## IDP AND RETURNEE REPORT

## **ROUND 23 - LIBYA**

## **MOBILITY TRACKING**

NOVEMBER - DECEMBER 2018











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## **KEY FINDINGS**





## **ROUND 23**

#### **IDPs**





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



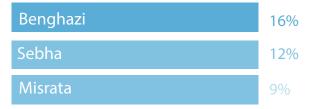
#### **RETURNEES**





#### **LOCATIONS**

**TOP 3 BALADIYAS OF** DISPLACEMENT



#### **TOP 3 BALADIYAS OF RETURN**

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Benghazi	42%
Sirt	17%
Tripoli	9%

#### **COVERAGE**



1,940

**KEY INFORMANTS INTERVIEWED** 

IN

659 of 667 **COMMUNITIES**  100 of 100 **MUNICIPALITIES** 



## **OVERVIEW**





### CONTEXT

This report presents the findings of round 23 of the mobility tracking component of the Displacement Tracking Matrix (DTM) in Libya, covering the reporting period November to December 2018.

In Round 23, the number of identified returnees in Libva increased from 403,978 to 445,845 individuals. This increase can mostly be attributed to the return of previously displaced persons to Tripoli who had left their homes during the September clashes and due to returns to Derna. At the same time, the number of identified IDPs in Libya decreased to 170,490 in round 23, representing a 9% decrease compared to the previous round in September and October 2018.

In Derna and surrounding areas at least 7,296 previously displaced families have returned since August 2018 as the situation in most neighborhoods stabilized, although the security situation in parts of the old city remains volatile. For further details, please refer to page 6 and 7 of this report and to a more detailed area assessment conducted by DTM (http://www.globaldtm.info/returnee-returnassessment-january-2019/)

Following the return to Tripoli and suburbs, the number of IDPs decreased in several locations, such as Yefren and Tarhuna where the number of IDPs decreased by 93% and 73% respectively compared to the previous round of data collection.

The Tawerghan population remains displaced throughout Libya in informal settlements and private accommodation. As of December 2018, reportedly only 180 Tawerghan families had returned to their place of origin as basic services, infrastructure and employment opportunities remain limited.

In terms of reported needs, the top three priority needs of IDPs reported during round 23 were shelter, food assistance, and health services, whereas key priority needs for returnees were reported to be Water, Sanitation and Hygiene (WASH), food, and health. As in previous rounds, several challenges related to access to services were reported, most notably the limited availability of medicine and health services were an issue in many locations. For more details please refer to the sector specific sections of this report starting on page 13.

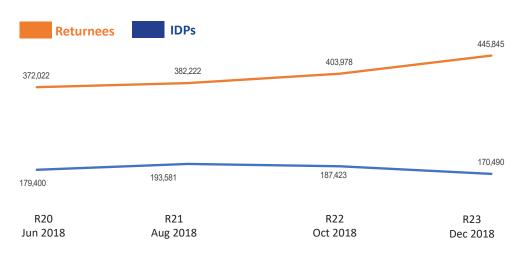


Fig. 1 IDPs and Returnees Identified in the four most recent rounds

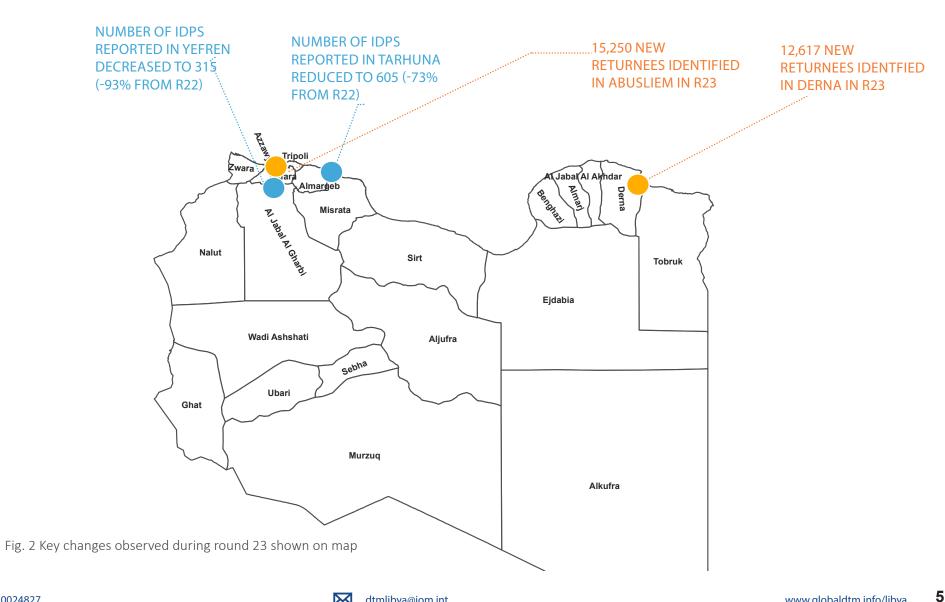


## **IDP AND RETURNEE PROFILES**





### **KEY CHANGES IN DTM ROUND 23**





# IDP AND RETURNEE UPDATE ON DERNA





### **IDPS RETURN TO DERNA**

At least 6,985 previously displaced families returned to Derna and 311 families to surrounding areas in the second half of 2018. Reportedly, the security situation gradually improved over the past few months in most neighborhoods, although tensions remain high in parts of the old city as clashes with militants continue to be reported.

