



LIBYA: Humanitarian Access Report

April 2020

This report is produced by OCHA Libya

1009 access constraints/ incidents reported

677 COVID-19-related access constraints

893,000 people in need of humanitarian assistance

Introduction:

Humanitarian partners reported a total of 1,009 access constraints during April 2020. This marks an increase of about 158 access constraints (18.5%) compared to March 2020. Out of the 1,009 access constraints are 677 constraints that are directly or indirectly due to COVID-19, which is an increase of 513 compared to last month. The difference between the 1,009 figure (overall figure) and the 677 COVID-19 related figure is a combination of both access constraints that have been lingering since before the COVID-19 situation as well as those that have recently emerged but have no direct association with COVID-19. The reason for the considerable change between April and March can be attributed to the emergence of new access constraints, particularly with the worsening situation of the COVID-19 outbreak at the global level. The increase can also be ascribed to adopting a more robust monitoring system to track access constraints in Libya. This report aims to identify the main access constraints affecting the humanitarian situation in Libya and the areas within Libya in which these access constraints have impacted the people in need. A total of 893,000 people in Libya are in need of some form of humanitarian and protection assistance. The humanitarian community aims to work together with all relevant stakeholders to pursue ways to mitigate such access constraints in order to ensure to the extent possible that the people in need are given the assistance that they deserve.**

Breakdown of challenges based on type of access constraint:

Restrictions of movements of humanitarian agencies, humanitarian personnel, or humanitarian goods into Libya constitute approximately 65% of all reported access constraints during April 2020. These constraints include delays and inconsistencies in obtaining and renewing work permits and registrations for humanitarian agencies to operate in Libya as well as delays and difficulties in issuing visas and security clearances for international humanitarian staff members. In addition, humanitarian agencies reported that humanitarian items in certain situations have not entered the country because of delays in obtaining clearances from Libyan seaports and airports and because of not being able to secure approval from the national authorities in both Tunisia and Libya. In total, 651 access constraints under this category were reported, out of which 562 (almost 86%) are directly or indirectly linked to the COVID-19 precautionary measures. Such COVID-19 factors denied the operation from the use of its main resource; UNHAS flights to transfer humanitarians into Libya as UNHAS flights were suspended throughout the entire month. UNHAS flights have not been able to operate due to lack of clearances from Tunisian authorities. The last time that UNHAS flew was on 23 March 2020. In addition, commercial flights were also suspended during the month, also due to COVID-19, causing further challenges for humanitarians to access the country. This meant that UNSMIL flights were the only means by which humanitarians (although only international staff) could enter Libya. INGOs were able to send their international staff members through UNSMIL flights to Libya. However, INGOs were required to obtain special authorization from the Ministry of Foreign Affairs as well as obtain clearances from the Ministry of Interior (at the insistence of the Misrata Airport officials) in order to be able to use UNSMIL flights. The limited number of UNSMIL flights during April meant that only few staff rotations were able to happen and as a result very few humanitarians managed to enter the country. Furthermore, national staff from UN agencies and INGOs could not return to Libya at all via UN flights, as they couldn't get permission to use UNSMIL flights, because of regulations imposed by the authorities in response to COVID-19.

One of the major changes in April compared to March was the significant increase in constraints on humanitarian activities and movements within Libya. **Restrictions on activities and on movement of agencies, personnel, or goods within Libya** make up 26% of all access constraints recorded during April 2020. This is largely due to the various implications of COVID-19. 259 access constraints were reported by various partners under this category. 111 of these constraints were in some form caused because of COVID-19 related measures, most prominently, the curfew measures that took effect in the different parts of the country. Agencies faced various difficulties in trying to manage their activities during permissible hours. This was even more difficult when a full 24-hour 10-day curfew period was imposed at one point, from 17 April until 28 April. Curfew stipulations also did not allow for humanitarian movements from one municipality to another during non-curfew hours. As a result, humanitarian organizations had to spend a great deal of their time attempting to acquire curfew passes. This was time-consuming for organizations that managed to eventually obtain the passes, but several attempts by humanitarian partners did not result in being given permission for transportation within Libya. As for the remaining 148 non-COVID-19 related reported constraints within this category, partners emphasized the difficulties encountered as a result of the irregularities, inconsistencies and ambiguities in the procedures and regulations that humanitarian organizations need to adhere to in order to get clearances for projects, activities and movements from national, local and technical authorities. Such challenges predate the COVID-19 global pandemic and only complicated matters further for the people in need.

