken a heavy toll on hundreds of thousands of people who have either been displaced or continue to live on the front lines of an ongoing war. The conflict has also had a significant impact on people's livelihoods and their access to essential goods and services, as well as damaging or destroying homes, hospitals and schools.

While the conflict quickly became protracted and focused mostly in southern parts of Tripoli, from the end of 2019, fighting has increasingly moved into more populated areas, causing further civilian casualties and displacement. Between 1 April 2019 and 31 March 2020, UNSMIL documented at least 685 civilian casualties (356 deaths and 329 injured). Nearly 345,000 civilians remain in



Ongoing conflict has damaged or destroyed people's homes, causing further displacement (OCHA/Giles Clarke)

front line areas with an additional 749,000 people estimated to live in areas affected by the clashes.

Much of the conflict is characterized by its indiscriminate nature, with regular violations of international humanitarian and international human rights laws, including attacks on critical public infrastructure and services. There have been 64 conflict-related incidents recorded on field hospitals, health care workers, ambulances and medical supplies, since April 2019, killing 80 people, injuring 66 others and affecting 24 health facilities.

Additionally, 16 schools have been attacked that affected more than 15,000 students. Prior to the total closure of schools (impacting 1.3 million students) due to COVID-19, many schools had been closed for months due to proximity to fighting. There have also been seven attacks on water infrastructure (all part of the Man-Made River infrastructure). These attacks, together with electricity cuts, regularly affected water supply to 3 to 4 million people.

More than 200,000 people have been displaced since conflict reignited in Libya in April 2019, with Tripoli accounting for around 150,000 of recorded displacement. In late March and early April 2020, around 3,700 people have been forced to flee their homes in Abusliem Municipality, and the neighbourhoods of Salah Al Din and Al Hadba, as well as another 3,100 people near Tarhuna who fled their homes in mid-April within 48 hours due to escalated fighting.

For many people, the conflict has destroyed or damaged their homes and many have fled due to the proximity of fighting, impacting living conditions. Coupled with increased demand due to IDP arrivals this has led to shortages in adequate shelter options and associated increases in rental costs. Vulnerable families face difficulties in securing affordable housing, along with those who have lost important legal documents, being at risk of eviction.

Migrants and refugees continue to attempt crossing to Europe, many of whom are returned to the country, mainly to detention centres in and around Tripoli. In 2020, there are more than 654,000 migrants and refugees in Libya. They continue to be at risk of unlawful killings, torture, arbitrary detention and unlawful deprivation of liberty, rape and other forms of gender-based violence, slavery and forced labour, extortion and exploitation. On 2 July 2019, an airstrike hit the Tajoura Detention Center outside Tripoli, killing at least 53 people and injuring another 130 people.

UN agencies, along with international and national NGOs have continued to provide humanitarian assistance to those displaced and affected by the conflict. From April 2019 until the end of March 2020, the humanitarian community has reached more than 220,000 people with assistance. This includes more than 50,000 people through the Rapid Response Mechanism (RRM) in 32 municipalities across 14 mantikas. The mechanism was activated in response to rapidly emerging needs of people displaced following the Tripoli offensive. On 11 April 2019, four UN agencies (IOM, UNFPA, UNICEF and WFP) launched the RRM, jointly delivering a minimum integrated package of assistance to persons displaced due to the armed conflict, in hard-to-reach areas, caught at checkpoints or stranded between front lines.

EMERGENCY RESPONSE (29 Apr 2020)

COVID-19 impacts on people across Libya

As of 28 April 2020, the Libyan National Centre for Disease Control (NCDC) reports 61 confirmed cases, including two COVID-related deaths, in Libya. Testing remains low, only 18,00 tests to date. The majority of new confirmed cases are people who have come into contact with confirmed cases, confirming local transmission. Strong prevention measures (border closures, restricted movement, closures of schools, restaurants, etc.) remain in place. As a result, many people's lives and livelihoods are being affected, with low-income families and other vulnerable groups particularly impacted.