The following two pages summarize reported humanitarian priority needs; a more detailed area assessment was conducted shortly after data collection for Round 23 had been concluded and is available on DTM's website at <a href="http://www.globaldtm.info/returnee-return-assessment-january-2019/">http://www.globaldtm.info/returnee-return-assessment-january-2019/</a>

#### **SECTORAL FINDINGS**

Education: 80% of public, and 70% private schools were reported to be open. However, two schools were reported to be fully destroyed, while five others were partially damaged, in need of rehabilitation and repair.

Food: Food was identified as the most urgent priority need. Some households reported to be dependent on humanitarian assistance. Availability of food at local markets was reported to be adequate but part of the returnee population relied on purchasing food on credit.

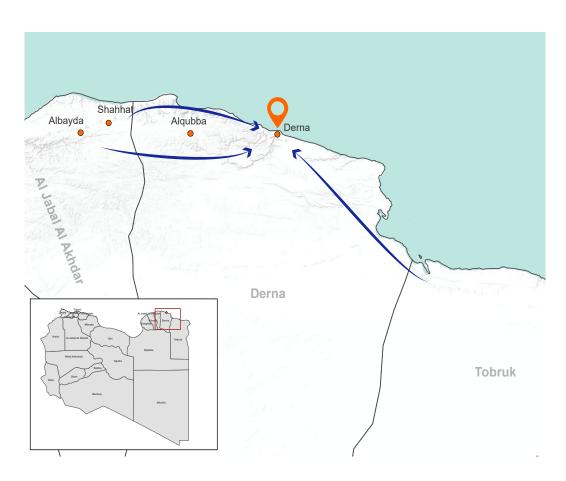


Fig. 3 Return movements to Derna

 $\bowtie$ 







## **IDPS RETURN TO DERNA**

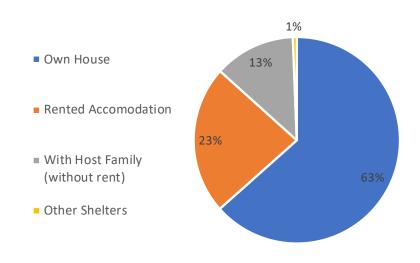


Fig. 4 Shelter settings being used by returnees in Derna

Health: One hospital was reported to be functional, whereas another hospital was reported to be partially operational. In addition there were three fully operational public health centers & clinics, and four fully operational private health centers & clinics. A total of 8 private and public health clinics were either non-operational or only partially operational. However, available services in functional health facilities were often limited.

Non Food Items (NFIs): Non-Food Items (NFIs) were also among reported priority needs in Derma. The NFI items most commonly cited were clothes, blankets and mattresses. Limited purchasing power and liquidity constraints were a challenge for many

Water, Sanitation and Hygiene (WASH): While the water supply network and garbage collection were reported to be operational and functioning, water quality was reported to be unsafe for consumption. Hygiene items were also flagged as humanitarian need of returnees.

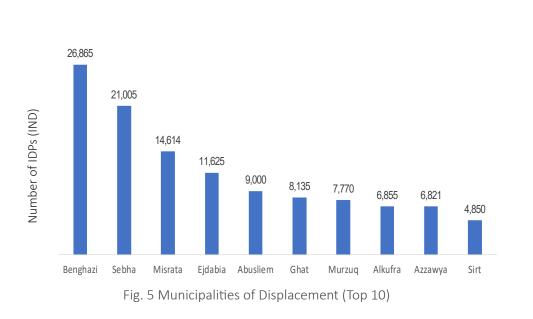


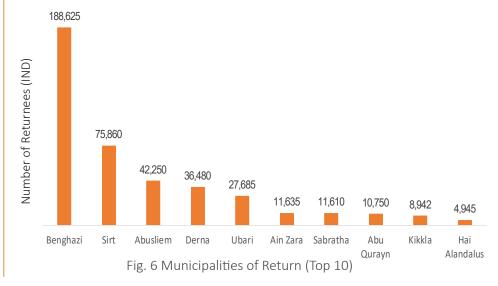
# IDP AND RETURNEE PROFILES





### TOP 10 MUNICIPALITIES OF DISPLACEMENT AND RETURN





In round 23, a large proportion (40%) of IDPs were identified in the west of Libya, followed by 32% in the east and 27% identified in the south of the country. The highest figure reported for the presence of IDPs was in Benghazi (26,865 individuals) followed by Sebha (21,005 individuals).

In terms of IDPs returning to their places of origin, the majority (51%) of returning IDPs (returnees) were identified in the east of Libya, followed by 42% in the west while the remaining 7% were identified to have returned to their places of origin in the south.

