

LIBYA

April 2021

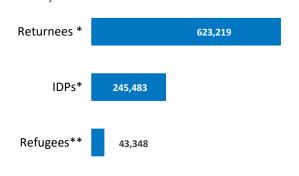
An estimated 912,000 people in Libya are in need of humanitarian assistance. Displaced populations, refugees and migrants are amongst the most vulnerable. Around 200,000 were displaced when clashes restarted in April 2019 until June 2020.

UNHCR's overall strategic objective in Libya is to enhance the protection environment and provide life-saving assistance to displaced populations, refugees, asylum-seekers, and their host communities. The outbreak of COVID-19 in March 2020 raised new challenges to which the operation responded, by adjusting priorities and budgeting.

UNHCR's priorities in Libya include saving lives, assisting persons in need international protection and ensuring their access to protection and solutions such as resettlement and family reunification.

POPULATION OF CONCERN

912,050

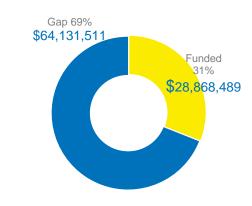


^{*} IOM-DTM February 2021

FUNDING

USD 93.0M

requested for the Libya operation in 2021

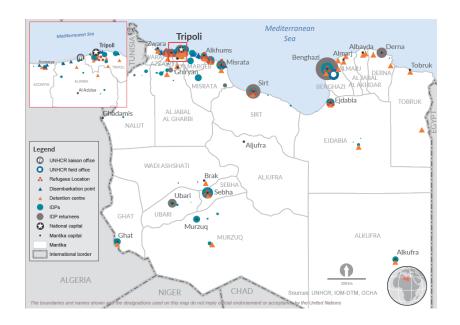


UNHCR PRESENCE

Staff:

128 national staff (111 in Tripoli, two in Misrata, three in Benghazi, 12 in Tunis);

51 international staff



^{**} Refugees and asylum-seekers registered with UNHCR (as of 1 Apr. 2021)



Working with Partners

UNHCR is a member of the United Nations Country Team and Humanitarian Country Team in Libya. Together with the International Organization for Migration (IOM) and the International Rescue Committee (IRC), UNHCR co-leads the Migrants and Refugees Platform. UNHCR also leads the Shelter/NFI Sector and the Protection Sector on IDPs, returnees and non-displaced population. On 20 October 2020, in Tripoli, UNHCR and UNICEF signed a joint plan, the BluePrint for Joint Action, pledging to expand assistance, improve delivery of essential services (water, sanitation and hygiene), education and protection for refugee children in Libya. UNHCR has concluded agreements with World Food Programme (WFP) for the joint distribution of food packages.

UNHCR supports the Libyan authorities to try to enhance the rights environment and provide assistance for the displaced and conflict-affected Libyan population. It works with partners to protect and assist refugees and asylum-seekers. UNHCR is currently expanding partnerships with both international and national NGOs, as well as civil society organizations. Partners include ACTED, Cooperazione e Sviluppo (CESVI), IRC, Danish Refugee Council, INTERSOS, Norwegian Refugee Council and LibAid.

Main Activities

Assistance to internally displaced persons (IDPs)

- Support for IDPs is a priority. UNHCR is providing basic assistance to IDPs in Libya, such as core-relief items and cash assistance. Cash assistance helps the most vulnerable displaced families to cover shelter and basic needs. With partners ACTED and DRC, UNHCR has also provided pre-paid e-cards that can be used to purchase basic items at point of sale outlets across Libya. Considering the challenges posed by the liquidity crisis in the country, UNHCR and its partners have increased the distribution of non-food items (NFIs) to over 33,000 IDPs and returnees in 2020 (compared to 22,000 for the whole of 2019). In 2021, 8,470 IDPs have received NFIs and hygiene kits. During Winter 2020/1, UNHCR, together with partners LibAid and Libyan Red Crescent, distributed winter kits to a total of 3,164 IDP households across Libya.
- UNHCR is implementing quick impact projects (QIPs), which are small and rapidly implemented projects, to support IDPs, returnees and their host communities with a view to promote social cohesion. Together with the communities, UNHCR and partners identify projects, mainly targeting local infrastructure, equipment and basic services within the health, education, shelter and WASH sectors. For example, in November, ACTED installed two containers at two health centres in Sebha, southern Libya (Al-Gurda Polyclinic and Althanawya Respiratory Clinic) in the south of the country as part of the 2020 QIPs to help support health facilities respond to the COVID-19 pandemic. In 2020, UNHCR implemented projects through its partners, as well as directly, and 59 such projects were finalized, mostly related to health and education, with upgrading of hospitals, clinics, and schools. In April 2021, UNHCR partner DRC completed the rehabilitation of Aldwes healthcare facility in the Abusliem municipality of Tripoli. Civil works include the installation of a 2,000-litre water tank and the provision of an electricity generator. In addition, medical equipment was supplied, and the sanitation facilities rehabilitated. This will help refugees and Libyans alike to have easy access to medical assistance in a location nearby, saving on transportation costs.