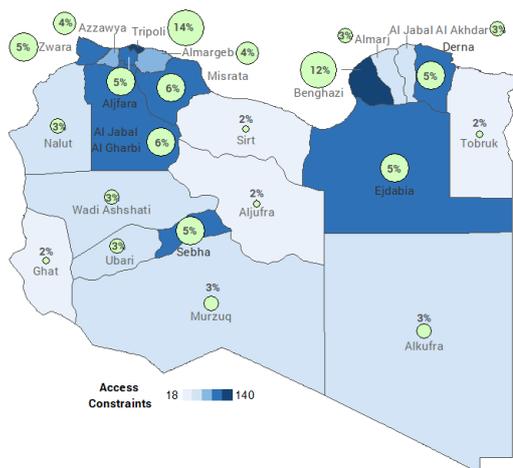
Overall, the total percentage of bureaucratic constraints reported (restrictions of humanitarian elements in getting access into Libya and within Libya) equal 91% of all reported constraints.

** It is important to mention that the access constraints reported in a given Mantika does not necessarily signify that the constraints or incidents materialized as a result of actions taken by inhabitants of the Mantika. The reason for the emergence of the constraint could very well be associated with elements and factors outside of the Mantika and in some cases outside of Libya itself. Therefore, the map reflects incidents and constraints that impacted the people in need within each Mantika, and not the number of incidents caused by the Mantika.

The escalation in military operations during April exacerbated the situation even further. This resulted in 52 reports (5%) that such **military operations and ongoing hostilities are impeding humanitarian operations**. The ongoing fighting and shelling in addition to the presence of armed groups have caused delays in humanitarian operations and in some instances, has led some organizations to restructure their programming. Only two of the access constraints relating to the military activities are linked with the COVID-19 access factors.

The **physical environment** in which humanitarian operations also registered as a component of the reported access constraints. A total of 34 reports indicated that agencies were impeded by electricity outages and fuel shortages which resulted in difficulties in communication and transportation respectively. Not to mention, stoppages in the water supply in certain areas. Some agencies cited the poor infrastructure in certain locations and the inhibitions this caused for operations. Factors related to physical environment make up 3% of all access constraints, none of which are attributed to the COVID-19 situation.

Violence against humanitarian personnel, assets and facilities and restrictions on, or obstruction of, conflict affected populations' access to services and assistance make up the remaining 1% of reported access constraints. Even though they only make up 11 incidents (out of which two are COVID-19 related), their negative impact on affected populations is extremely serious. These include attacks on health facilities and interceptions of trucks carrying humanitarian items intended to be delivered to certain locations in Libya.



Map 1 : No. of access constraints

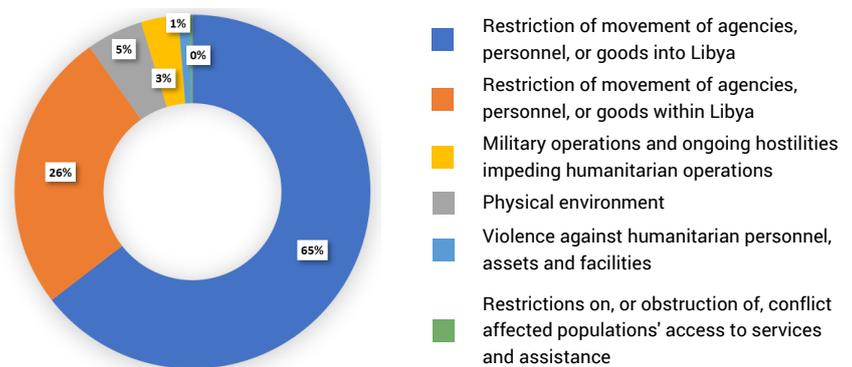


Chart 1: Overview of reported incidents

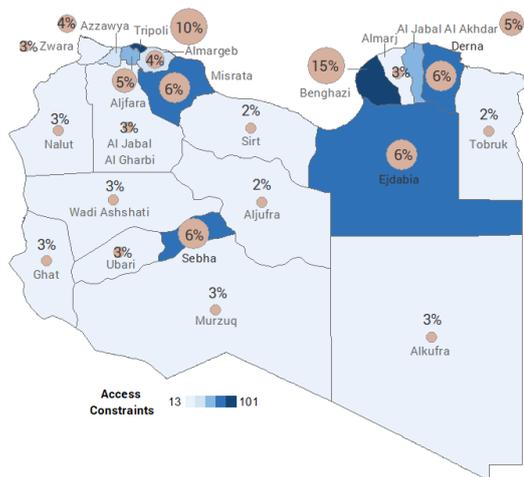
Breakdown of COVID-19 related access constraints:

The COVID-19 pandemic continues to significantly impact the humanitarian operation in Libya. Out of the 1,009 access constraints reported, 677 are directly or indirectly linked to COVID-19 precautionary measures and elements. These constraints can be further classified based on the global thematic breakdown of access constraints mentioned above, since they are embedded in the same thematic categories. 562 of the COVID-19 access constraints (83%) involve bureaucratic restrictions of movements of humanitarian personnel, items and agencies into Libya. This includes suspension of UNHAS flights, suspension of commercial flights, limited number of UNSMIL flights, additional clearances required from INGOs in order to use UNSMIL flights, and UN/INGO national staff members not being able to travel back to Libya (even through UNSMIL flights) all as a result of COVID-19 in addition to other factors. Moreover, the situation became even more complicated for humanitarian agencies that had already been facing difficulties in obtaining visas and security clearances for their staff and clearances and permits to import items through the seaports and airports in Libya. This is largely due to the curfew and lockdown regulations in both Libya and Tunisia which resulted in the limited work hours and capacity of institutions overseeing such processes.

111 (16%) of the COVID-19 related access constraints are restrictions imposed on humanitarian activities, projects and movements within Libya. These are mostly bureaucratic in nature and are related to the curfew regulations that were put in place by the different Libyan authorities. Agencies were not allowed to conduct activities beyond a certain time. This included a full lockdown that lasted 10 days. Curfew regulations also did not allow for cross-municipality movements unless curfew passes were issued. Humanitarian organizations spent a great deal of their time negotiating for such passes to be granted, with very few managing to obtain them eventually. In addition, some curfew regulations did not allow for certain road movements to take place at all.

Military operations in combination with the COVID-19 restrictions resulted in the closure of nearly 5,000 public and private schools all over Libya. Two reports from humanitarian partners indicated that activities targeting students had to be suspended and will perhaps need to be restructured until schools open once again.

Lastly, an incident occurred wherein both violence against humanitarian assets and restrictions on conflict affected populations' access to services and assistance occurred simultaneously. The incident was linked to the curfew regulations limiting movements from one region to another.



Map 2 : No. of access constraints

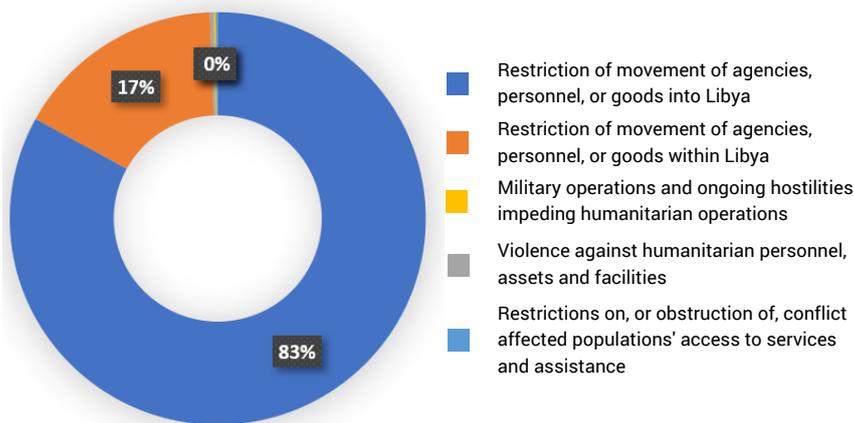
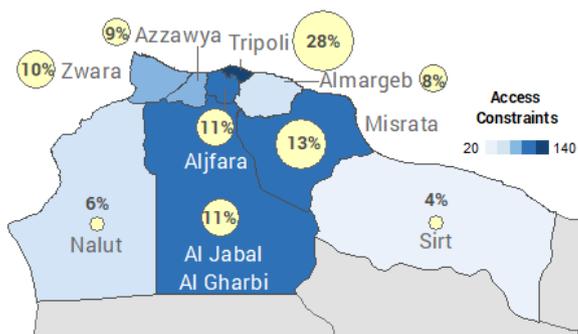


Chart 2: Overview of reported incidents

Breakdown of access constraints based on geographical regions:

East: In the East, a total of 331 humanitarian access constraints were reported by humanitarian agencies, which is nearly a third (33%) of all reported access constraints. About 79% of these access constraints are COVID-19 related. Reported access constraints include delays in difficulties in obtaining visas and security clearances for international staff members, delays in obtaining clearances for items at the Benghazi seaport, irregularities, inconsistencies and ambiguities concerning the procedures to obtain approvals of activities from the local, national and technical authorities, strict restrictions on cross-municipality movements, and the stipulation that no road movements of trucks carrying humanitarian assistance are allowed to move from the West to the East. Few exceptions were made to the latter through negotiations. In addition, the suspension of UNHAS for COVID-19 related reasons made it difficult for staff to be present in the East, as only two international humanitarian staff were present in the East during April. 36% of access constraints reported in the East impacted Benghazi, with 16% impacting each Ejdabia and Derna. This can be a result of the relatively stronger operational presence in these mantikas compared to the others in the East.