Benghazi had the highest number of returnees (188,625 individuals), followed by Sirt with 75,860 individuals identified as returnees. The ten municipalities with the highest number of returnees are shown in figure 6.

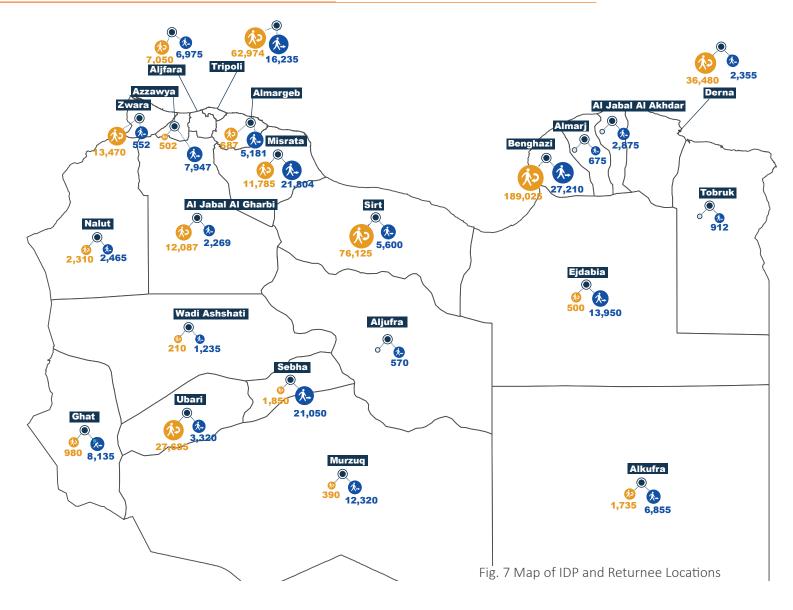


# **IDP AND RETURNEE**





## LOCATIONS OF DISPLACEMENT AND RETURN (MAP I)





# IDP AND RETURNEE PROFILES





## MUNICIPALITY OF ORIGIN VS DISPLACEMENT

		Municipality of Displacement	Number of IDP Households (HH)	Number of IDP (IND)	%
		Benghazi	4487	22635	50%
		Misrata	2317	11675	26%
	Benghazi	Abusliem	300	1500	3%
		Ejdabia	263	1315	3%
	Be	Zliten	178	890	2%
		Other Municipalities	1386	7131	16%
		Total Displaced	8931	45146	100%
gin	=	Ejdabia	1655	8275	32%
Municipality of Origin		Benghazi	818	4090	16%
of		Abusliem	550	2750	11%
lity		Sirt	510	2350	9%
ipa		Janzour	370	1850	7%
Juic		Other Municipalities	1296	6653	26%
Ž		Total Displaced	5199	25968	100%
		Alkufra	683	3415	31%
	Ubari	Bani Waleed	395	1975	18%
		Murzuq	169	845	8%
		Sebha	167	835	8%
		Alghrayfa	167	835	8%
		Other Municipalities	563	2972	27%
		Total Displaced	2144	10877	100%

		Municipality of Displacement		Number of IDP (IND)	%
		Murzuq	418	2090	24%
		Algatroun	400	2000	23%
	g	Sebha	274	1370	16%
Municipality of Origin	Sebha	Ubari	188	940	11%
		Zliten	157	785	9%
		Other Municipalities	283	1410	16%
		Total Displaced	1720	8595	100%
		Ejdabia	397	1985	24%
icip		Sebha	277	1385	17%
Mun	Sirt	Alkhums	141	810	10%
		Sirt	105	525	6%
		Albayda	85	425	5%
		Other Municipalities	615	3098	38%
		Total Displaced	1620	8228	100%

Figure 8 Table showing municipality (Baladiya) of origin to the municipality of displacement breakdown

The comparison of municipality of origin and municipality of displacement indicates that in many cases a substantial share of IDPs did not move far away from their areas of origin. For instance, in the case of Benghazi, at least 22,635 IDPs were reported to originate from Benghazi and surrounding areas.





### **DRIVERS OF DISPLACEMENT**

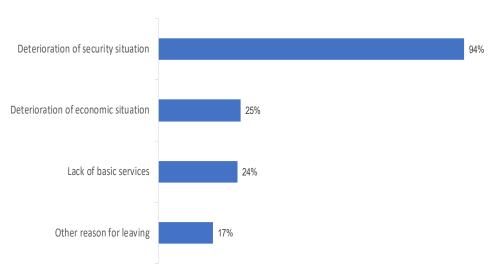


Fig. 9 Reasons for displacement (leaving place of origin)

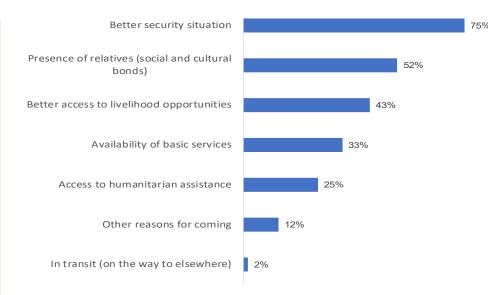


Fig. 10 Reasons for choosing the current place of displacement

The overwhelming majority of key informants (94%) reported that IDPs present in their localities had left their respective places of origin due to security related issues.

