IDP AND RETURNEE REPORT









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KEY FINDINGS





ROUND 26

IDPs







RETURNEES





79%
HAVE RETURNED DUE TO
IMPROVEMENT OF SECURITY
SITUATION



LOCATIONS

TOP 3 BALADIYAS OF DISPLACEMENT

| Benghazi | 9% |
|----------|----|
| Sebha | 7% |
| Tajoura | 6% |

TOP 3 BALADIYAS OF RETURN

| Benghazi | 42% |
|----------|-----|
| Sirt | 17% |
| Abusliem | 9% |

COVERAGE



2,382
KEY INFORMANT INTERVIEWS

IN
100 of 100
MUNICIPALITIES



OVERVIEW





CONTEXT

This report presents the findings of Round 26 of the mobility tracking component of the Displacement Tracking Matrix (DTM) programme in Libya, covering the reporting period 23 June until 04 August 2019.

In June and July 2019, the number of IDPs identified in Libya increased from 268,629 to 301,407 IDPs by the end of Round 26. New displacements during the reporting period were primarily due to continued conflict in South Tripoli and related population movements, and to a lesser extent due to localized displacement triggered by floods in Ghat in June, affecting over 5,000 individuals.

Since the onset of armed conflict on 04 April 2019, clashes have continuously been reported in densely populated areas in South Tripoli and throughout the reporting period, triggering displacement of civilians to safer neighborhoods in Tripoli, the Nafusa mountains and along the coastal line in Western Libya. IDP families displaced to locations close to areas of conflict remain at risk, along with host community members providing them with shelter. For more information on displacements from Tripoli, please refer to page 5.

Shortly after Round 26 data collection was concluded, escalation of violence in Murzuq triggered the displacement of over 16,700 individuals to surrounding areas, more details can be found in DTM's Murzuq Flash Update available at http://www.globaldtm.info/libya-murzuq-flash-update-27-august-2019/.

Priority humanitarian needs of IDPs were reported to include shelter, food, non-food items (NFIs) and health services, whereas key priority needs for returnees were reported to be food, WASH, NFIs, and health services. For more details, please refer to the sector specific sections of this report from page 12 onwards.

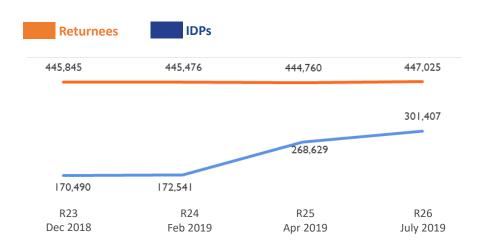


Fig. 1 IDPs and Returnees Identified in the four most recent rounds



DISPLACEMENTS FROM TRIPOLI





TRIPOLI DISPLACEMENT

The onset of armed conflict in the southern areas of Tripoli on 04 April 2019, led to the displacement of over 128,150 IDPs who were forced to leave their homes during the reporting period. Throughout the reporting period, this upsurge in armed conflict included heavy airstrikes which substantially impacted localities in conflict areas, leading to further displacement of civilians due to the volatile security situation. DTM initiated Emergency Tracking of displaced and affected populations at the start of the crisis and by the end of the Round 26 published 25 flash updates and assessments available at www.globaldtm.info/libya.