An incident in the West that involved violence prevented humanitarian items from reaching Benghazi. This incident is a violation of International Humanitarian Law as it deprives people in need from the assistance that was intended to reach them.



Map 3: No. of access constraints

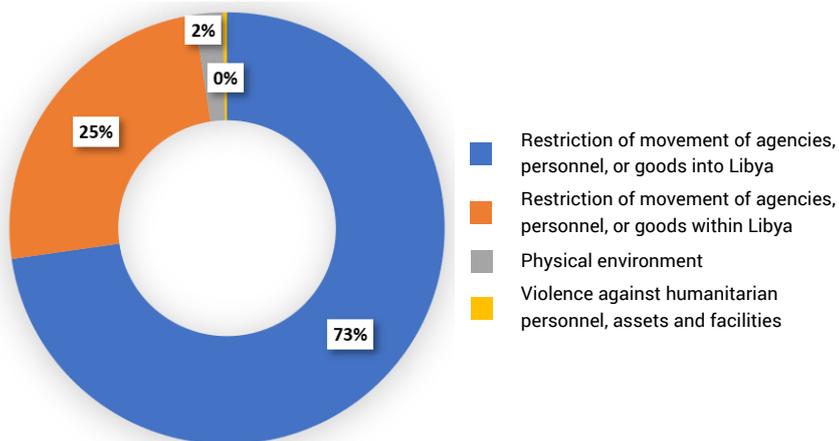


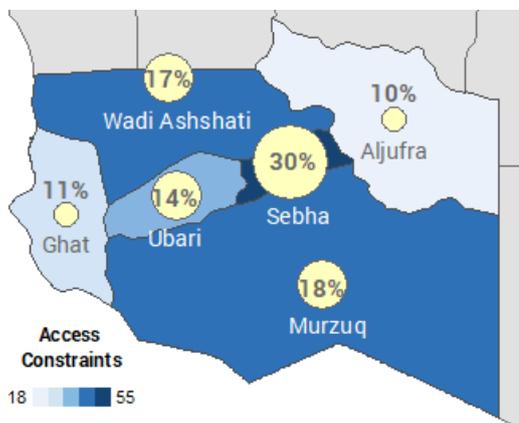
Chart 3: Overview of reported incidents

South: The low operational presence in the South compared to the East and to the West is a main reason why the South has the least number of access constraints out of the regions with 174 reported (around 17% of all access constraints). The number of partners is fewer and as a result the number of reports of access constraints is relatively low. 131 out of the 176 access constraints are COVID-19 related access constraints. Several of the access constraints are related to access constraints in the East and the West such as bureaucratic constraints impeding staff from entering the country and having a better chance of interacting and engaging with affected populations from the South. Even though there were not that many regular flights into the South, humanitarians have a better chance of access the South once they enter the country either through the East or the West. Therefore, these bureaucratic access constraints are also reflected in the South because they do have a significant impact.

Poor infrastructure in certain areas in the South impedes the transportation and communication demands of the humanitarian operations making it difficult to operate there. The existence of extreme armed groups in other parts of the region also causes various difficulties for humanitarians to operate.

When it comes to curfew restrictions on movements, the South was noted for being the most accessible, as local authorities played a key role in facilitating for movement of trucks from the West to different municipalities in the South (most prominently, 13 trucks carrying food were able to reach different destinations in the South as a result of the coordination between the local authorities and OCHA).

The highest number of incidents/access constraints were reported for Sebha with around 31% of reports from the South.