To a significantly lower extent various other reasons were cited, such as deterioration of the economic situation at the places of origin and inavailability of basic services.

Similarly, when asked about the reasons for IDPs' presence at their respective current locations, most key informants (75%) reported that better security conditions in their localities was the major reason for the IDPs' decision to move there. This was followed by a large proportion of key informants (52%) reporting that IDPs chose these localities due to the presence of IDP relatives, signifying social and cultural bonds and the possibility of social safety nets. This was followed by availability of basic services as reason for choosing those communities (33%), and access to humanitarian assistance (25%).

Overall, the major driver of displacement was identified to be related to the security situation, playing a role in both the decision to leave the place of origin and for choosing the site of displacement.





53%



## **DEMOGRAPHICS**

Round 23 data indicated that children (0-17) accounted for 49% of the IDP population, while 41% were adults (18-59 years), and 9% were older adults (aged 60 years and above). Across all age categories males made up 47% of the sampled population and females accounted for 53%.





Fig. 11 Gender disagregation of sampled IDPs

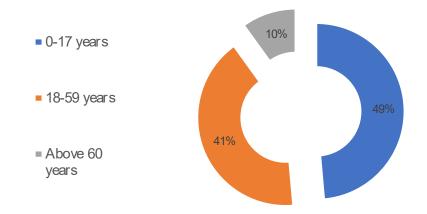


Fig. 12 Age disagregation of sampled IDPs









## **NEEDS OF IDPS AND RETURNEES**

#### **IDPs' Priority Needs Identified**

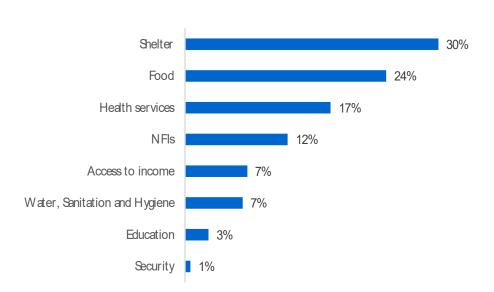


Fig. 13 IDP's priority need comparison

The top three priority needs identified for IDPs' were:

Shelter (23,300 households' priority need);

Food (120,000 individuals' priority) and;

Health Services (100,500 individuals' priority need).

#### **Returnees' Priority Needs Identified**

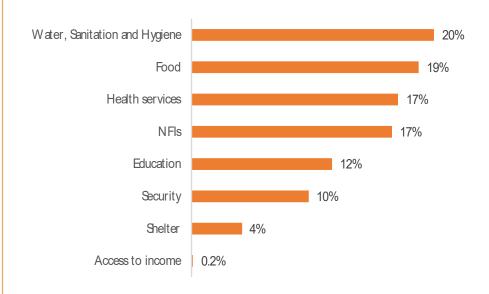


Fig. 14 Returnees' priority needs comparison

The top three priority needs identified for returnees' were:

Water, Sanitation and Hygiene (245,000 individuals);

Food (about 224,000 individuals' priority need) and;

Health Services (about 205,000 individuals' priority need).

Priority needs were identified by calculating weighted averages based on affected population in the assessed locality and rank scores assigned to each priority need by KIs. The graphs in Figure 13 and 14 show relative percentages of the calculated weighted averages for comparison.