Many Libyans, migrants and refugees remain anxious about COVID-19 and what they should do to protect themselves. The Inter-Agency Common Feedback Mechanism's call centre has received nearly 11,500 calls since the beginning of the pandemic. The majority of calls are from people seeking information on the disease, how they can protect themselves, or

information on where to go for medical assistance. The remaining calls are from people reporting symptoms and seeking assistance.

Libya relies heavily on imports for food and other goods. Diminished exports from other countries, along with movement restrictions have reduced the availability of food and other goods and led to higher prices. Recent markets assessments have reported prices increase and price spikes for many essential goods since the imposition of a lock down/curfews. According to the assessment, 48 per cent of assessed cities reported food shortages and 86 per cent reported food price spikes. Some locations reported price increases of 500-900 per cent, with authorities intervening to correct price hikes. In addition to food increased prices have also been reported in basic non-food items, such as hygiene and cleaning products, as well as for fuel.

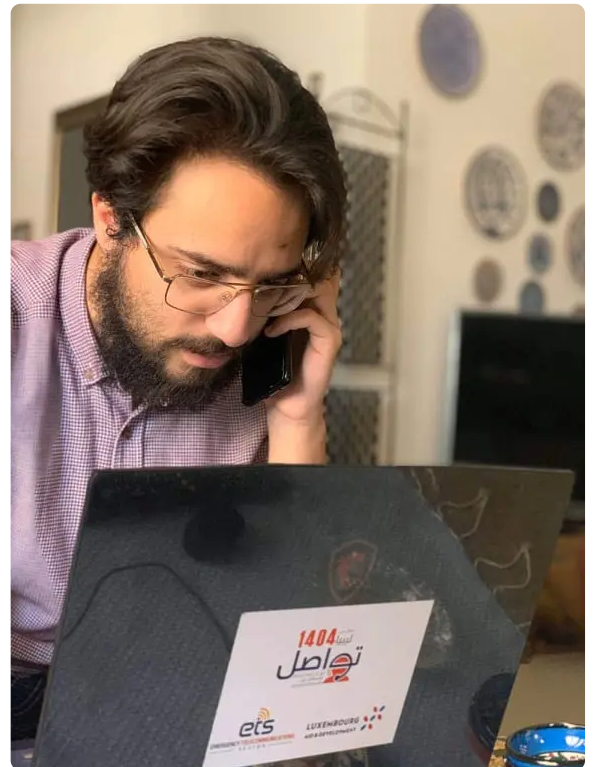
Many IDPs, migrants and returnees, live in sub-standard housing or informal settlements which hinder their ability to adopt social distancing measures and limits their access to functional basic services and essential household necessities. With increasing prices of food and basic commodities many IDPs may struggle to afford higher prices in addition to rent, putting them at higher risk of eviction.

Food production has also been impacted, particularly in the South, with reported shortages of labour and the ability to access markets due to movement restrictions. This resulted in lower production as well as increased food wastage. This particularly impacts those who rely on agriculture for their livelihoods, such as smallholder farming families and migrants who engage in daily labour. In addition to those in the agriculture sector, many people engaged in the informal sector have also been significantly impacted.

Women are more at risk of lost income as a large amount of women's income is earned through the informal economy which has been impacted by movement restrictions and shutdowns. In a recent UN Women survey, 52 per cent of surveyed women indicated that their work had already been affected and 26 per cent believed that their source of livelihood would be affected if curfews were extended.

While movement restrictions impact all people across Libya, different restrictions and the ability of authorities to enforce them have resulted in different experiences. Some vulnerable groups are more at risk from movement restrictions. For example, migrants with an irregular status are more at risk of being detained or deported with increased police and military presence. As a result, many reported being reluctant to leave their homes for fear of being detained and/or deported, hindering their access to assistance.

Other groups, such as people with disabilities struggle to continue to access the necessary health care and other support services. In a recent survey, 49 per cent of respondents reported having a person with a disability in the family. Health services for women were also expected to be more difficult, with 71 per cent of the female respondents expressing concerns regarding their access to healthcare, both due to the reliance on male family members to accompany them and a lack of capacity in health facilities to fight COVID-19 as well as continue to provide other essential services. This includes critical protection-related and psychosocial services.



