



DTM

DISPLACEMENT TRACKING MATRIX

dtm.iom.int/libya

dtmlibya@iom.int

MAR
APR
2020

LIBYA IDP AND RETURNEE REPORT

MOBILITY TRACKING

ROUND 30

MARCH - APRIL 2020



Project funded by
the European Union

© 2020 International Organization for Migration (IOM)

All rights reserved. No part of this publication may be reproduced, stored in a retrieval system, or transmitted in any form or by any means, electronic, mechanical, photocopying, recording, or otherwise without the prior written permission of the International Organization for Migration (IOM).

Cover Photo: IOM collecting household information from an IDP head of household in Surman, Libya, as part of assistance provided via interagency Rapid Response Mechanism; February 2020 ©IOM 2020 / Majdi El Nakua

Note: Lack of use of personal protective equipment (PPE) is appropriate to context as the photo was taken before Covid-19 cases were reported in Libya, and therefore before public health advisory on use of PPE.

CONTENTS

KEY FINDINGS (ROUND 30)	4
OVERVIEW	5
UPDATE ON CONFLICT IN WESTERN LIBYA	6
AREAS OF DISPLACEMENT AND RETURN	7
LOCATIONS OF DISPLACEMENT AND RETURN MAP	9
DEMOGRAPHICS.....	9
DRIVERS OF DISPLACEMENT	10
MULTISECTORAL LOCATION ASSESSMENT.....	12
HUMANITARIAN PRIORITY NEEDS.....	12
EDUCATION	14
FOOD.....	15
HEALTH.....	16
NFI AND ACCESS TO MARKETS.....	17
SECURITY AND MINE ACTION	18
ACCOMMODATION.....	19
WATER SANITATION AND HYGIENE (WASH)	21
OTHER PUBLIC SERVICES.....	22
REFERENCE MAP - LIBYA	23
METHODOLOGY.....	24

KEY FINDINGS (ROUND 30)

IDPs



401,836
IDPs IN LIBYA



94%
WERE DISPLACED DUE TO
THE DETERIORATION OF THE
SECURITY SITUATION



60%
OF IDPS LIVE IN SELF-PAID
RENTED ACCOMMODATION

Returnees



457,324
RETURNEES IN LIBYA

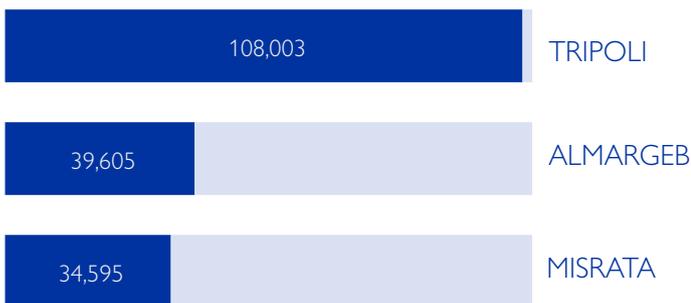


8,751
NEW RETURNEES IDENTIFIED
INDICATING AN UPTICK IN
RETURN MOVEMENTS

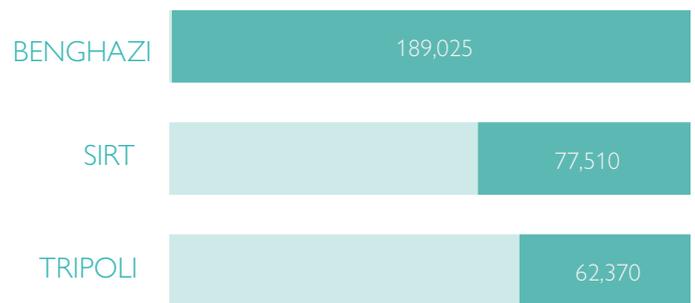


84%
OF RETURNEES LIVE IN
THEIR PREVIOUS HOMES

TOP 3 REGIONS WITH IDPs



TOP 3 REGIONS WITH RETURNEES



659 of 667
COMMUNITIES



100% of
MUNICIPALITIES

2,071 INTERVIEWS WITH KEY INFORMANTS
(ROUND 29, MOBILITY TRACKING)

100% COVERAGE



OVERVIEW

This report presents the findings of Round 30 of the mobility tracking component of the Displacement Tracking Matrix (DTM) programme in Libya, covering the reporting period from March to April 2020.

In Round 30, the number of internally displaced persons (IDPs) identified in Libya increased from 373,709 IDPs to 401,836 IDPs. New displacements during the reporting period were primarily due to an increase in the instances of armed conflict in western Libya. In particular during March – April 2020 displacements to the areas of Abu Qurayn, Sirt, Hai Alandalus, Tajoura, and Garabolli were observed from the conflict affected areas.

The sustained use of air strikes and artillery shelling in the vicinity of areas inhabited by civilians continues to negatively impact the safety and lives of the civilian population in southern Tripoli region and other conflict-affected areas in Libya. In the context of ongoing armed conflict in and around southern Tripoli since April 2019, and the protracted cases of previously displaced households, the municipalities of Tripoli region now collectively host more than 108,000 IDPs. In Round 30 an uptick in return of IDPs to their places of origin was also observed as 8,751 individuals previously displaced returned to their places of origin. Close to 89% of these returnees returned to their places of origin in Aljbara, followed by Almargeb (3% of the new returnees).

Towards the end of the data collection cycle intensification in the conflict was reported in the areas of Tarhuna, Bani Waleed, and Sirt resulting in the displacement of over 18,475 additional individuals to areas in eastern Libya. (Further details in DTM Flash Update).¹

The reporting period also coincides with the emergence of Covid-19 in Libya². As public health measures including widespread restrictions on movement and mobility were imposed, DTM also initiated a Covid-19 component of Mobility Tracking aimed at understanding the socio-economic impact of these restrictions on vulnerable populations on the move. During the first round of the Covid-19 Mobility Tracking (last two weeks of April), in 9 out of the 39 municipalities assessed key informants reported that arrivals of IDPs seeking safety in these areas will be negatively affected due to the restrictions on movement that prevent people from arriving at or leaving these areas. In 90% of the municipalities assessed (35 municipalities) these restrictions on movement put in place as a public health measure had negatively affected the residents including IDPs and returnees in these areas.³

DTM Multi-Sectoral Location Assessment's (MSLA) key informant data on health facilities' distribution by region (mantika) in Libya highlights critical structural issues and gaps. In 43 municipalities a lack of functional hospitals was reported. For life saving clinical management of critical Covid-19 patients only hospitals with fully functional intensive or critical care units may be considered to provide adequate level of care, and therefore lack of hospitals in 43% municipalities of Libya is a critical gap that should be considered in any potential Covid-19 response plan.

Fig 1 Libya displacement and return timeline



1 DTM Libya — Bani Waleed, Tarhuna, Sirt, Ejdabia, Benghazi Flash Update (07 JUNE 2020) [report accessible here](#).

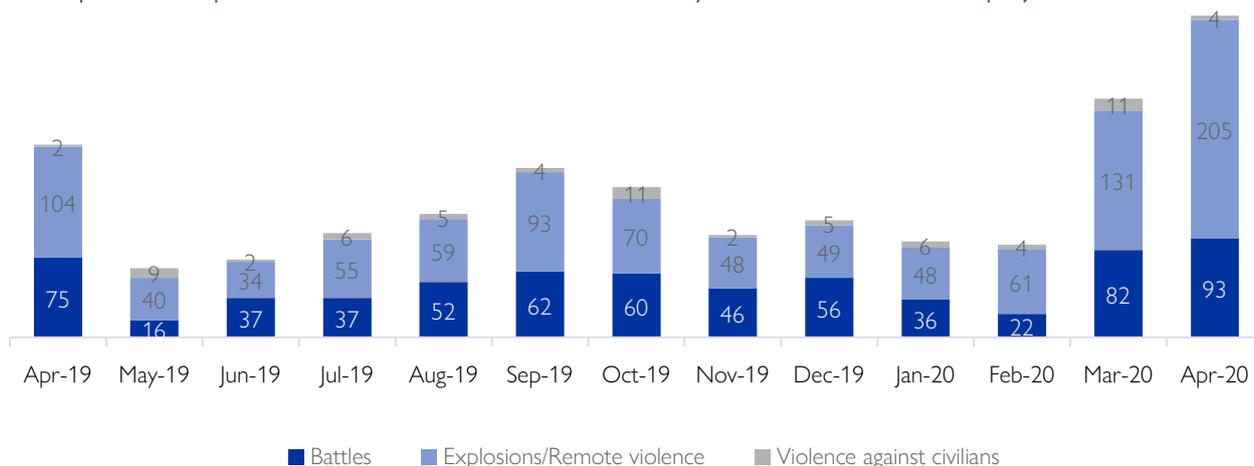
2 For further details see DTM Mobility Restrictions Dashboards: Click here for [Dashboard #1](#), [Dashboard #2](#), [Dashboard #3](#) at: <https://migration.iom.int/reports/libya---mobility-restriction-dashboard-3-7-may-2020>

3 For further details see DTM Libya — COVID-19 MOBILITY TRACKING #1 (16 May 2020): <https://migration.iom.int/reports/libya---covid-19-mobility-tracking-1-16-may-2020>

UPDATE ON CONFLICT IN WESTERN LIBYA

During March - April 2020 (round 30) a sharp increase in the number of armed conflict related events was reported in Libya by the Armed Conflict Location and Event Data (ACLED) project (see figure 2 below). Sustained armed conflict on the ground (battles), and use of air strikes and artillery shelling (explosions/remote violence) in the vicinity of areas inhabited by civilians continued to negatively impact the safety and lives of the civilian population, and resulted in significant new displacements. All displacements observed and reported during the round 30 data collected cycle were driven by armed conflict directly and indirectly via increase in general insecurity.