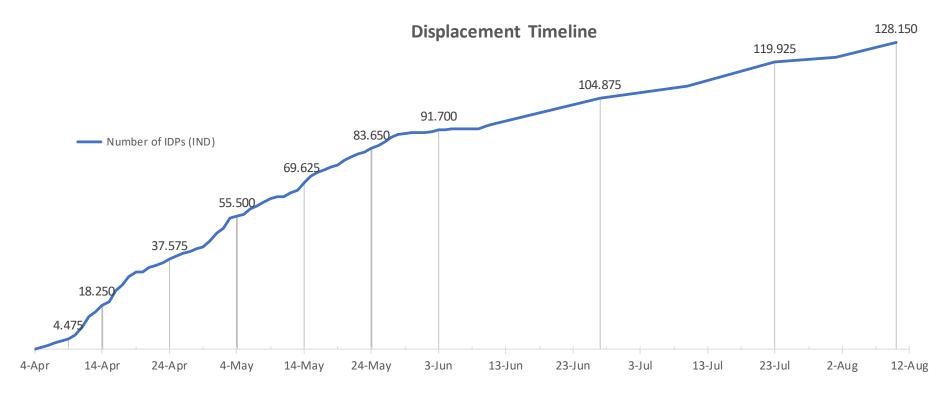


Fig. 2 Tripoli Emergency Tracking Displacement Timeline







DIM UPDATE ON GHAT





FLOODS IN GHAT

Following heavy rainfall in early June, Ghat and surrounding areas were heavily affected by floods, with water levels reaching up to two meters in affected areas. Subsequently, over 5,075 people were displaced from flood-impacted areas. Over 1,850 IDPs, accounting for one third of the population displaced from Ghat, were sheltered in collective shelters in Ghat and Ubari, with the remaining IDPs staying with host families and in open areas in the desert outside Ghat.

Reported priority needs included food, health, water and NFIs (mattresses, blankets and hygiene kits). Additionally, those staying in open areas outside Ghat were reported to be also in urgent need of shelter and WASH services.





Photo: IOM, June 2019. IOM Emergency tracking team visiting IDP families in Ghat and surrounding areas.

Availability of health services was reportedly severely constrained due to health facilities being affected by floods, including Ghat hospital. Reportedly, IDPs displaced to areas outside Ghat were also constrained in their ability to reach health facilities due to distances exceeding 5 kilometers to the closest facility. Availability of medical supplies in local markets was reported to be very limited, including unavailability of medicine for chronic diseases such as diabetes and high blood pressures.

Although water levels gradually receded, damage to homes and infrastructure in Ghat remains substantial, for more details please refer to DTM Libya's Flash Update on Ghat available at http://www.globaldtm.info/ghat-flash-update-1-17-june-2019/.



IDP AND RETURNEE PROFILES





TOP 10 MUNICIPALITIES OF DISPLACEMENT AND RETURN

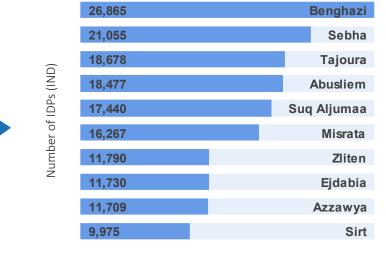


Fig. 5 Municipalities of Displacement (Top 10)

In Round 26, the majority of IDPs (68%) were identified in the West of Libya, followed by 17% in the East and 16% in the South of Libya.

Compared to the previous round, the municipalities of Abusliem, Tajoura and Suq Aljumaa experienced a substantial influx of IDPs as 15,727 new internally displaced persons were identified in the three municipalities.

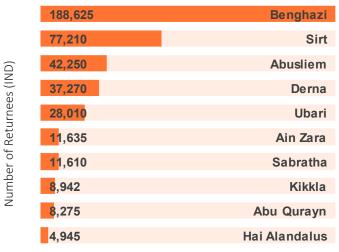




Fig. 6 Municipalities of Return (Top 10)

Regarding IDPs returning to their places of origin, the majority (51%) of returning IDPs (returnees) were identified in the East of Libya, followed by 41% in the West, while the remaining 7% were identified to have returned to their places of origin in the South.

As in previous rounds of data collection, Benghazi continues to have the highest number of returnees (188,625 individuals), followed by Sirt (77,210 individuals). The ten municipalities with the highest number of returnees are shown in figure 6.