## **ACCESS TO SERVICES**

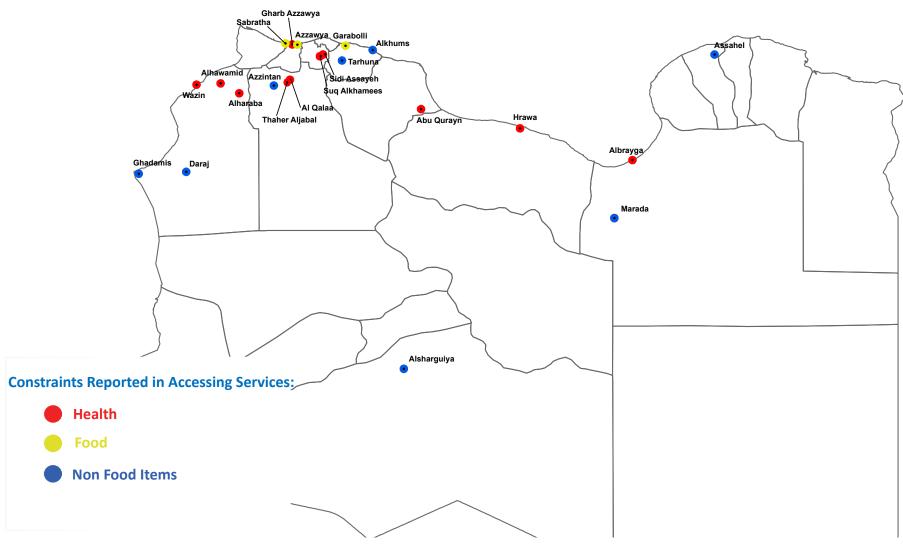


Fig. 15 Map of municipalities reporting constraints in access to services







## **SHELTER SETTINGS**

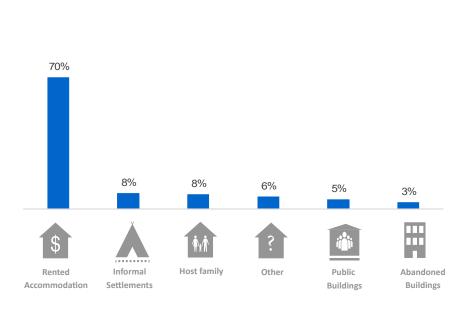


Fig. 16 Shelter settings used by IDPs

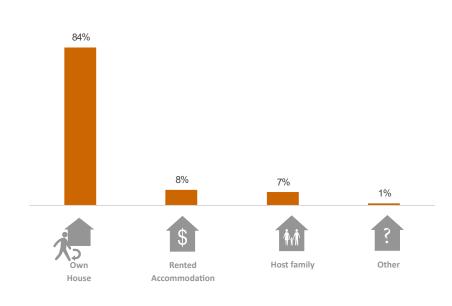


Fig. 17 Shelter settings used by returnees

70% of all IDPs identified in Libya were reported to be residing in private rented accommodation, while 8% were taking shelter at informal camp settings and and 7.6% were residing with host families. A smaller proportion of IDPs identified was also taking shelter in public buildings like schools (4.9%), abandoned buildings (3.4%), staying on other people's property (1.4%), other undetermined shelter settings (3.9%) and some were even reported to have no accommodation or shelter (1.1%).

With regards to returnees, the overwhelming majority (83.6%) was reported to be back in their own houses at their places of origin. The rest were renting accommodation in their places of origin (8.2%), living with host families (7.0%), or in various other kinds of shelter settings (1.2%).

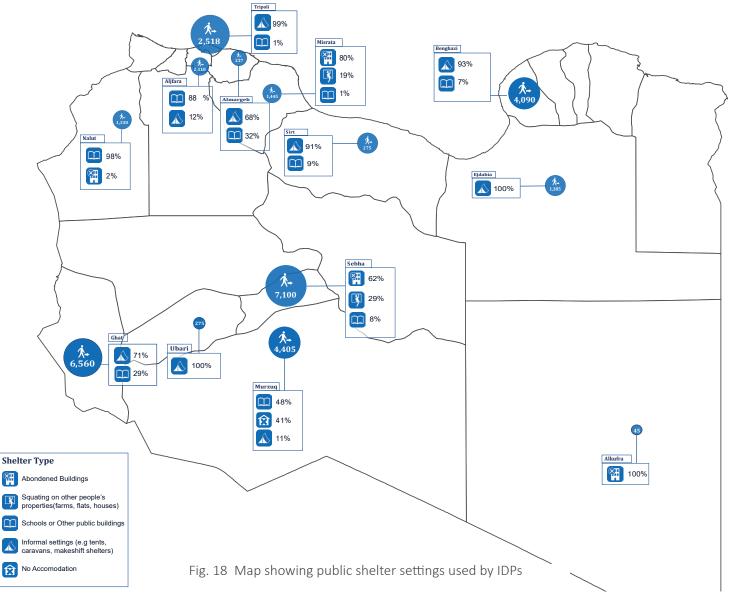
Please refer to page 16 for the geographical distribution of IDPs in public and private shelter settings by region and to page 17 for the returnees' shelter settings in different parts of Libya.







## SHELTER SETTINGS MAP: IDP



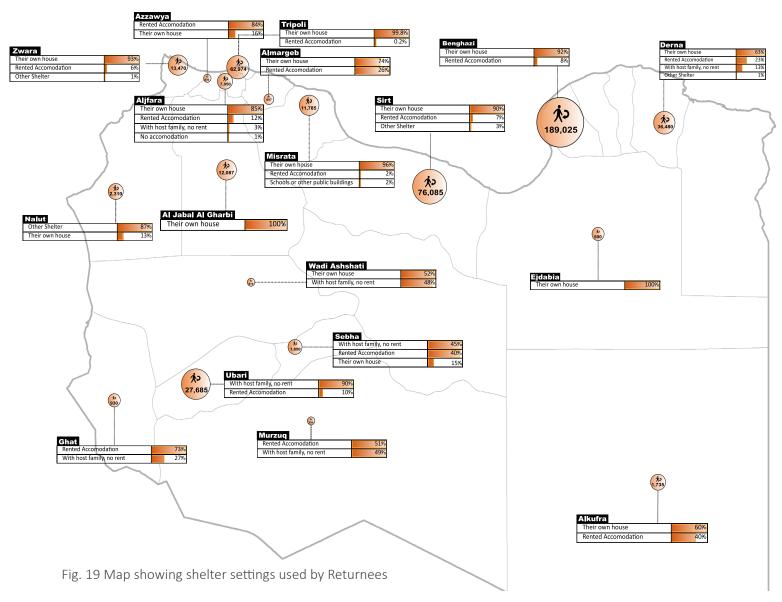
16







## SHELTER SETTINGS MAP: RETURNEES







### **EDUCATION**

Out of the 100 municipalities covered in Round 23, key informants in 99 municipalities reported that between 80% and 100% of public schools in their municipalities were operational. Similarly, 80% to 100% of private schools were reportedly operational in 75 municipalities.