ETS-managed Common Feedback Mechanism call centre operator working from home during COVID-19 (WFP/ETS)

With the lock down/curfews being extended or tightened the risk of domestic violence increases, with women and children most at risk. Seventy per cent of surveyed women reported fears of increased violence due to pressures from curfews. There are also concerns about migrants and refugees who remain in detention centres where people are unable to practice social distance given crowded conditions and have insufficient access to sanitation and health facilities.

In light of the changed conditions due to COVID-19 and the challenges it presents for many people, humanitarian partners are scaling up efforts in preventing and responding to COVID 19 in Libya. To do this, the Health Sector has developed a COVID-19 Preparedness and Response plan that calls for US \$14.3 million to combat COVID-19. In addition, humanitarian organizations in the Humanitarian Response Plan for 2020 urgently require US \$31 million to continue critical activities until June that respond to both direct and indirect impacts of COVID-19.

ANALYSIS (29 Apr 2020)

Displacement and migration in Libya

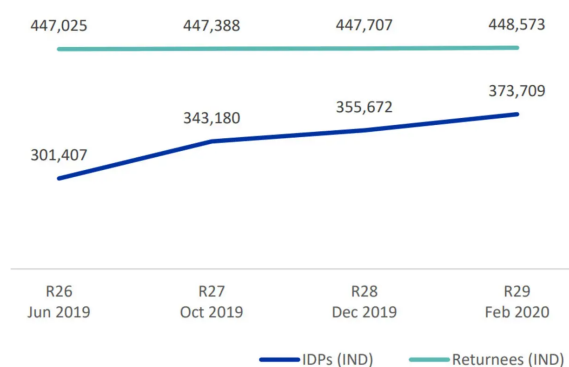
In its ninth year of conflict since the fall of the Gaddafi regime in 2011, conflict and insecurity remain the main drivers behind displacement. Across the country, people continue to flee their homes due to shelling, ground fighting and insecurity. In mid-April, IOM's Displacement Tracking Matrix released its 29th round of reporting (covering January-February 2020) on displacement and migration trends.

Since the beginning of the year, the number of IDPs in Libya has increased from 356,000 to 374,000 – a five per cent increase. New displacements during the reporting period were primarily due to continued armed conflict in western Libya, floods in Eastern Libya in February 2020 and the intensification in the conflict in the areas of Sirt and Abu Qurayn that resulted in the displacement of over 4,650 individuals to the surrounding areas.

Overall, Tripoli Mantika currently hosts the largest number of IDPs in Libya, almost 97,000, despite ongoing clashes and shelling that results in further displacement from the conflict affected neighborhoods and localities of the region. Most recently that has included the displacement of 745 families (3,725 people) from Abusliem and neighbouring Salah Al Din and Al Hadba in March 2020 and at least 620 families (3,100 people) who fled escalations in fighting near Tarhuna within a 48-hour period.

The most commonly identified needs for IDPs are accommodation, food, health services and non-food items. Many IDPs highlighted challenges with meeting their basic needs due to increases in prices. This is made more difficult for the majority of IDPs (59 per cent) that stay in rented accommodation and who therefore need to cover rent in addition to purchasing food and other supplies. Along with COVID-19 prevention measures, movement restrictions have further reduced most IDPs' ability to access markets, sustain livelihoods and afford basic goods and services. The humanitarian community continues to respond to both new displacements with food and critical non-food items, as well as targeted assistance to 97,000 IDPs as part of the response strategy for the 2020 HRP for Libya.

More than 654,000 migrants and refugees are present in Libya. The majority (65 per cent) come from neighbouring countries, especially Chad, Egypt, Niger and Sudan. Migrants were identified in all 100 municipalities, with the largest migrant populations identified in Tripoli, followed by Ejdabia in the East and Murzuq in the South.