DTM PROFILES **IDP AND RETURNEE**





LOCATIONS OF DISPLACEMENT AND RETURN (MAP I)

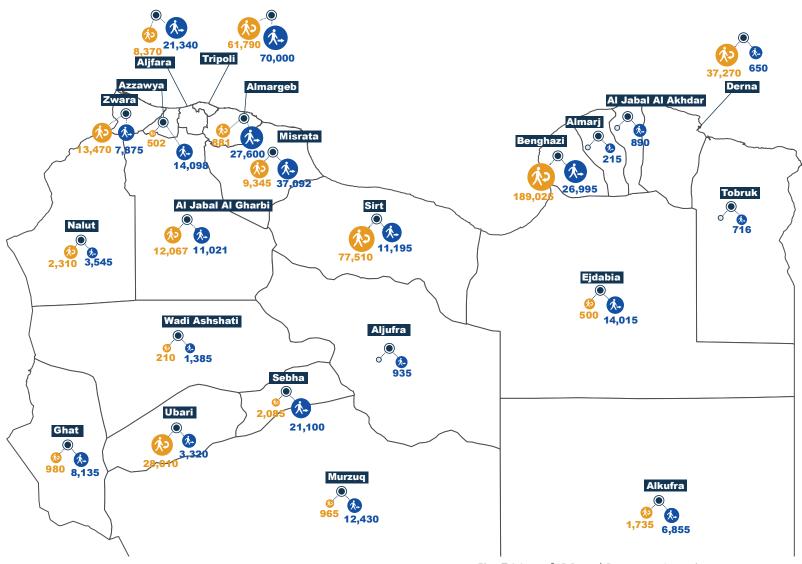


Fig. 7 Map of IDP and Returnee Locations



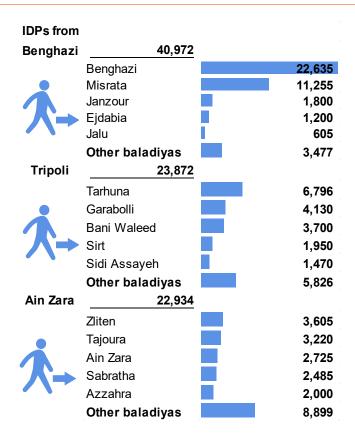


IDP AND RETURNEE PROFILES





MUNICIPALITY OF ORIGIN VS DISPLACEMENT



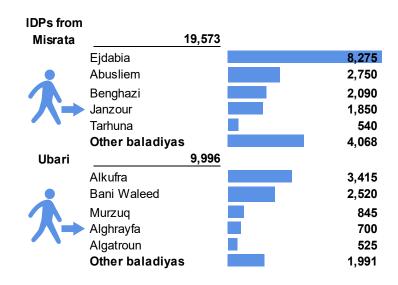


Figure 8: Table showing the breakdown of municipality (Baladiya) of origin against the municipality of displacement

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



PROFILES **IDP AND RETURNEE**





DRIVERS OF DISPLACEMENT

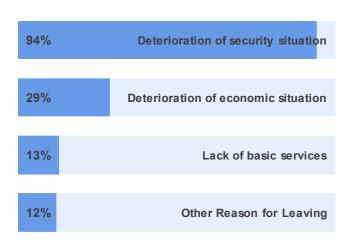


Fig. 9 Reasons for displacement (leaving place of origin)

An overwhelming majority of key informants (94%) reported that IDPs left their places of origin due to the deterioration of the security situation, as shown in Figure 9.

To a significantly lesser extent, various other reasons were cited for displacement, such as worsening of the economic situation and lack of basic services at the place of origin.