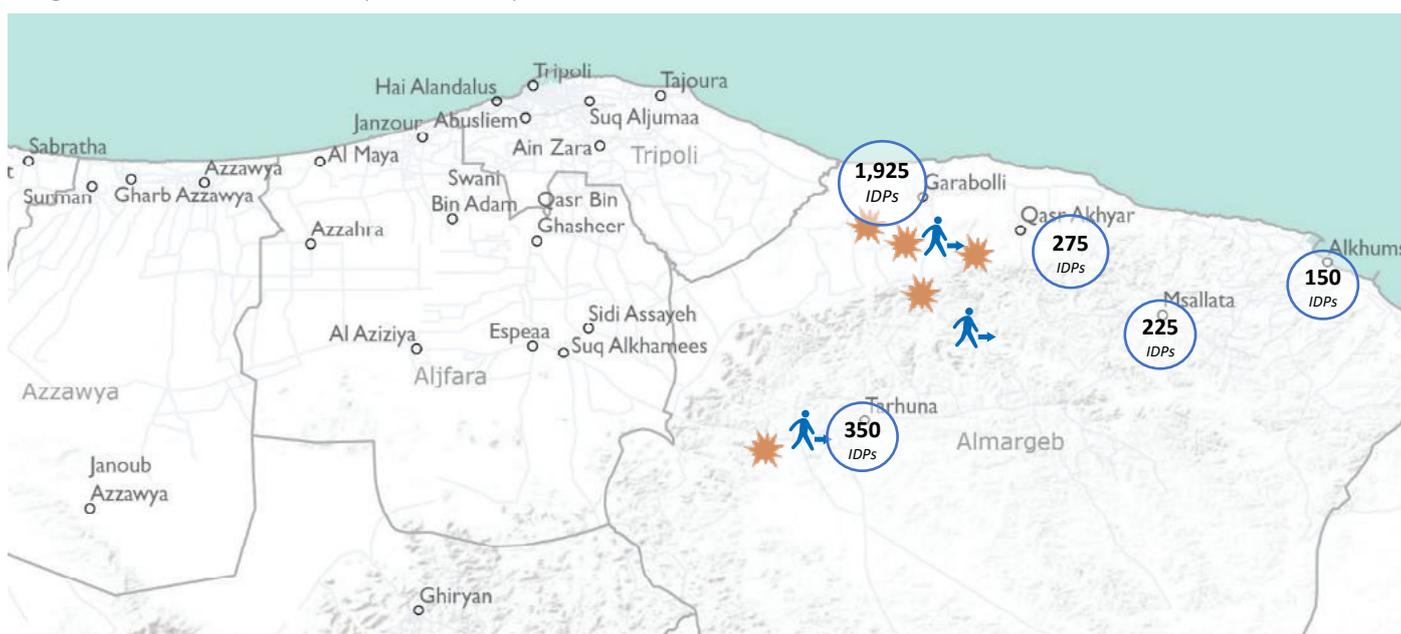
Fig 2 Comparison of reported events related to armed conflict in Libya via utilization of ACLED project dataset.



1 Data as of 2 June 2020 from Armed Conflict Location and Event Data Project (ACLED), Data Export Tool, <https://www.acleddata.com/data/>

Furthermore, the security situation around the areas of Abu Qurayn, Sirt, and Tarhuna deteriorated substantially during the reporting period. During the reporting period DTM identified at least 620 newly displaced families (approximately 3,100 individuals) who were forced to leave their homes due to armed conflict and seek safety in the areas of Garabolli, Qasr Alkhyar, Msallata and Alkhums.

Fig 3 Tarhuna and Garabolli Displacement Map



The designations employed and the presentation of material on this map do not imply the expression of any opinion whatsoever on the part of the United Nations (and IOM) concerning the legal status of any country, territory, city or area or its authorities, or concerning the delimitation of its frontiers or boundaries.

AREAS OF DISPLACEMENT AND RETURN

In continuation with a trend observed over several rounds of data collection, in round 30, the Tripoli region (mantika) continued to host the largest population of internally displaced persons (IDPs) in Libya. In the context of ongoing armed conflict in and around south Tripoli since April 2019, and the protracted cases of previously displaced households, the municipalities of Tripoli region (mantika) now collectively host over one hundred thousand IDPs.

The Tripoli municipalities of Tajoura (33,578 IDPs), Suq Aljuma (29,825 IDPs), and Hai Alandalus (13,993 IDPs) host 71 percent of the total IDP population in the Tripoli region. The majority of IDPs seeking shelter and protection in these municipalities were displaced from the conflict affected areas of Ain Zara and southern Tajoura from within the Tripoli region, and from the municipalities of Al Aziziya, Qasr Bin Ghasheer and Swani Bin Adam in Aljbara region.

The regions (manatik) of Misrata and Almageb in Western Libya host the second and the third largest populations of IDPs in Libya respectively. The majority of IDPs in these locations were also displaced from conflict affected areas in and around southern Tripoli since April 2019.

During the reporting period, Aljbara region was identified to host the fourth largest population of IDPs in Libya (30,360 individuals). A large proportion of these IDPs were displaced from within the Aljbara regions' conflict affected areas of Qasr Bin Ghasheer, Swani Bin Adam, and Espeaa.

Fig 4 Number of IDPs by Region (Mantika)

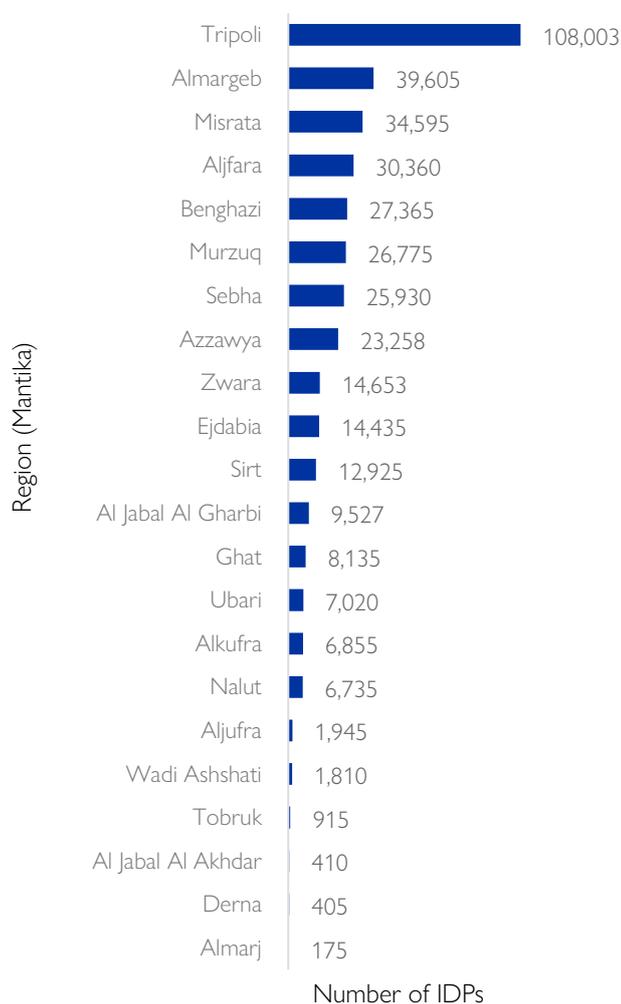
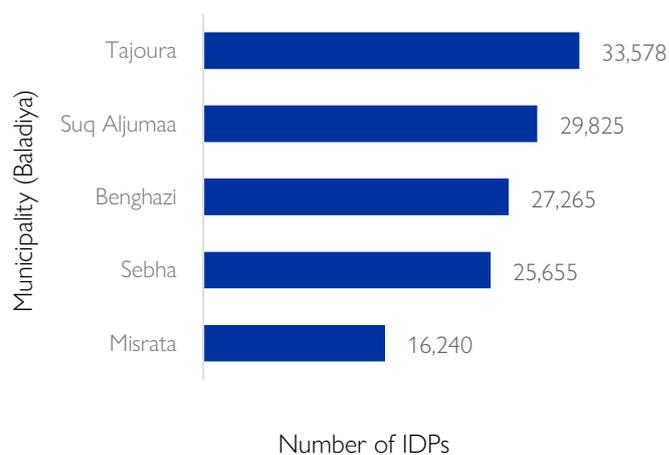


Fig 5 Top 5 Municipalities of Displacement



During round 30 data collection a slight uptick in return movements was reported. As in previous rounds of data collection, the highest number of returnees (IDPs who had returned to their habitual place of residence since 2016) were identified in the regions of Benghazi (189,025 individuals), followed by Sirt (77,510 individuals) and Tripoli (62,370 individuals).

The charts below show the distribution of IDPs and returnees by region (mantika) of displacement and return respectively, followed by top 5 municipalities of displacement and return.