In six municipalities between 61% and 80% of private schools were reported to be operational, while key informants in two municipalities reported that only 41% to 60% of private schools were operational. Please refer to the chart at the bottom of this page for more detailed breakdowns.

With regards to the schools' operational conditions, 202 schools were reported to be partially damaged, whereas 47 schools were reported to be fully destroyed.

In addition, 20 schools were reported to be used as shelters for the internally displaced persons.

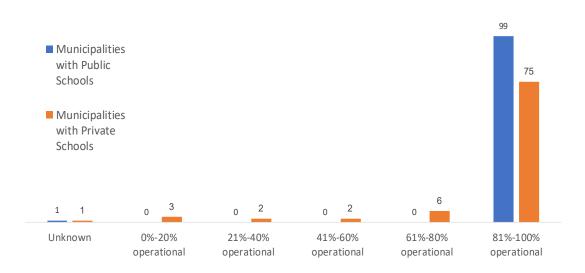


Fig. 20 Number of municipalities with the applicable percentages of functional public and private schools

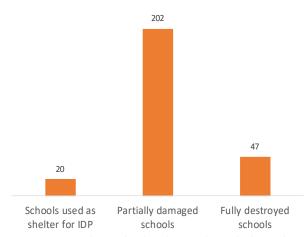


Fig. 21 Number of schools used as shelters for IDPs, partially damaged schools, and fully destroyed schools

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### **FOOD**

In terms of data collected on access to food, key informants in 97 municipalities reported that IDPs, returnees and other residents of the host communities in these municipalities purchased food from the local market. In 24 municipalities food distributions conducted by charity and aid organizations were also identified as major source of food supply.

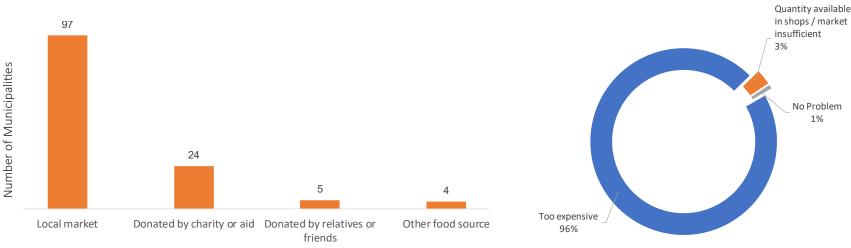


Fig. 22 Primary source of food for residents by number of municipalities

Fig. 23 Main problems related to food supply

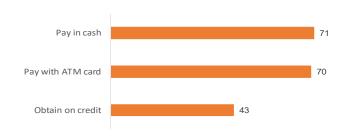


Fig. 24 Main modalities of payment used for purchasing food by number of municipalities

The primary modalities of payment used for purchasing food items were identified to be cash based payments and the use of ATM / debit cards while in slightly less than half of the municipalities (43%) people relied heavily on purchasing food on credit.

The most significant problem in terms of access to food supplies was identified as food being too expensive, as reported in 96% of surveyed municipalities.

1%







## **HEALTH**

Across Libya, 53% of all hospitals were reported to be operational, while 37% were reported to be only partially operational and 11% were reported not to be operational at all.

Notably, in 10 municipalities there were no operational hospitals available whereas 18 municipalities did not have any operational public health centers & clinics.

Regular access to medicine was reported in only 2% of assessed municipalities, while in 97% of the municipalities access to medical supplies was reported to be irregular.

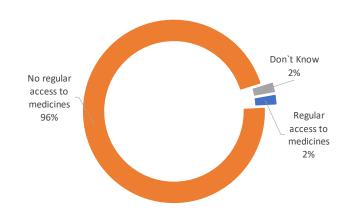


Fig. 25 Regular Access to Medicines (% Municipalities)

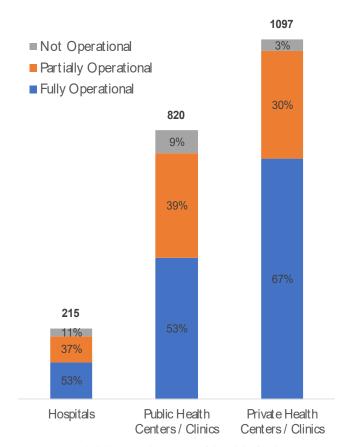


Fig. 26 Availability and status of health facilities accross 100 municipalities of Libya