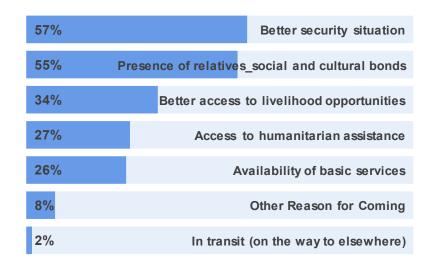


Fig. 10 Reasons for choosing the current place of displacement

Similarly, movement of IDPs to their current locations of displacement was mainly attributed to better security situation (57%) in the respective municipalities and due to presence of relatives, and social and cultural bonds (55%), indicating the presence of possible social safety nets for IDPs on the move. Another frequently reported reason was better access to livelihood opportunities (34%), followed by availability of basic services (26%).

Overall, the data indicates that the major driver of displacement was the deteriorating security situation, reflected in both the decision to leave and the decision to choose a safer location as displacement location.





DEMOGRAPHICS

During the crisis in Tripoli, DTM conducted a rapid profiling exercise of displaced households to better understand the demographic composition of IDP families. To this end, DTM enumerators gathered demographic data from a sample of 6,000 IDPs displaced from South Tripoli in July 2019. Notably, a slight majority of sampled IDPs were female (51%), while almost half of the surveyed population were children (48%).

For more detailed breakdowns, please refer to the charts below.



Fig. 11 Gender disaggregation of sampled IDPs

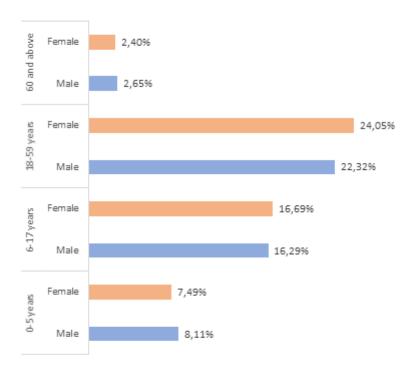


Fig. 12 Age disaggregation of sampled IDPs



DTM MULTISECTORAL DATA





NEEDS OF IDPS AND RETURNEES

IDPs' Priority Needs Identified

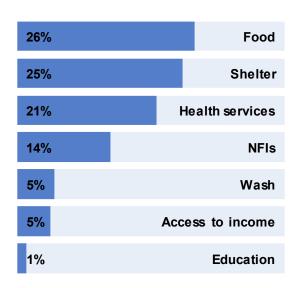


Fig. 13 IDPS' priority needs

The top four priority needs of IDPs were:

Food

Shelter

Health

NFIs

Returnees' Priority Needs Identified

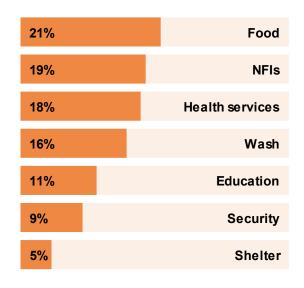


Fig. 14 Returnees' priority needs

The top four priority needs of returnees were:

Food

NFIs

Health Services

WASH

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







SHELTER SETTINGS

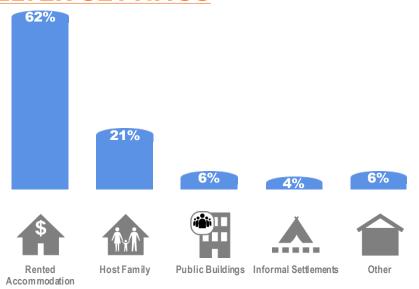


Fig. 16 Shelter settings used by IDPs

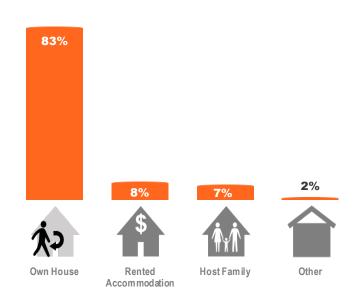


Fig. 17 Shelter settings used by returnees

62% of all IDPs identified in Libya were reported to be residing in private rented accommodation, while 21% were staying with host families without paying rent, and 6% were seeking shelter in schools and other public buildings. Other reported IDP accommodations include informal camp settings (6%), other shelter arrangements (6%) such as abandoned buildings (2%).