Fig 6 Number of Returnees by Region (Mantika)

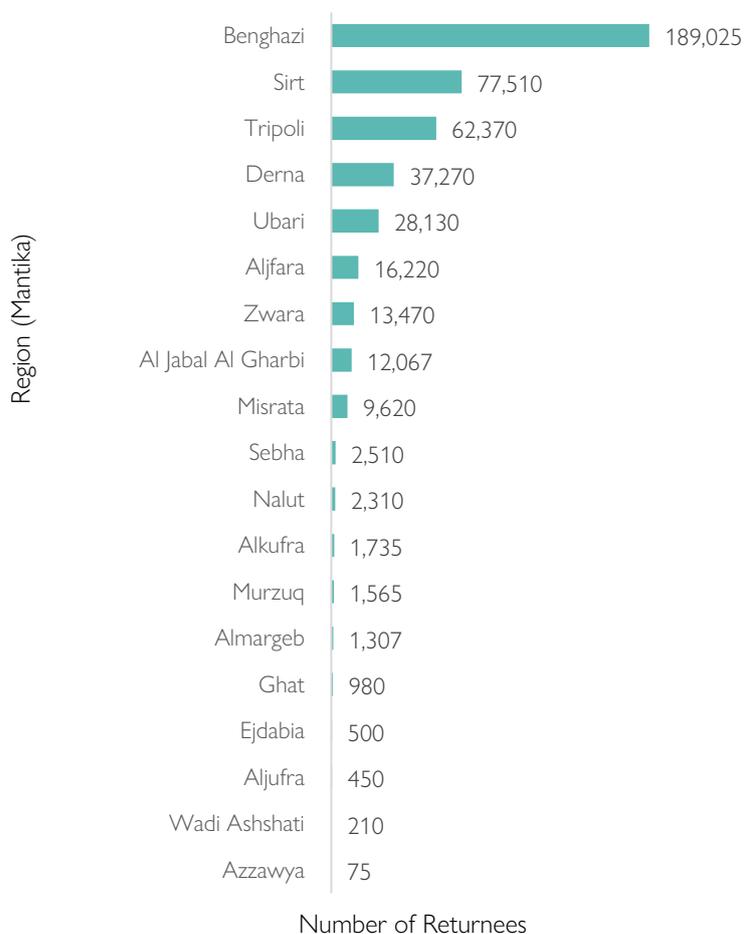
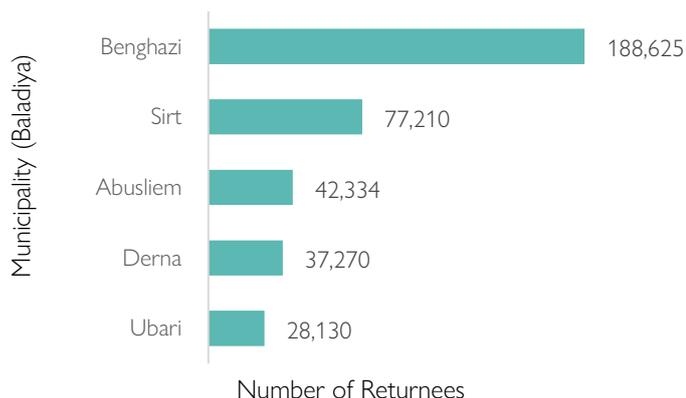


Fig 7 Top 5 Municipalities of Return



LOCATIONS OF DISPLACEMENT AND RETURN MAP

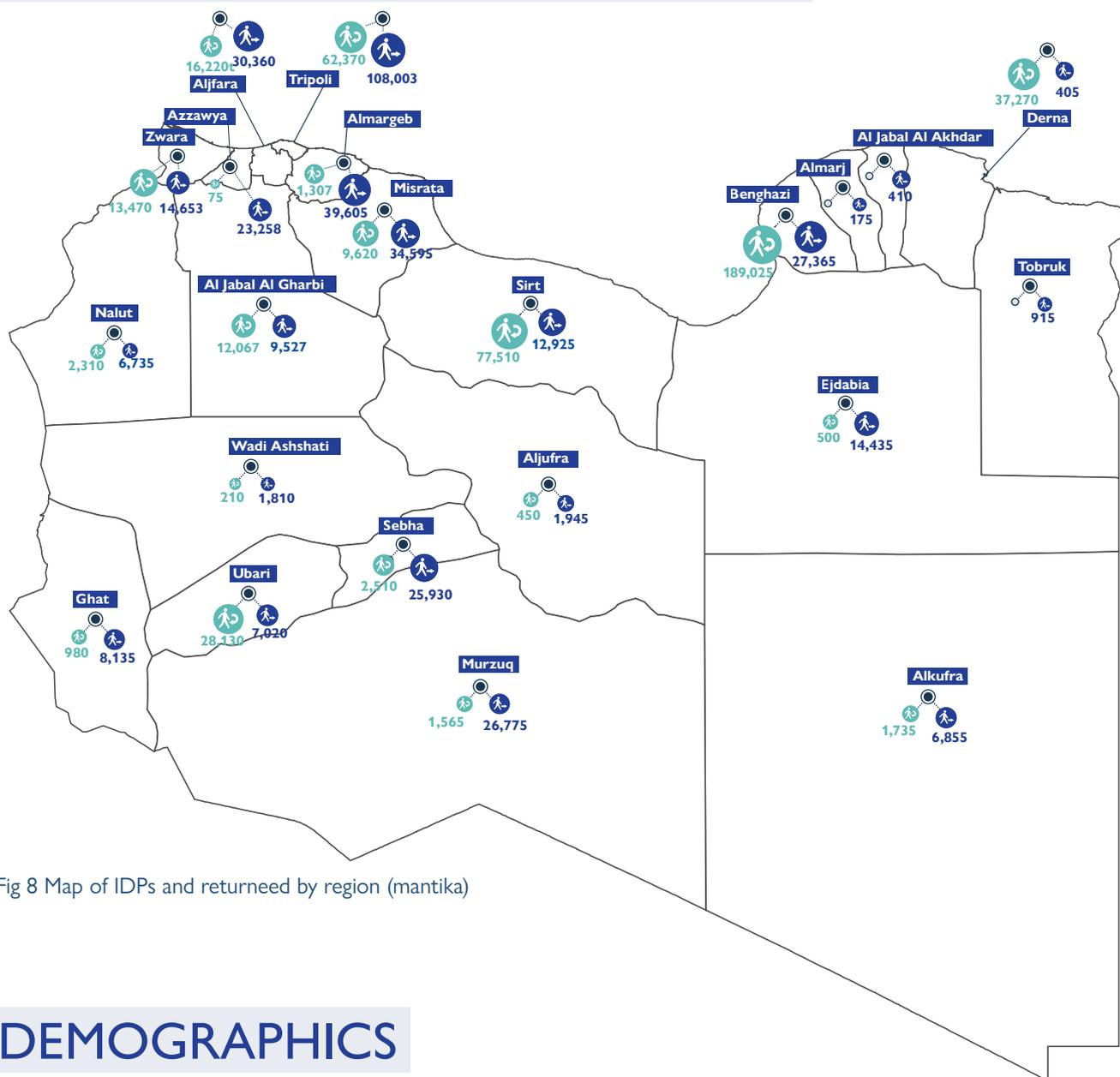
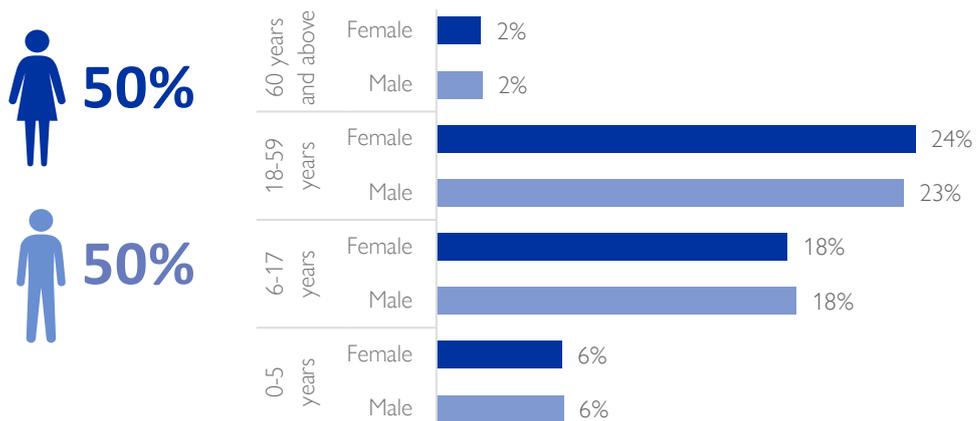


Fig 8 Map of IDPs and returneed by region (mantika)

DEMOGRAPHICS

In the context of ongoing armed conflict in western Libya, DTM conducted a rapid profiling exercise of displaced households to better understand the demographic composition of IDP families (figure 9). To this end, DTM enumerators gathered demographic data from a sample of 59,473 IDPs (11,228 families) displaced in western Libya till April 2020.

Fig 9 IDP Profiling: Age - Gender Disaggregation



DRIVERS OF DISPLACEMENT

During the assessment, internal displacement in Libya was determined to be primarily driven by insecurity due to armed conflict, and its negative on the economic situation and availability of basic services. Most IDPs left their communities of origin in search of safety, with deterioration of economic situation and lack of availability of basic services as exacerbating factors.