Map 4: No. of access constraints

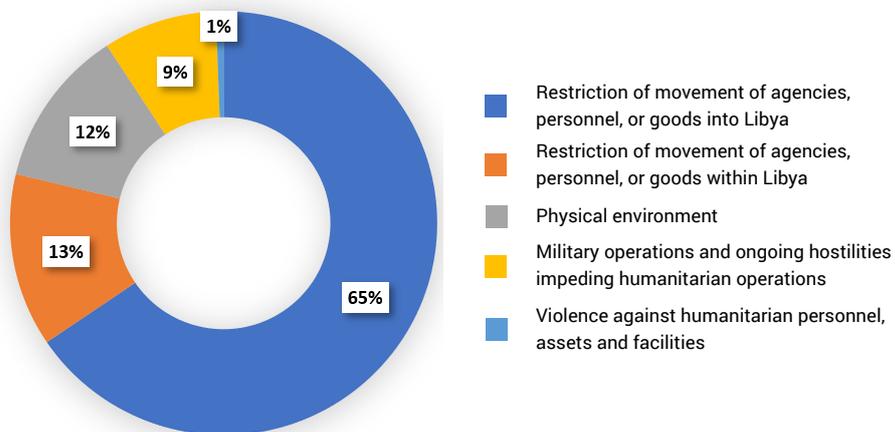
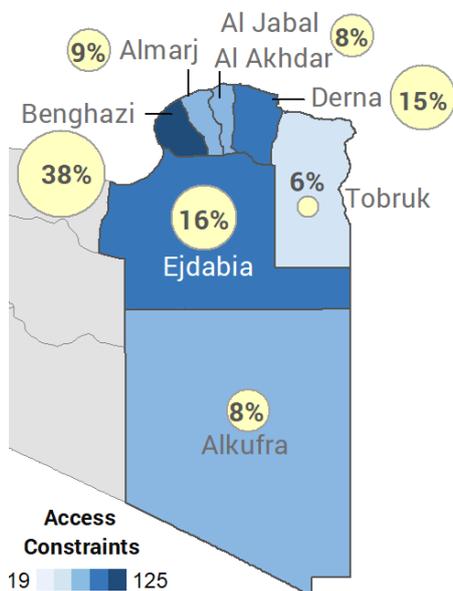


Chart 4: Overview of reported incidents

West: A total of 504 incidents/access constraints were reported in the West; the highest of the three locations with about half of all reported constraints. The major frontlines and the heavy military activity in the West are making it difficult for humanitarian actors to operate. All military attacks that have impacted humanitarian activities occurred in the West. These involved incidents causing substantial damages to Weryema polyclinic in Tajoura, Tarek Al Matar Field Hospital in Tarek Al Matar, two field hospitals in Royal private hospital in Trek Al Show, and Al Khadra Hospital in Abusliem. A member of the rescue and emergency (paramedic) team was killed as result of an air strike that hit an ambulance in Misrata. Another health worker sustained injuries in the attack on Al Khadra Hospital.

Other reported access constraints include delays in difficulties in obtaining visas for international staff members, delays in obtaining clearances for items at the in Misrata and Tripoli ports, irregularities, inconsistencies and ambiguities concerning the procedures to obtain approvals of activities from the local, national and technical authorities, strict restrictions on cross-municipality movements and suspension of UNHAS flights and commercial flights. Most of the constraints make up the 287 constraints out of the 504 which are COVID-related constraints.

Tripoli recorded the highest number of access constraints with 68. As is the case with other regions, bureaucratic constraints. In the West bureaucratic constraints make up 90% of the all incidents and access challenges in the West.



Map 5: No. of access constraints

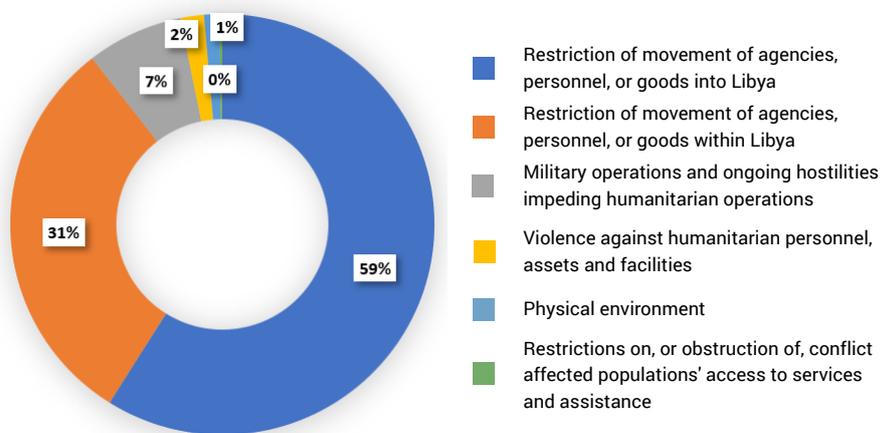


Chart 5: Overview of reported incidents:

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