83% of returnees were reported to have returned to their own homes in their area origin. The remaining returnees are reportedly staying in rented accommodation (8%), with host families (7%) and other shelter arrangements (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 Libva.







SHELTER SETTINGS MAP: IDP

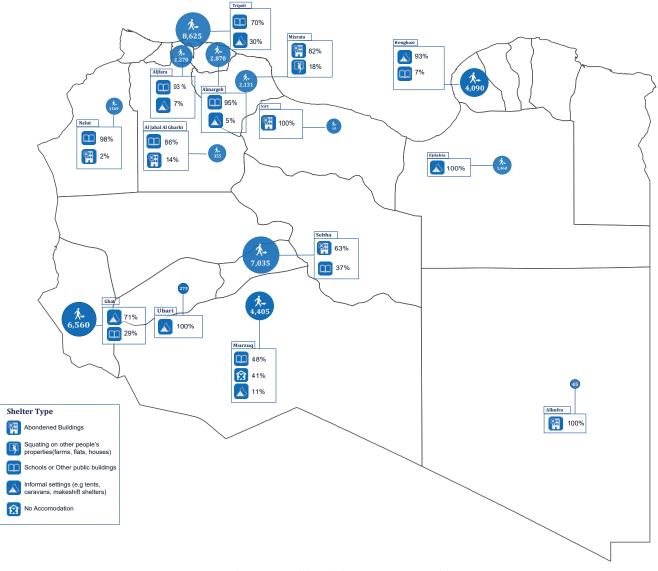


Fig. 18 Map showing public shelter settings used by IDPs







SHELTER SETTINGS MAP:

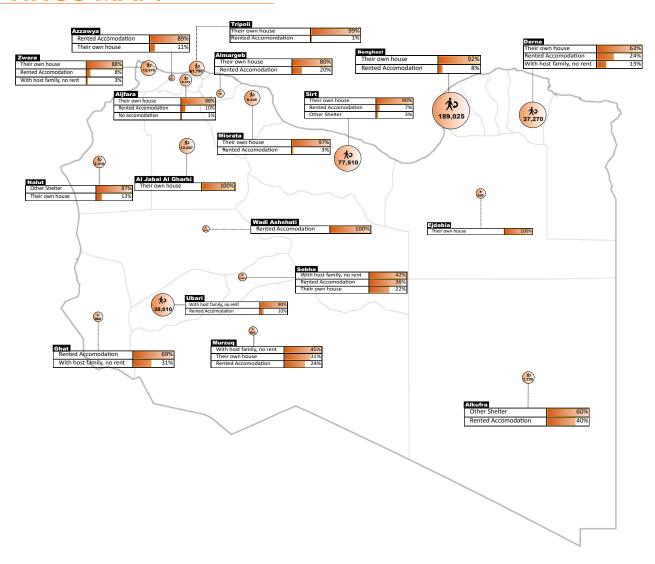


Fig. 19 Map showing shelter settings used by Returnees









EDUCATION

Out of the 100 municipalities covered in Round 26, key informants in 95 municipalities reported that between 51-100% of public schools were operational. Similarly, more than half of private schools were reported to be operational in 77 municipalities.

In two municipalities less than 50% of public schools were reported to be operational, while key informants in 13 municipalities indicated that less than half of private schools were functional. More detailed breakdowns are illustrated below in Figure 20.

Additionally, 28 schools were used as shelters for the IDPs during the reporting period while 44 schools were reported as totally destroyed.