Similar to the previous assessments, insecurity was identified as the main driver of displacement in Libya. An overwhelming majority of key informants (94%) reported during round 30 (March - April 2020) data collection that IDPs had left their places of origin because of insecurity.

As an exacerbating factor deterioration of the economic situation was cited by 28 percent of the key informants to play a role as a driver of displacement in Libya. While only in 15 muhallas or communities (3% communities with displacement) deterioration of economic situation was identified as the primary reason in all other locations, rising insecurity and economic deterioration were both identified together as drivers of displacement. Some of the factors contributing to the deterioration of the economic situation were reported as an increase in the rents for accommodation and loss of IDP household's financial capacity over the protracted crisis.

Figure 10 shows that while insecurity was the primary driver of displacement, as identified by key informants in 94% of the communities affected by displacement, it was identified as the only primary driver of displacement in 39% of the communities. For the remaining communities other exacerbating factors such as economic deterioration due to armed conflict (25% communities), lack of basic services (22% communities), and a combination of both economic deterioration and lack of basic services (9% communities) were identified as exacerbating factors in addition to insecurity as the primary driver of displacement in Libya. Furthermore, in the remaining communities primary drivers of displacement were related to deterioration of the economic situation (3%), lack of access to services (0.4%), or other factors (2%).

Fig 10 Reasons for Displacement from Place of Origin (multiple choice)

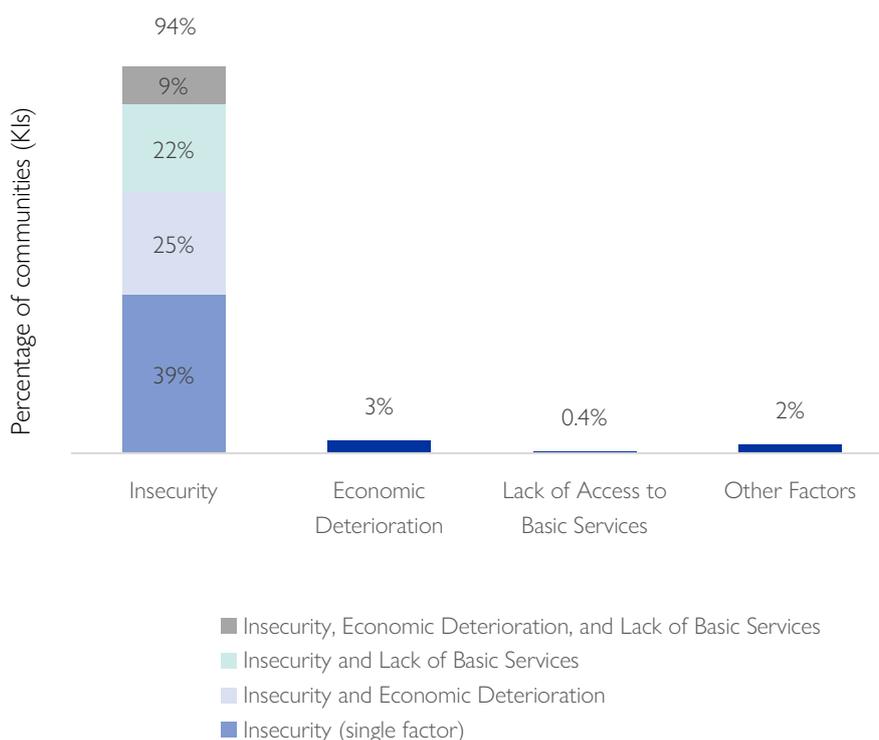
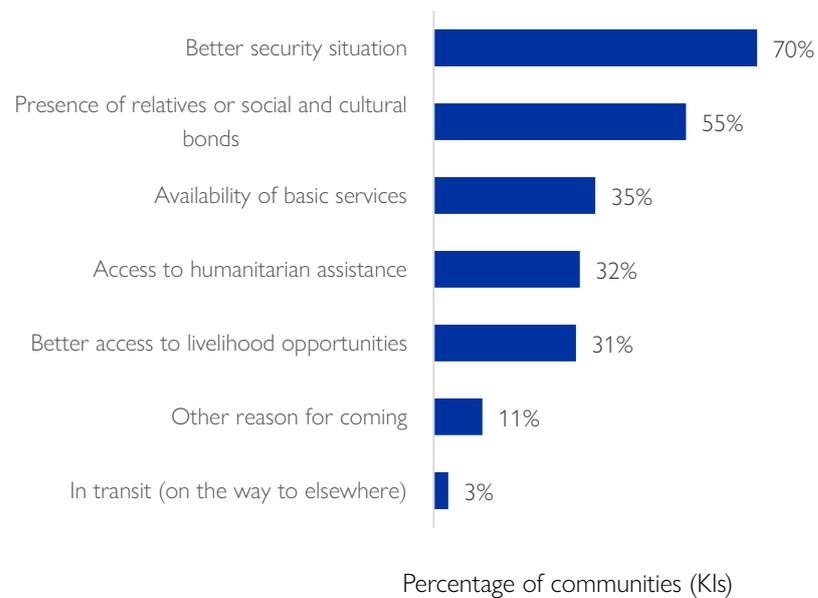


Figure 11 shows that various factors play a role in the decision making by displaced families on where to seek safety after displacing from their places of origin. The multiple-choice question on reasons for choosing the current location as place of displacement identifies that in 70% of the locations of displacement IDPs had chosen these communities due to better security situation there in comparison to their places of origin which had been affected by insecurity due to armed conflict. While, the second major factor was identified as presence of relatives or social and cultural bonds (55%) in the locations of displacement as a reason for IDPs seeking safety in these locations. These findings further reinforce that the deterioration of the security situation due to armed conflict is the most significant driver of displacement in Libya, and that IDP families decide on seeking safety in areas that offer better security and social connections. Rest of the contributing factors shown in figure 11 such as availability of basic services, access to humanitarian assistance, livelihood opportunities etc. also play a role in the decision of the IDP families on where to displace.

Fig 11 Reasons for Choosing the Place of Displacement (multiple choice)



MULTISECTORAL LOCATION ASSESSMENT

DTM Libya's Mobility Tracking includes a Multi-Sectoral Location Assessment (MSLA) covering all regions (mantika) and municipalities (baladiya) of Libya. The MSLA key informant interviews regularly collect sectoral baseline data on availability and access to services and priority humanitarian needs. The regular and continuous implementation of the MSLA is aimed at supporting both strategic and operational planning of humanitarian programming via identification of specific sectoral issues at community-levels.

Round 30 presents the findings for the reporting period on MSLA covering multisectoral priority needs of IDPs and returnees, details of IDP accommodations, and key findings related to education, food, health, non-food items (NFI) and access to markets, protection (security and Mine Action), water sources (WASH), and other public services.

HUMANITARIAN PRIORITY NEEDS

The priority needs identified by IDPs were accommodation, food assistance, health services and non-food items (NFIs) as shown in Figure 12. For returnees, key priority needs were found to be food assistance, followed by non-food items, support in the provision of water, sanitation and hygiene (WASH) services, and health services as shown in Figure 13.

Similar to the previous round, the top challenges in fulfilling these needs were related to the erosion of coping mechanisms of the affected populations due to the protracted nature of the ongoing armed conflict. The majority of key informants reported that IDPs and returnees, in need, were unable to meet their basic needs such as food and non-food items due to reported price hikes (inflation) and limited or irregular supply of the needed items on the market. The health services were reported to face challenges related to irregular supply of medicines and more than one third of private and public health facilities not being fully operational.

The chart shows ranked priority needs of both the affected population groups based on the top three needs reported at community (muhalla) levels.

Fig 12 Priority Needs of IDPs (Ranked)

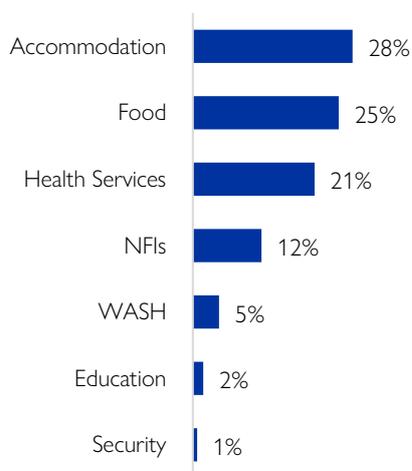
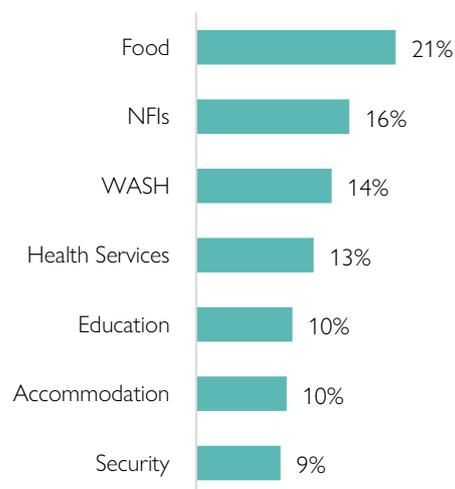


Fig 13 Priority Needs of Returnees (Ranked)



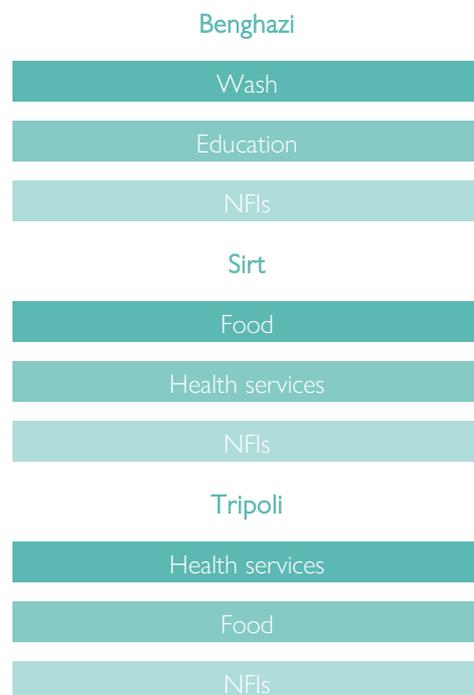
Area analysis of priority humanitarian needs shows variation in the reported priority needs for the top three regions (mantika) as per the population figures for IDPs and returnees in these regions. See next page.