Support following rescue/interception at sea

• UNHCR's interventions at disembarkation points in Libya focus on the provision of life-saving assistance and protection monitoring to identify persons in need of international protection, and vulnerable individuals, including unaccompanied and separated children, the elderly, persons with specific needs, women at risk and victims of trafficking. UNHCR with its partner IRC has access to and conducts protection monitoring at disembarkation points in western Libya, when informed by the relevant authorities. In the past, UNHCR upgraded reception areas at six disembarkation to meet the basic needs of refugees and migrants being disembarked following a rescue/interception at sea. Support included establishing health posts, constructing water and sanitation facilities, such as toilets and showers, and shaded areas to protect refugees and migrants from rain in the winter and high temperatures in the summer.

Assistance and advocacy to end detention of refugees and asylum-seekers

UNHCR advocates for an end to arbitrary detention in Libya and the release of refugees and asylum-seekers from detention, especially those who are unaccompanied/separated children and other vulnerable individuals. UNHCR also calls for care arrangements for children and family tracing. In 2020, UNHCR and its partners conducted 264 visits to detention centres, despite such reduced movement due to the COVID-19 pandemic. In 2021, 26 such visits have been made. In mid-October, following negotiations with Libyan authorities of the Department of Combatting Illegal Migration (DCIM), some 140 asylum-seekers were released over several days from the Suq Alkhamees DC. All of those released were transported by UNHCR to the Community Day Centre and/or to Serraj registration office, where they received UNHCR's urban package of assistance, including registration documents, cash grants, food parcels (as part of UNHCR-WFP joint programme), non-food items, hygiene kits and medical checks. Temporary accommodation



in the community was arranged by UNHCR's partner CESVI. Those with specific needs/profiles are further scheduled for protection interviews, before possible referral to durable solutions. In 2020, 389 refugees and asylum-seekers were released following UNHCR's advocacy efforts (1,780 in 2019), mainly for the purpose of evacuation to a safe third country. In mid-January of this year, UNHCR helped to support the transfer of 121 asylum-seekers detained at Zintan (Daher Al Jabal) detention centre (135 km south-west of Tripoli), to Tripoli, where they received UNHCR's urban package of assistance.

• UNHCR and its partners have limited access to official government detention centres, where they provide lifesaving assistance, including medical services and the distribution of emergency relief items (CRIs) and where particularly poor hygiene conditions contribute to the risk of spreading of diseases. UNHCR continues to advocate for alternatives to detention, an end to arbitrary detention and the establishment of a judicial review process. UNHCR also advocates for measures to be taken to reduce the risk of sexual and gender-based violence.

Urban Refugee Programme

- One of UNHCR's key objectives in Libya is to enhance the protection environment for refugees and asylum-seekers. UNHCR assists persons in need of international protection through its telephone hotlines, via its Community Day Centre (CDC) in Tripoli and through outreach visits. UNHCR's partners CESVI and IRC provide specialized assistance to persons with specific needs, including unaccompanied and separated children and victims of trafficking. A new call centre, run by UNHCR and NRC, supported by the Foreign, Commonwealth & Development Office (FCDO), opened in August, providing information and advice about services and assistance. In November, a new weekly legal service began at the CDC, through UNHCR's partner the Norwegian Refugee Council, providing refugees and asylum-seekers with practical legal advice and counselling on topics such as legal residence and rental agreements.
- Refugees and asylum-seekers have limited access to Libyan health facilities. UNHCR and partners provide primary healthcare and psychosocial support to refugees and asylum-seekers in Tripoli and in detention facilities. In 2020, UNHCR and partners conducted over 23,700 medical consultations for vulnerable refugees and asylum-seekers in both the urban setting (16,568) and in detention (7,180). A 24-hour emergency medical hotline and ambulance service, for emergency cases, was launched in July, in partnership with IRC and the Libyan Red Crescent (LRC) supported by the EU Trust Fund for Africa (EUTF).

Durable Solutions

- UNHCR continues to seek durable solutions, such as resettlement, family reunification and voluntary repatriation, for refugees and asylum-seekers, giving particular attention to the most vulnerable. In 2020, 319 cases for resettlement to third countries directly from Libya were accepted. Since November 2017, a total of 6,388 refugees and asylum-seekers departed from Libya, either through resettlement (1,747 since 2017) or humanitarian evacuations (4,641 since 2017, including 3,318 to Niger, 808 to Italy, 515 to Rwanda).
- From March to August 2020, all evacuation/resettlement flights were postponed due to the COVID-19 pandemic. However, Tripoli airport re-opened in August 2020, and in mid-October 153 persons were able to fly to the Niger ETM and in mid-November, while 79 flew to Rwanda ETM. In late November, two groups (46 refugees in total) were successfully resettled to Europe. By the end of 2020, 811 had departed (490 evacuated and 321 resettled). In 2021, 189 people have so far departed (resettled) through eleven flights.