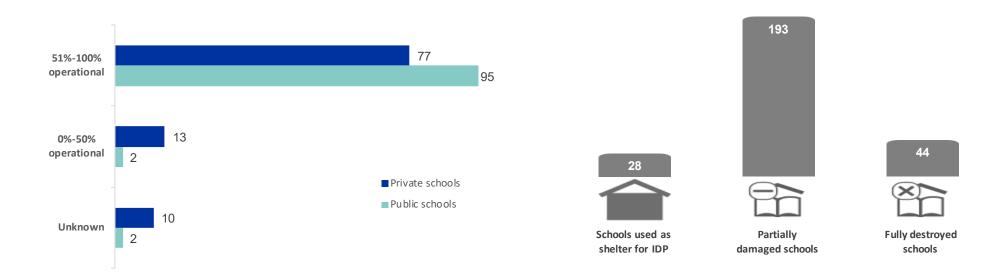


Figure 20: Number of municipalities with operational schools (public and private)

Figure 21: Number of schools used as shelters for IDPs, partially and fully destroyed schools







FOOD

In 99 municipalities it was reported that local markets were the primary source of food for residents, including IDPs, returnees and the host community. In 15 municipalities food distributions by charity or aid organizations were a major source of food supply for vulnerable populations.



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

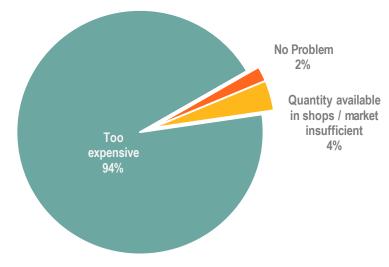


Fig. 23 Main problems related to food supply



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

The biggest obstacle for access to food was that it was frequently reported to be too expensive compared to the purchasing power of affected populations.

The primary modes of payment for purchasing food were cash and debit cards, while in more than half of the municipalities (55%) people relied on credit to obtain food.







HEALTH

Across Libya, 64% of all health facilities were reported to be operational, while 31% were partially operational and 5% were not operational at all.

Within all municipalities, a total of 190 hospitals were assessed during the reporting period. 55% of hospitals were reported to be fully operational and 38% were partially operational while 7% of hospitals were non-operational.

Several municipalities did not have operational public and private health centers or clinics, as shown in Figure 26.

Notably, in 13 municipalities there were no operational hospitals available, while public health centers & clinics were not operational in 76 municipalities.

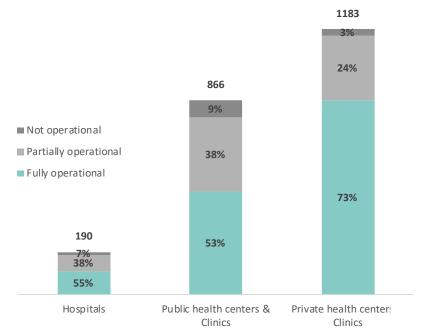


Fig. 26 Availability and status of health facilities accross 100 municipalities of Libya

No regular access to medicines



Fig. 25 Regular Access to Medicines (% Municipalities)

In Round 26, in 94% of assessed municipalities constraints related to regular access of needed medical supplies were reported, particularly for chronic diseases.







NFIS AND ACCESS TO MARKETS

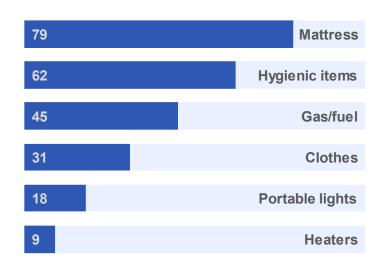


Fig. 27 Items prioritized as part of NFI needs per locality

Notably, mattresses emerged as the most commonly cited NFI need, reported in 79 municipalities. The second NFI priority need were hygiene kits (62 municipalities), while gas/fuel (45 municipalities) and clothes (31 municipalities) were reported as third and fourth NFI priority need respectively.

Data was also collected on humanitarian priority needs related to non-food items (NFIs). The most commonly cited obstacle to access NFIs was that items were too expensive for those in need of assistance. In addition, in 15 municipalities insufficient quality of NFIs available on markets was also identified as constraint. In 12 municipalities, distance from the local markets was reported to be an obstacle for affected populations.