The top three ranked humanitarian needs for the regions (mantika) with three largest IDP and returnee populations are shown below. The ranking is based on weighted average score calculated for the highest number of people with humanitarian needs. This indicates regional variation in the key informant identified humanitarian needs for IDPs and returnees, where for IDPs in Tripoli region (mantika) the top three humanitarian needs were related to access to health services (particularly critical in the context of Covid-19), and provision of food and shelter assistance. The rest of the ranking per region (mantika) for IDPs and returnees respectively can be seen figures 14 and 15 below.

Fig 14 Priority humanitarian needs of IDPs (ranked) for top three regions (mantika) with highest IDP populations.



Fig 15 Priority humanitarian needs of returnees (ranked) for top three regions (mantika) with highest returnee populations.



The following section presents key sectoral findings of the DTM Multi-Sectoral Location Assessment conducted during round 30 data collection (March - April 2020).

EDUCATION

During Round 30 DTM multi-sectoral location assessment (MSLA) data collection, key informants in 100 municipalities (baladiya) of Libya reported that 3% public and 2% private schools were not operational for various reasons such as damage to buildings and physical infrastructure due to armed conflict or being utilized for sheltering IDPs in need of emergency shelters. Furthermore, a total of 43 schools were reported to be fully destroyed due to armed conflict. See figures 16 and 17 for further details.

However, during round 30 data collection as part of DTM's Mobility Tracking activities focused on Covid-19, a complete closure of schools as a public health measure was reported in all municipalities assessed.¹

Fig 16 Operational and non-operational schools.

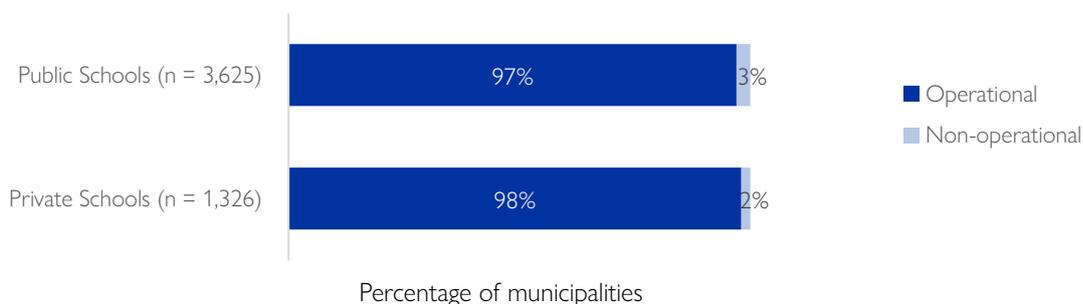
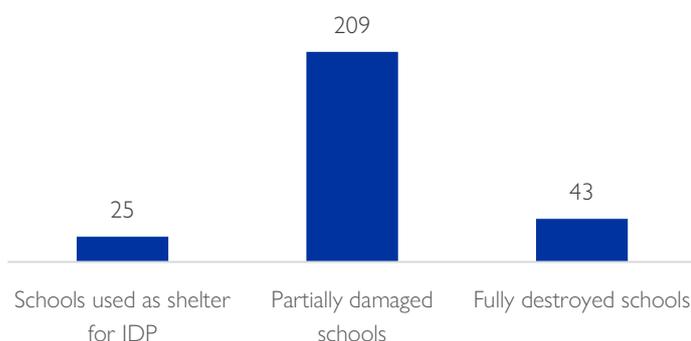


Fig 17 Number of schools reported as partially and fully destroyed



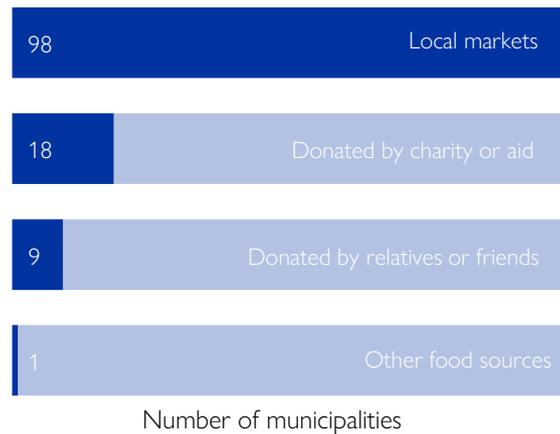
¹ For further details see DTM Libya — COVID-19 MOBILITY TRACKING #1 (16 May 2020): <https://migration.iom.int/reports/libya—-covid-19-mobility-tracking-1-16-may-2020>

FOOD

In 98 municipalities local markets, such as local grocery stores, supermarkets, and open markets, were reported to be the main source of food supplies for residents, including IDPs, returnees and the host community.

Furthermore, in 18 municipalities food distributions by charity and aid organizations were also identified as sources of food supply for vulnerable populations as shown in the figure below.

Fig 18 Main sources of food supplies for residents by number of municipalities



The modes of payment utilized for purchasing food were reported to be payments in cash, along with ATM cards or on credit are shown in the figure below as per the number of municipalities reporting use of each payment mode utilized.

The biggest obstacle in accessing adequate food to meet household needs was most frequently reported as food being too expensive compared to the purchasing power of affected populations, furthermore in three municipalities of Bani Waleed, Tarhuna, and Sidi Assayeh insufficient availability of food items was also reported.

Fig 19 Main modes of payment used for purchasing food by number of municipalities

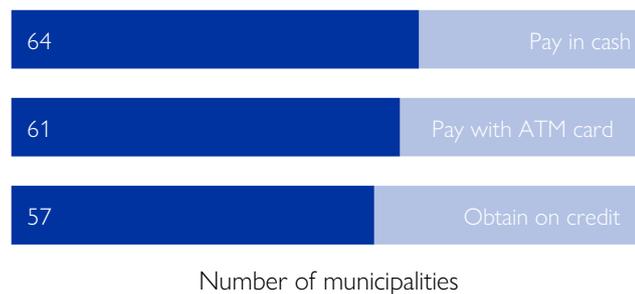
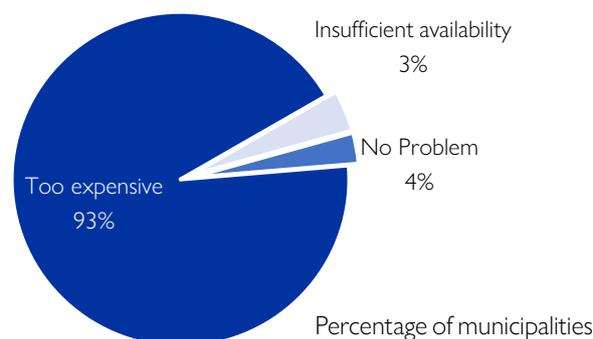


Fig 20 Main problems related to food supply



HEALTH

During Round 30 data collection, same as the findings of the previous round, across Libya key informants identified 63% of all the health facilities as operational, while 32% were reported to be partially operational and 5% were reported to be not operational at all. Across all municipalities, only 53% of the hospitals were reported to be operational, while 41% were partially operational and 7% were reported non-operational. Figure 21 presents the statistics on reported operational, partially operational, and non-operational private and public health facilities.

Furthermore, the range of services available in operational health facilities was often reported to be limited due to various factors, including shortages of medical supplies, such as shortages of medicines for chronic diseases as reported in 98 municipalities out of a total of 100 municipalities in Libya.