## NFIS AND ACCESS TO MARKETS

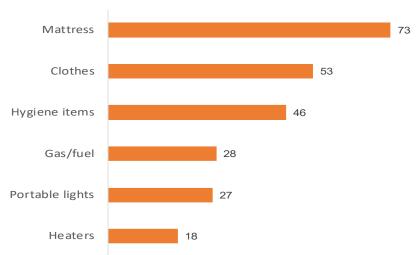


Fig. 27 Items prioritized as part of NFI needs per locality

In terms of challenges faced in access to non-food items, the most commonly cited obstacle was that the non-food items were too expensive for those in need. In addition, key informants in 18 municipalities also highlighted that inadequate quality of NFIs was an issue. In five municipalities, key informants reported that distance to the local market was the main challenge, whereas in three municipalities no problems or challenges in accessing NFIs were reported.

Data was also collected on humanitarian priority needs related to non-food items (NFIs). Notably, mattresses emerged as the most commonly cited NFI need and were reported to be needed in 73 municipalities, followed by clothes in 53 municipalities, hygiene items in 46 municipalities and gas fuel was chosen as priority need in 28 municipalities.

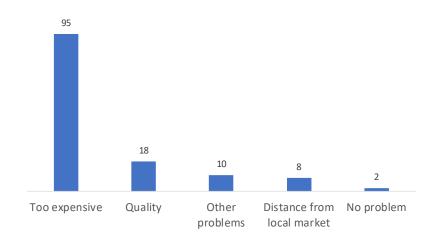


Fig. 28 Main challenges faced in obtaining NFI items









## **SECURITY**

As part of the baseline assessment, security related indicators were collected in all municipalities. The aim was to understand the challenges faced by residents in being able to move safely within their municipalities, the reasons hindering such safe movement (where applicable), and awareness of the presence of unexploded ordnances (UXOs).

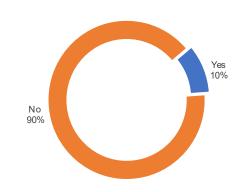


Fig. 29 Is there visible presence of unexploded ordinance? (% of municipalities)

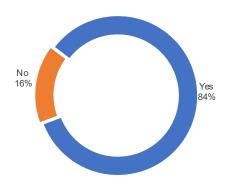


Fig. 30 Are people able to safely move around? (% of municipalities)

Municipality	Reasons for Restricted Movement
Derna	Insecurity, threat/presence of explosive hazards
Marada	Insecurity
Ghat	Reasons not reported
Algatroun	Insecurity
Alsharguiya	Insecurity
Murzuq	Insecurity
Taraghin	Insecurity
Sebha	Insecurity
Bint Bayya	Insecurity
Ubari	Reasons not reported
Azzahra	Insecurity
Qasr Akhyar	Insecurity
Janoub Azzawya	threat/presence of explosive hazards
Zliten	Insecurity
Aljmail	Insecurity
Ziltun	Insecurity

Fig. 31 Table of the municipalities and the reported reasons that restrict the movement of residents there.

Possible presence of UXOs was reported in 10 municipalities, while the remaining 90 reported no presence of UXOs. Residents were reported as not being able to move safely within their municipalities in 16 municipalities. In municipalities where movement was reported to be unsafe the main reason cited was insecurity (13 municipalities) followed by the threat/presence of explosive hazards (2 municipalities).



## WASH AND PUBLIC SERVICES

In terms of the availability of public services, garbage disposal and electricity were the two most cited public services available across Libya, although electricity often only intermittently. Out of the hundred assessed municipalities, in 60 municipalities garbage disposal was reported to be available, whereas regular availability of electricity was reported in 49 municipalities.

In 45 municipalities water supply networks were reported to be present and operational. In only 4 municipalities fully functional sewage treatment services were reported while in just 5 municipalities regular public infrastructure maintenance services were reported to be happening.

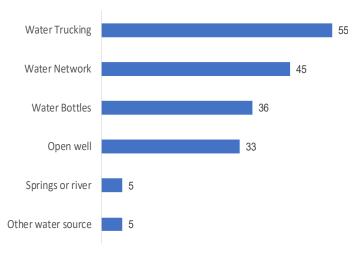


Fig. 33 Main sources of water supplying to the municipalities

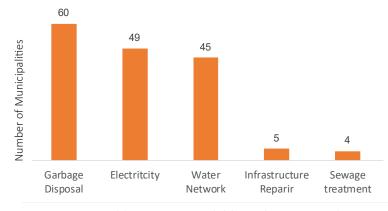


Fig. 32 Public services available at the municipalities

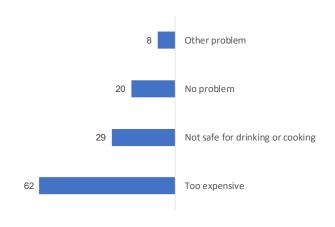


Fig. 34 Main problems associated with potable water



## **METHODOLOGY**





### **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. The full description of the Mobility Tracking methodology is available on the DTM Libya website.

In Round 23 DTM assessed all 100 municipalities.