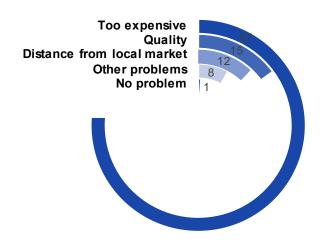


Fig. 28 Main challenges faced in obtaining NFI items PER









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 for moving safely within their municipalities, the reasons hindering safe movement, and awareness of the presence of unexploded ordinances (UXOs).

A visible presence of unexploded ordnance



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

People are able to safely move



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

| Baladiyas residents cannot move safely | Reason why can't move within Baladiya |
|--|---|
| Derna | Road closed, threat/presence of explosive hazards |
| Murzuq | Insecurity |
| Taraghin | Insecurity |
| Sebha | Insecurity |
| Al Aziziya | Road closed, Insecurity, Other |
| Espeaa | Road closed, Insecurity, Other |
| Qasr Bin Ghasheer | Road closed, Insecurity, Other |
| Sidi Assayeh | Insecurity |
| Suq Alkhamees | Road closed, Insecurity, Other |
| Zliten | Insecurity |
| Abusliem | Road closed, Insecurity, Other |
| Ain Zara | Road closed, Insecurity, Other |

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

Visible presence of UXOs was reported in 7 municipalities. Residents were reported as not being able to move safely within their area of residence in 17 municipalities.

In municipalities where movement was restricted, the main reasons were insecurity (11 municipalities) and road closures (7 municipalities).







WASH AND PUBLIC SERVICES

Garbage disposal services, electricity, and operational water networks were the most commonly available municipal services reported in Round 26, although electricity was often available only intermittently. Out of the 100 assessed municipalities, 60 municipalities reported garbage disposal services as being operational, electricity was regularly available in 51% of assessed locations, and water networks were fully operational in 47% of the municipalities.

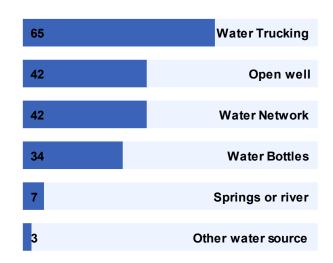


Fig. 33 Main sources of water supplying to the municipalities

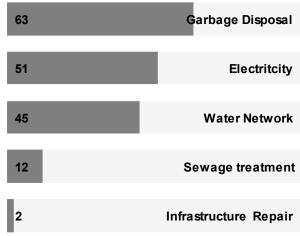


Fig. 32 Public services available at the municipalities

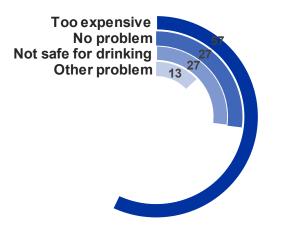


Fig. 34 Main problems associated with access to potable water as to the number of reporting municipalities



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. A comprehensive methodological note on DTM's Mobility Tracking component is available on the DTM Libya website.

In Round 26, DTM assessed all 100 municipalities in Libya.

2,382 Key Informant interviews were conducted during this round. 404 Key Informants were interviewed at the municipality level and 1,978 at the community level. 31% were representatives from divisions within the municipality offices (Social Affairs, Muhalla Affairs etc.), 12% from civil society organizations, and 10% from health facility representatives. Out of all key informants interviewed, 3% were female and 97% were male.

ENUMERATORS



55 enumerators



3 team leaders





5 Implementing partners











COVERAGE



2,382 ΚI interviews (KIIs)





in 659 communities out of 667...