Fig 21 Availability of health services in the assessed municipalities

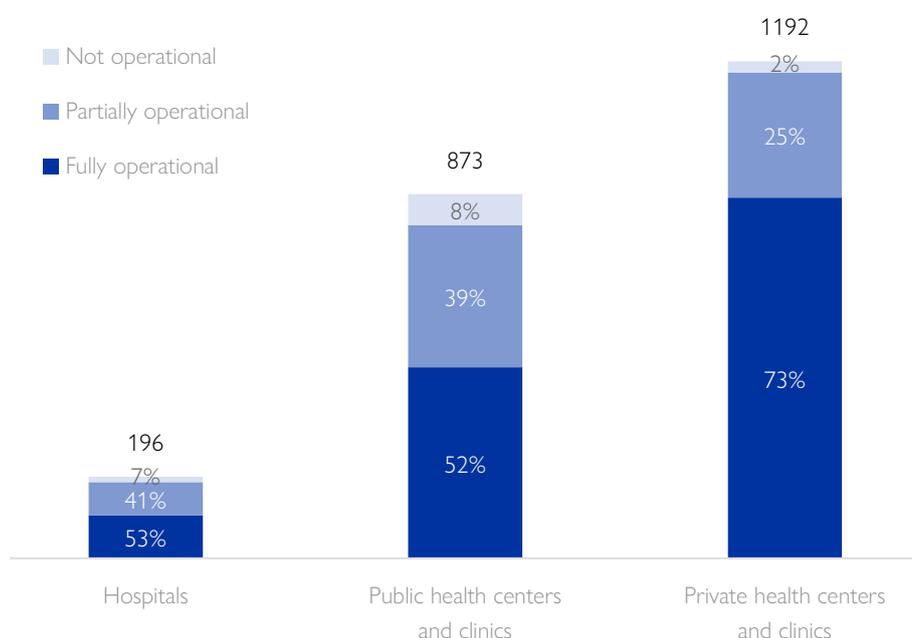


Fig 22 Irregular supply of medication reported in 98 municipalities (baladiya)



Analysis of health facilities' distribution by region (mantika) highlights structural issues, such as lack of fully functional hospitals in 43 municipalities (43% of Libyan level 3 administrative units / areas). Similarly, the worst three regions (mantika) in terms of overall availability of health services reported by key informants were identified as Aljufra, Alkufra, and Ghat.

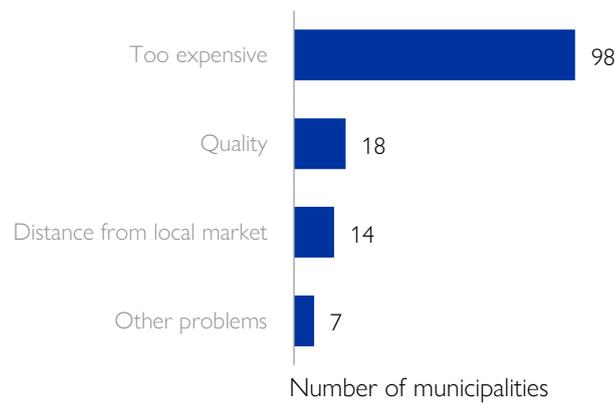
For life saving clinical management of critical Covid-19 patients only hospitals with fully functional intensive or critical care units may be considered to provide adequate level of care and service. Repeated instances of armed conflict in various parts of Libya, chronic underinvestment in health infrastructure, and dependence on private health service providers has drastically reduced the capacity of health sector in Libya to deal with the Covid-19 emergency.

DTM's Mobility Tracking population data and key informant reports on health services collected via Multi-Sectoral Location Assessment can be used to identify key critical areas of gaps in health services along with higher proportion of affected populations such as IDPs, returnees, and migrants.

NFI AND ACCESS TO MARKETS

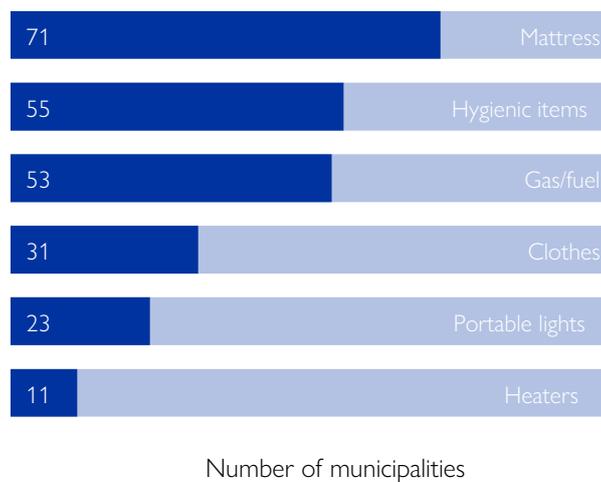
Data was also collected on humanitarian priority needs related to non-food items (NFIs) in the local market. The most commonly cited obstacle to accessing NFIs was that items were too expensive for those in need of assistance. In 18 municipalities the main challenge in accessing non-food items was reported to be related to the poor quality of items available, followed by distance from local markets as a main challenge reported by key informants in 14 municipalities.

Fig 23 Main challenges reported in obtaining the required Non-Food Items



Notably, mattresses emerged as the most commonly cited item in need as part of the humanitarian Non Food Items kit, reported by key informants in 71 municipalities. The second priority NFI need identified was hygiene items (55 municipalities) which is also significant in terms of facilitating the prevention of the spread of Covid-19. While gas/fuel (53 municipalities) and clothes (31 municipalities) were reported as third and fourth NFI priority need respectively.

Fig 24 Most reported priority Non-Food Items in need



SECURITY AND MINE ACTION

As part of the Multisectoral Location Assessment, security-related indicators were collected in all municipalities, including questions specifically related to mine action (Mine Action Area of Responsibility). The aim was to understand the challenges faced by residents in moving safely within their municipalities, the reasons hindering safe movement, and awareness of the presence of unexploded ordinances (UXOs).

Visible presence of UXOs was reported in 6 municipalities. Residents were reported as not being able to move safely within their area of residence in 18 municipalities. In municipalities where movement was restricted, the main reason was insecurity (16 municipalities), road closures (9 municipalities), and presence of unexploded ordinance (1 municipality).

During round 30 data collection, restrictions on freedom of movement were also reported and observed as part of the Covid-19 public health measures, however those are not covered under this section (or in the list of reasons restricting movement in figure 27)

Fig 25 Presence of UXOs reported in 6 municipalities



Fig 26 Restrictions on freedom of movement reported in 18 municipalities



Fig 27 Reasons for restrictions on freedom of movement as reported in 19 municipalities

Municipality	Reason for Restricted Freedom of Movement
Abu Qurayn	Insecurity
Abusliem	Road closures, Insecurity, Other
Ain Zara	Road closures, Insecurity, Other
Al Aziziya	Road closures, Insecurity, Other
Algatroun	Insecurity
Azzahra	Insecurity
Derna	Road closures, threat/presence of explosive hazards
Espeaa	Road closures, Other
Garaboli	Insecurity
Ghat	Insecurity
Murzuq	Insecurity
Qasr Akhyar	Insecurity
Qasr Bin Ghasheer	Road closures, Insecurity, Other
Sebha	Insecurity
Sidi Assayeh	Road closed, Insecurity, Other
Suq Alkhamees	Road closures, Insecurity, Other
Tarhuna	Road closures, Insecurity, Other
Ubari	Insecurity

ACCOMMODATION

In round 30, 60% of all IDPs identified in Libya were reported to be residing in privately rented accommodation, while 25% were staying with host families without paying rent, and 6% were taking shelter in schools and other public buildings. Other places of IDP accommodation include informal camp settings (3%), other types of shelter arrangements (7%) including abandoned buildings (2%).

84% of returnees were reported to be back in their own homes in their areas origin. The remaining returnees were in rented accommodations (8%), with host families (7%) or utilizing other accommodation arrangements (1%).

Please refer to the map on next page for the geographical distribution of IDPs in public shelter or communal accommodation settings by region.

Fig 28 Accommodation types utilized by IDPs

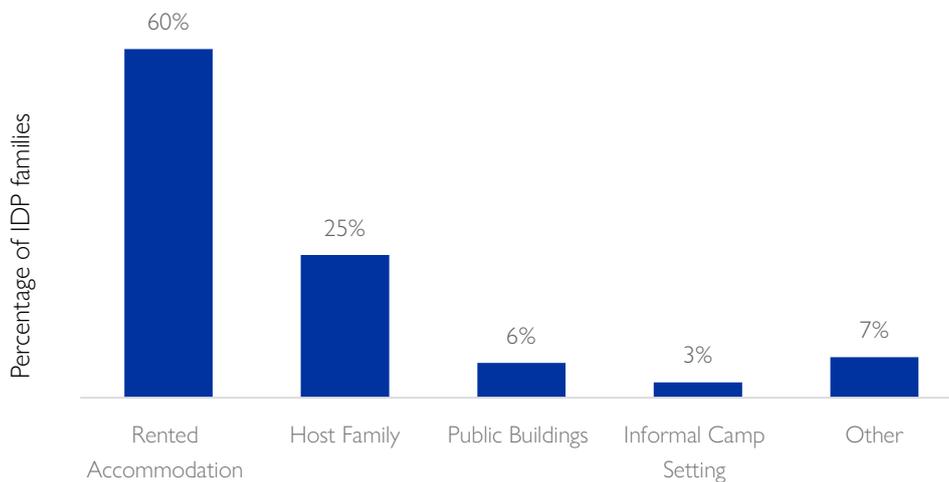


Fig 29 Accommodation types utilized by returnees

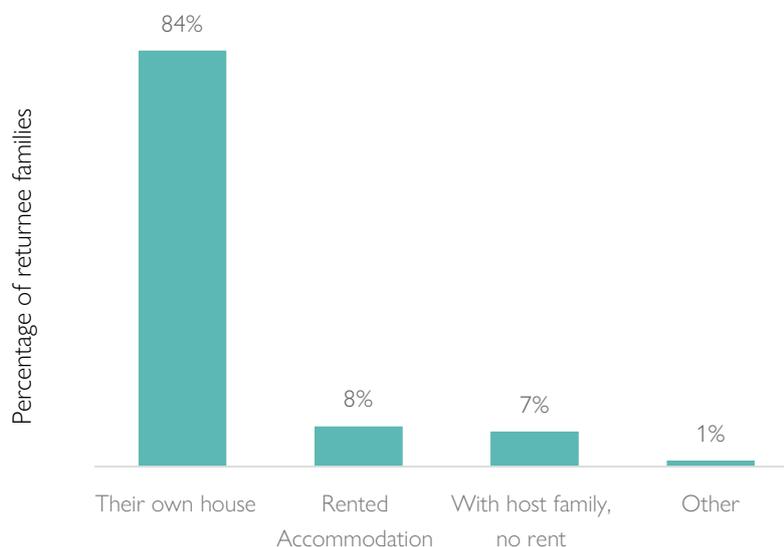


Fig 30 Map of public shelter or communal accommodation types used by IDPs by location