1,940 Key Informant interviews were conducted during this round. 355 Key Informants were interviewed at the municipality level, and 1,585 at the community level. 31% of those interviewed were representatives from divisions within the municipality offices (social affairs, muhalla affairs, etc.), 12% were representatives from civil society organizations and 10% were health facility representatives. Of the 1,904 KIs interviewed 7% were female and 93% were male.

#### **ENUMERATORS**



55 enumerators



3 team leaders





5 Implementing partners











## COVERAGE



1,940 KIs interviewed





in 659 communities out of 667...



....in 100 municipalities

Position	No Of KIs	%
Other representation from baladiya office (Social		
Affairs; Muhalla Affairs; etc.)	598	31%
Civil Society Organization	232	12%
Representatives of Health facilities	190	10%
Representatives of education facilities	185	10%
Community / tribal representative	149	8%
Security forces	140	7%
Representation of displaced groups	99	5%
Local Crisis Committee Representative	84	4%
Humanitarian NFI distribution team	76	4%
Religious leaders	68	4%
Migrant community leaders	52	3%
Humanitarian HEALTH team	38	2%
Other	16	1%
Migrant networks	13	1%
Total	1940	



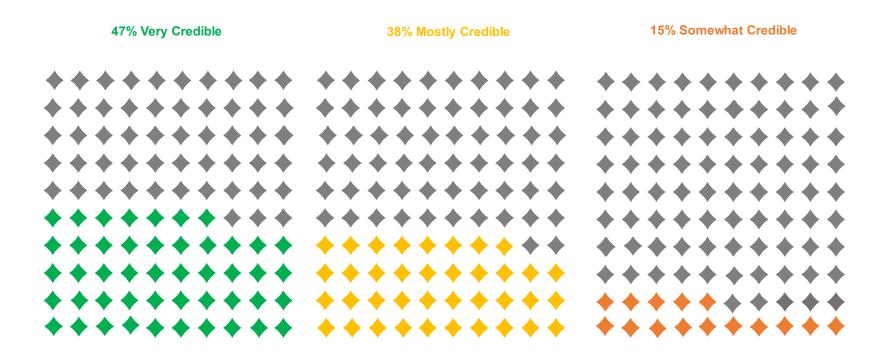
## **METHODOLOGY**





## **DATA CREDIBILITY**

47% of data collected was rated as "very credible" during the round 23, whereas 37% was rated "mostly credible" while 15% as "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.



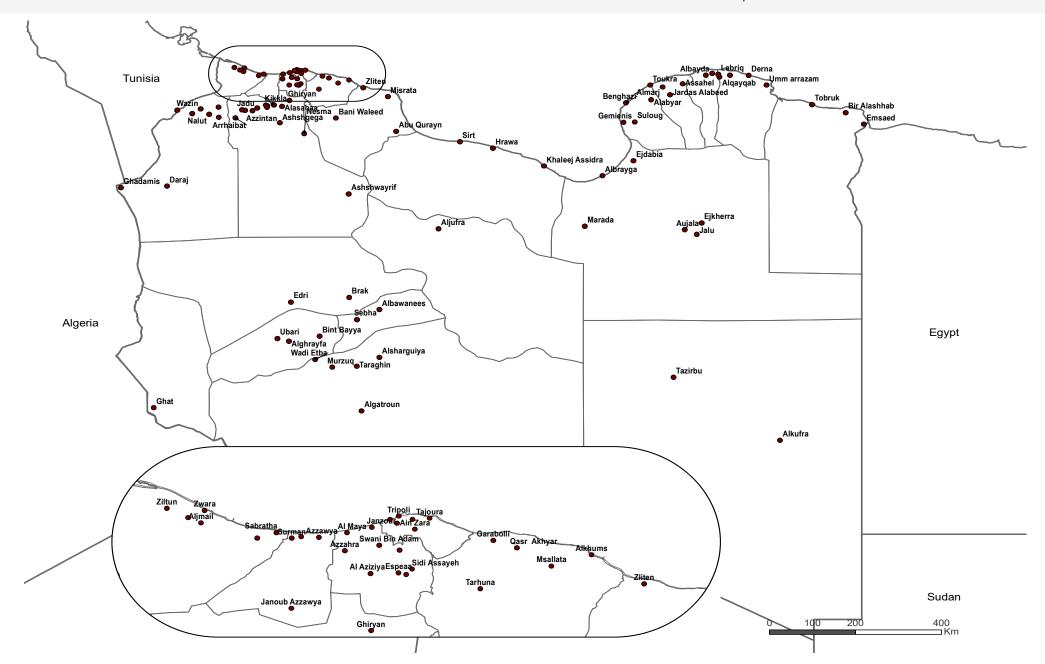
Disclaimer: The content of this report is based on the evidence collected during the survey. Thus, the reported findings and conclusions represent the views and opinions of the surveyed key informants, for which DTM cannot be held responsible.



## **REFERENCE MAP - LIBYA**

















#### DISPLACEMENT TRACKING MATRIX

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 www.globaldtm.info.libya/