Libya displacement and return timeline by rounds - Jun 2019-Feb 2020 (source: IOM/DTM IDP & Returnee Report, Round 29)

Many migrants and refugees continue to face arbitrary detention, gender-based violence, forced labour, extortion and exploitation. While 83 per cent of respondents reported to be employed, in the most recent DTM round of migrant surveys, the restrictions placed on freedom of movement to counter the spread of COVID-19 is expected to increase migrant workers' unemployment and its associated negative humanitarian consequences such as food insecurity. DTM Libya's 2019 Migrant Vulnerability and Humanitarian Needs Assessment had identified unemployment as one of the main factors increasing migrants' vulnerability to harm.

However, Libya continues to be a country of destination for the majority of migrants, and a country of transit those migrants and refugees trying to reach Europe. In the first quarter of 2020, at least 3,200 migrants have been rescued or intercepted at sea and returned to Libya. While some are transferred to government-run detention facilities, others are taken to facilities that humanitarian organizations do not have access to. As of mid-April around 1,500 migrants and refugees are reported to be in official detention centres. Even in these centres migrants and refugees face conditions characterized by overcrowding, insufficient access to sanitation facilities, food, or clean water, and where there are wide-spread reports of human rights violations.

In 2020, humanitarian organizations plan to reach 86,000 migrants and 48,000 refugees with humanitarian assistance, both in urban communities and official detention centres.

For full IDP & Returnee Report, Migrant Report and other reports visit IOM's DTM Libya site: <https://dtm.iom.int/libya>

ANALYSIS (29 Apr 2020)

Humanitarian access

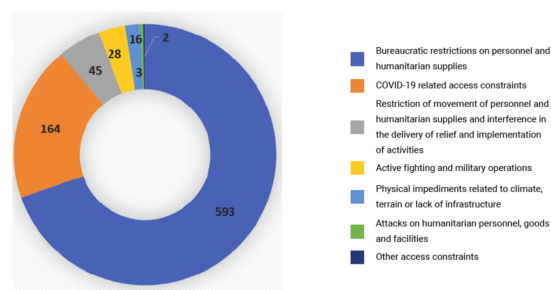
Insecurity, bureaucratic impediments and now COVID-19 restriction measures, continues to hamper humanitarian access and the free movement of medical and other humanitarian personnel, as well as humanitarian assistance in Libya. In March 2020, humanitarian agencies reported 851 access constraints across the country.

Of the overall access constraints, 70 per cent relate to bureaucratic impediments, such as ambiguities and delays in registration processes and delays in processing visas and security clearances for international staff. Restrictions of movement of personnel and supplies, and interference in the delivery of relief, constitutes roughly 5 per cent of reported constraints. Around 3 per cent of constraints were due to active fighting and insecurity.

Around 19 per cent (164 reported constraints) are in relation to COVID19. The majority of reported constraints are in relation to prevention measures imposed by the authorities, particularly curfews and prohibition of movements between cities and regions.

Humanitarian flights into both Tripoli and Benghazi have been regularly cancelled due to lack of authorization, insecurity or COVID-19 prevention requirements. Customs clearances remains slow and are expected to be impacted further by the global slowdown on trade and transportation.

Despite this the humanitarian community continues working with municipal and national authorities for access and in the first two weeks of April, successfully negotiated authorizations that will allow humanitarian organizations to deliver assistance to more than 40,000 people.



Humanitarian access constraints by type: March 2020 (source: OCHA)

The Humanitarian Country Team continues to advocate with all authorities, including at the highest levels, for facilitation of the movement of humanitarian personnel and assistance to ensure continuation of ongoing life-saving humanitarian programming and COVID-19 response activities. This includes the removal of all restrictions and immediate importation of health supplies for the COVID-19 response, broader health supplies and other humanitarian assistance.

Further analysis on access constraints in Libya for March is provided in [OCHA's Access Report](#).

<https://www.unocha.org/libya>

<https://www.humanitarianresponse.info/en/operations/libya>

<https://reliefweb.int/country/lby>

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