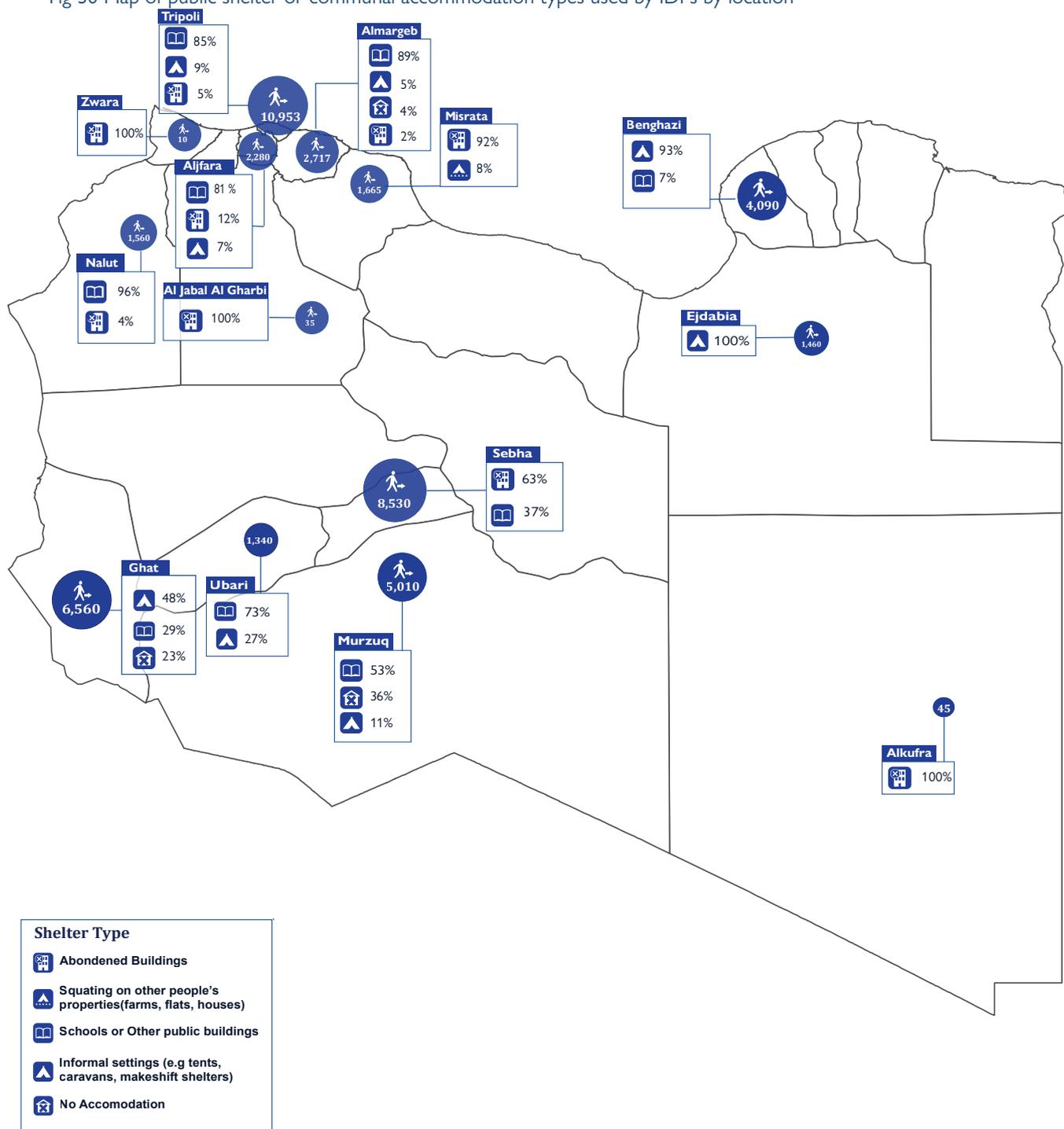
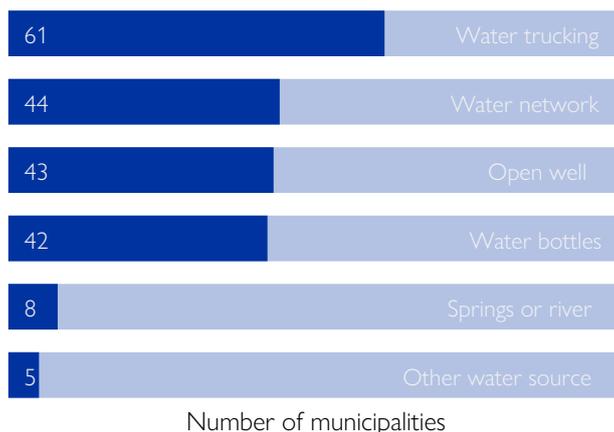


Figure 30 represents the distribution of IDPs in public shelters or communal accommodation per region (mantika), where the percentages are showing the proportion of the IDPs per region (mantika) in public shelters / communal accommodation only. The bubble (with number) along with each region's name shows the number of IDPs (individuals) in such public/communal accommodations.

WATER SANITATION AND HYGIENE (WASH)

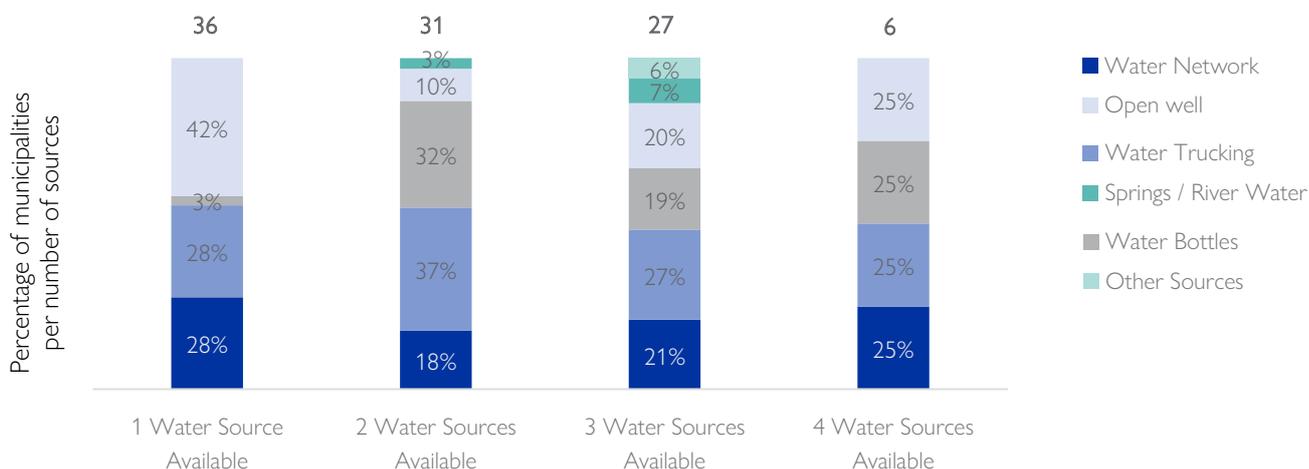
In terms of the water sources utilized, in 61 municipalities (out of the 100 municipalities in Libya) use of water trucking was reported to meet the household needs of residents, including IDPs, returnees, host community and migrants. While in 44 municipalities water networks, and in 43 municipalities open wells (boreholes) were reported to be used as sources of water available to the households. Bottled water was also identified as a commonly utilized source for drinking water in 42 municipalities. The entire distribution of the main water sources reported can be seen in the chart below.

Fig 31 Main sources of water in use by the number of municipalities



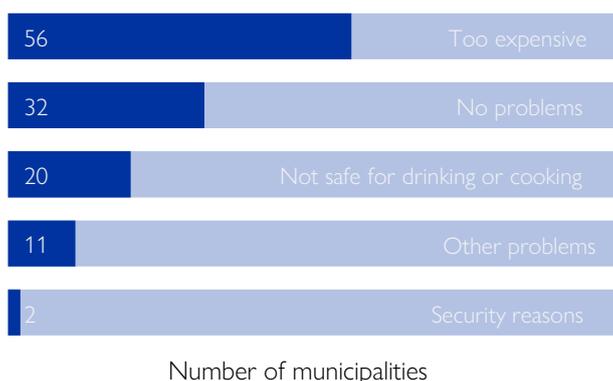
Analysis of water source availability and utility by municipality shows that in 36 municipalities only one source of water was available and therefore utilized. Whereas in 31 municipalities two water sources, in 27 municipalities three water sources, and in 6 municipalities 4 water sources were available and utilized. Figure 32 below shows that in 42% (15 municipalities) of the 36 municipalities that depended on one source of water, open wells were the most common source of water, followed by 28% (10 municipalities each) reporting dependence on water network and water trucking as the only source of water utilized. As the availability and utility of water sources increases the diversity of the types of water sources utilized also increases. However, as shown in figure 31, the reliance on water trucking – reported by 61 municipalities – as a source of water for household use was common for over a quarter of all municipalities irrespective of the diversity of water sources available. Use of water bottles was reported the most amongst the municipalities reporting availability of two water sources for household use. Both water trucking and use of water bottles are resource intensive and indicate a dependence on alternative sources of water in the absence of municipal water networks.