COVID-19

- Libya reported its first case of coronavirus (COVID-19) on 24 March 2020. The number of new reported cases in Libya over the summer and into Autumn rose sharply (as of 19 April 2021, the NCDC recorded a total of 172,464 cases of COVID-19 in Libya, of whom 11,898 were active cases, 157,658 recovered and 2,908 reported deaths). As a result, the operation has adjusted its regular programming to respect social distancing and safety protocols.
- On 15 March, as part of global efforts to curb the spread of COVID-19, Libya shut all borders and imposed curfews. UNHCR and its partners introduced new health and safety protocols at the Serraj Registration Centre and the Community Day Centre (CDC) in Tripoli. The operations now work on an appointment-only basis, to ensure social distancing to protect the health of persons of concern, partners and staff, while temperature checks, hand sanitisers, and masks are required for everyone entering the facilities.
- UNHCR has strengthened its hotline response in order to improve its outreach with and provide information to refugees and asylum-seekers. Between 1 April and 31 December 2020, 9,591 calls in total were received. Most of the enquiries relate to material assistance and cash, followed by queries on registration and resettlement, as well as some enquiries relating to COVID-19. The majority of calls are from people in Tripoli and the wider western area.
- In July, a new 24-hour emergency medical hotline and ambulance service, to refer emergency cases to secondary and tertiary hospitals and clinics, was launched in partnership with IRC and the Libyan Red Crescent (LRC). In August a new call centre was opened, run by UNHCR partner, NRC, to enhance two-way communication between staff and refugees/asylum-seekers across Libya. The majority of calls related to resettlement queries. Due to Libyan curfew and



movement restrictions, changes in the service opening hours and modalities at the CDC and Serraj are promptly communicated to refugees via flash updates and disseminated through social media and community contacts.

- Despite the challenging conditions imposed by the COVID-19 pandemic, UNHCR's supply unit has been able to
 locally procure essential items, such as the personal protective equipment needed for staff: both disposable and N95
 masks, hand sanitisers, protective gloves, and infrared thermometers.
- Periodic assessments highlight the worrying socio-economic impact of COVID-19, which is compounding the vulnerability of refugees. Data collected through regular assessments suggests that in March thereon, a significant proportion had lost their jobs with the inability to work due to COVID-19 related movement restrictions, particularly those who relied on temporary employment and casual daily labour such as in commerce or construction. With increasing prices of basic food and commodities, many refugees and asylum-seekers cannot afford even the most basic costs of day-to-day living. During Ramadan 2020, UNHCR distributed core relief items to 4,788 refugees and asylum-seekers, living mostly in Tripoli neighbourhoods, as well as in Misrata and Azzawya. This included food baskets (to last for one month), hygiene kits, jerry cans and water purification tablets (provided by UNICEF). In June, UNHCR together with WFP began a pilot food distribution project, aiming to reach some of the most food-insecure refugees with food packages designed to last a month. The joint programme was expanded in September, to add areas outside of Tripoli, including Zawiya, Misrata, Benghazi and Zwara. By the end of 2020, more than 35,000 parcels had been distributed to over 15,000 individuals, exceeding the initial project aim to reach 10,000 persons by the year end. In 2021, UNHCR and WFP aim to reach a similar number, with 7,600 people reached so far.
- UNHCR continues to support the internally displaced (IDPs). During Ramadan 2020, UNHCR through its partner LibAid distributed its food package to more than 500 IDP families (3,731 individuals) living in the Hay Al-Andalus district in Tripoli. LibAid distributed nearly 19,000 bars of UNHCR soap throughout all the main eastern IDP areas. Cash assistance is a valuable tool and in 2020/1 more than 6,000 IDP households (32,000 individuals) received cash grants through partners Danish Refugee Council (DRC) and ACTED. In 2020/1, DRC has been targeting households in the Tripoli area with prepaid cash card distributions, which can be used to purchase items in stores, while ACTED has been reaching households in Benghazi and Sebha. During Winter 2020/1, UNHCR, together with partners LibAid and Libyan Red Crescent, distributed winter kits to 14,648 individuals across Libya. In Eastern Libya 1,323 households (6,432 individuals) were reached, while 462 families (2,466 individuals) in Central Libya received kits. In the West, including locations in and around Tripoli, at Zawiya and at Bani Walid, 1,379 households (5,750 individuals) were reached.
- Detention centres (DC) present a particular health risk due to COVID-19, because of overcrowded and insanitary conditions. UNHCR through its partners (LibAid and IRC), organized the distribution of hygiene kits and other CRIs at a number of DCs across the country, in both east and west Libya. From mid-April until the present, some 8,600 hygiene kits have been distributed to 17 detention centres.
- The health sector remains the focus of UNHCR's support. To date, UNHCR has supplied 15 ambulances to various municipalities, hygiene kits, soap, PPE, blankets, sanitary cloth for hospital bedding, and tents. In addition, with a fluctuating power grid, the provision of 13 generators has been an invaluable form of assistance. UNHCR has also provided 14 prefabricated containers, to be used as COVID-19 testing and reception facilities at Misrata, Benghazi, Sebha and Azzawya, to help expand space at primary healthcare centres.

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