....in 100 municipalities

www.globaldtm.info/libya

| 2382 | Klls | |
|---|------|-----|
| Other representation from baladiya office | 741 | 31% |
| Civil Society Organization | 282 | 12% |
| Representatives of Health facilities | 239 | 10% |
| Local Crisis Committee Representative | 207 | 9% |
| Representatives of education facilities | 191 | 8% |
| Community / tribal representative | 162 | 7% |
| Security forces | 161 | 7% |
| Religious leaders | 128 | 5% |
| Representation of displaced groups | 103 | 4% |
| Humanitarian NFI distribution team | 94 | 4% |
| Migrant community leaders | 52 | 2% |
| Other | 9 | 0% |
| Migrant networks | 7 | 0% |
| Humanitarian Health team | 6 | 0% |



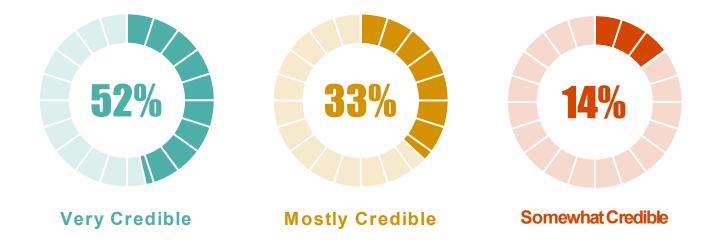
METHODOLOGY





DATA CREDIBILITY

52% of data collected was rated as "very credible" in Round 26, while 33% was rated "mostly credible", and 14% was "somewhat credible". This rating is based on the consistency of data provided by key informants, their sources of data, and on whether data provided is in line with general perceptions.



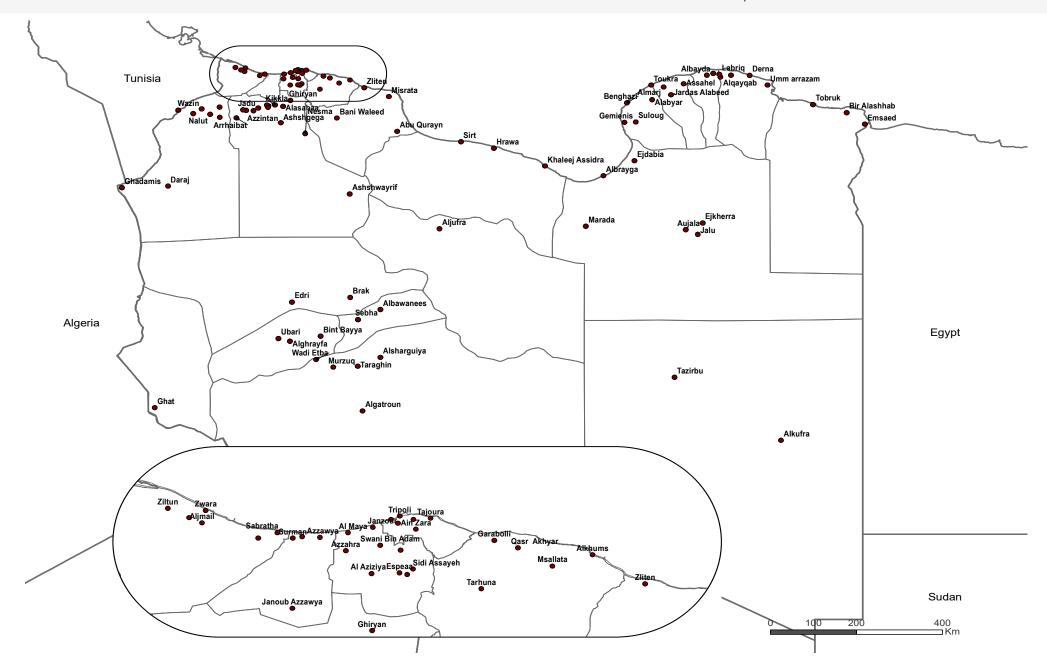
Disclaimer: The content of this report is based on the evidence collected during the survey. Thus, the reported findings and conclusions represent the views and opinions of the surveyed key informants, for which DTM cannot be held responsible.



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/