Fig 32 Analysis of number of water sources in use by municipality and their diversity



When asked about the main challenges faced by the residents, IDPs and returnees in accessing adequate drinking water, the most cited obstacle was related to access to water being “too expensive” (reported in 56 municipalities), as dependency on resource intensive water trucking to meet household needs, and use of bottled water for drinking were identified. In 20 municipalities the water available was reported to be not safe for drinking or cooking as shown in the chart below.

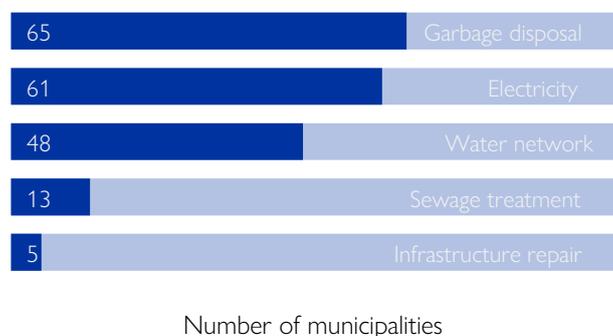
Fig 33 Challenges related to water availability by number of municipalities



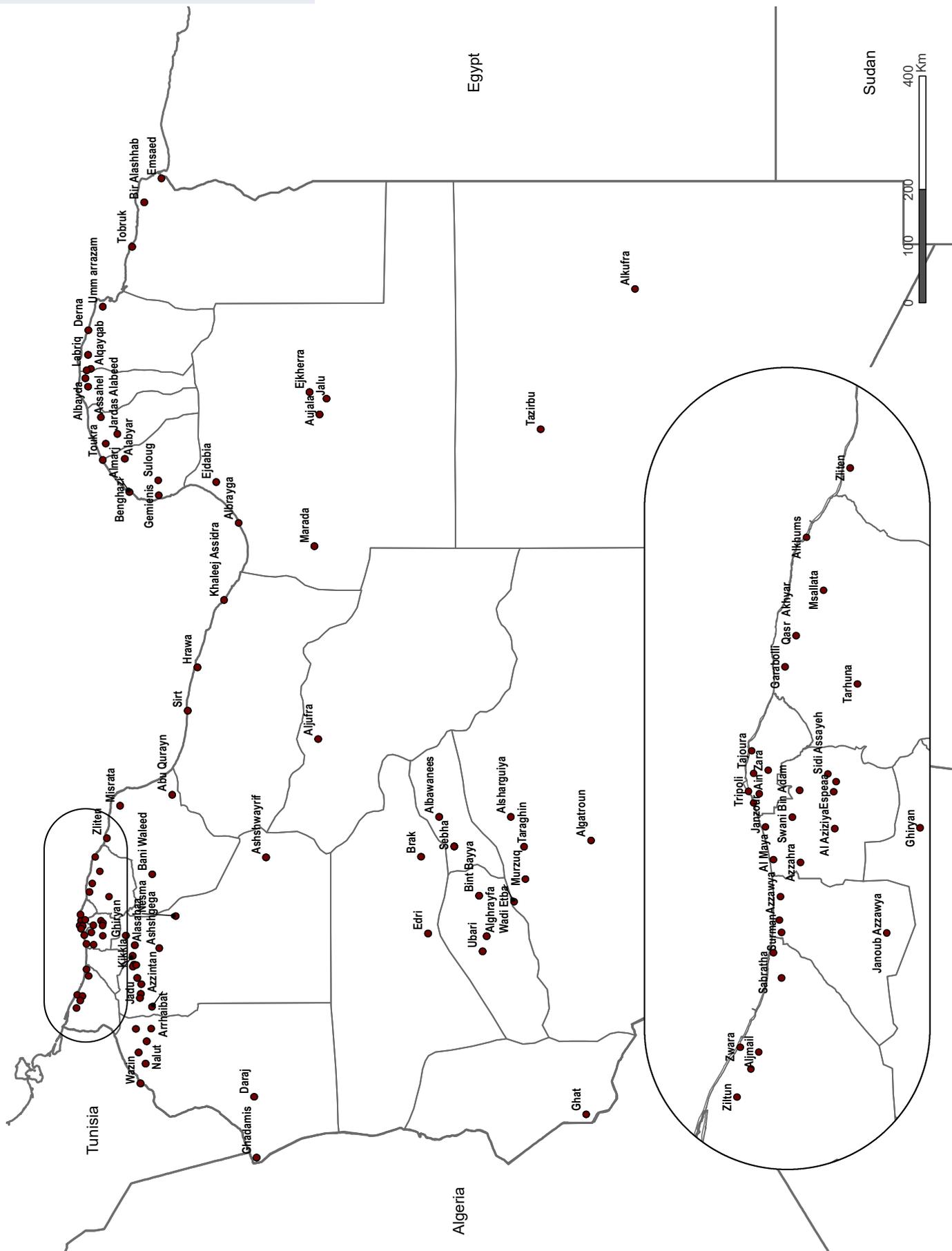
OTHER PUBLIC SERVICES

Similar to the previous Round, garbage disposal services, electricity, and water networks were the most commonly available municipal services reported during the Round 30 data collection, although electricity was often only available intermittently. Out of the 100 municipalities in Libya, 65 municipalities reported the availability of garbage disposal services, whereas electricity was regularly available in only 61 municipalities, and water networks were reported as fully operational in only 48 municipalities. Infrastructure repairs were the least frequently reported available public service.

Fig 34 Public services by number of municipalities reporting their regular availability



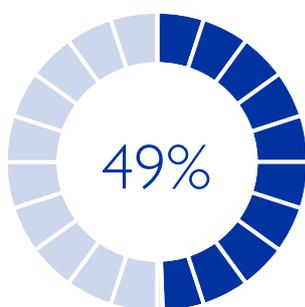
REFERENCE MAP - LIBYA



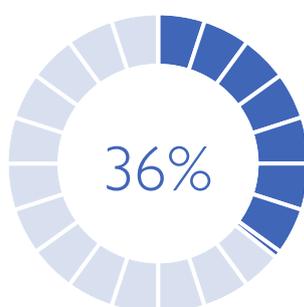
METHODOLOGY

The data in this report is collected through DTM's Mobility Tracking module. Mobility Tracking gathers data through key informants at both the municipality and community level on a bi-monthly data collection cycle and includes a Multi-Sectoral Location Assessment (MSLA) component that gathers multisectoral baseline data. A comprehensive methodological note on DTM's Mobility Tracking component is available on the DTM Libya website.

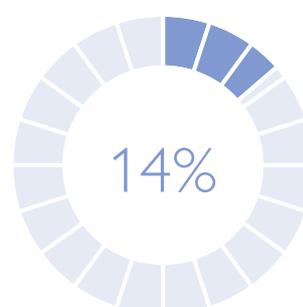
In Round 30, DTM assessed all 100 municipalities in Libya. 2,071 key informant interviews (KIIs) were conducted during this round. 325 KIIs were carried out at the municipality level and 1,795 at the community level. 33% KIIs were with the representatives from various divisions within the municipality offices (Social Affairs, Muhalla Affairs etc.), 11% from key civil society organizations, and 11% with local crisis committee representatives. 7% KIIs were with female key informants, whereas 93% were male key informants.



Very Credible



Mostly Credible



Somewhat Credible

49% of data collected was rated as “very credible” during the Round 30, while 36% was rated “mostly credible”, and 14% was “somewhat credible”. This rating is based on the consistency of data provided by the Key Informants, on their sources of data, and on whether data provided is in line with general perceptions.

For more details on the methodology, the current situation in Libya, databases and more, consult the DTM Libya website: www.dtm.iom.int/libya. You can also find our latest IDP & Returnee report in the same website.

IOM DTM DATA COLLECTION



55
enumerators



3
team leaders



5
implementing partners



100% COVERAGE

DISCLAIMER

The content of this report is based on the evidence collected during the assessment and surveys. Thus the reported findings and conclusions represent the views and opinions of the key informants interviewed and surveyed, for which DTM cannot be held responsible.



Project funded by
the European Union

Funded by the European Union the Displacement Tracking Matrix (DTM) in Libya tracks and monitors population movements in order to collate, analyze and share information packages on Libya's populations on the move. DTM is designed to support the humanitarian community with demographic baselines needed to coordinate evidence-based interventions. DTM's Flow Monitoring and Mobility Tracking package includes analytical reports, datasets, maps, interactive dashboards and websites on the numbers, demographics, locations of origin, displacement and movement patterns, and primary needs of mobile populations. For all DTM reports, datasets, static and interactive maps and interactive dashboard please visit DTM Libya website:

dtm.iom.int/libya/