

2022 HUMANITARIAN RESPONSE MONITORING

PERIODIC MONITORING REPORT
(JAN-MAR 2022)

LIBYA



LIBYA

© UNICEF LIBYA

About

This document is consolidated by OCHA on behalf of the Humanitarian Country Team and partners. It provides a shared understanding of the crisis, including the most pressing humanitarian needs and the estimated number of people who need assistance. It represents a consolidated evidence base and helps inform joint strategic response planning.

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

PHOTO ON COVER

UNICEF PARENTING MONTH CAMPAIGN ACROSS LIBYA.

© UNICEF/Libya/Darj

Get the latest updates



OCHA coordinates humanitarian action to ensure crisis-affected people receive the assistance and protection they need. It works to overcome obstacles that impede humanitarian assistance from reaching people affected by crises, and provides leadership in mobilizing assistance and resources on behalf of the humanitarian system.

www.unocha.org/libya

twitter.com/ocha_libya

Humanitarian RESPONSE

Humanitarian Response aims to be the central website for Information Management tools and services, enabling information exchange between clusters and IASC members operating within a protracted or sudden onset crisis.

<https://www.humanitarianresponse.info/en/operations/libya>



Humanitarian InSight supports decision-makers by giving them access to key humanitarian data. It provides the latest verified information on needs and delivery of the humanitarian response as well as financial contributions.

www.hum-insight.com



The Financial Tracking Service (FTS) is the primary provider of continuously updated data on global humanitarian funding, and is a major contributor to strategic decision making by highlighting gaps and priorities, thus contributing to effective, efficient and principled humanitarian assistance.

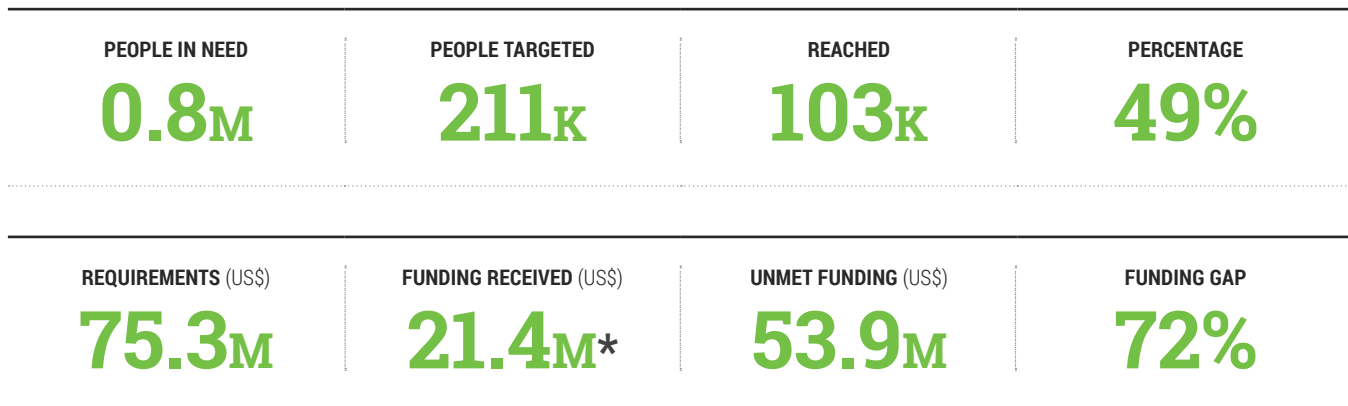
<https://fts.unocha.org/appeals/1027/summary>

Table of Contents

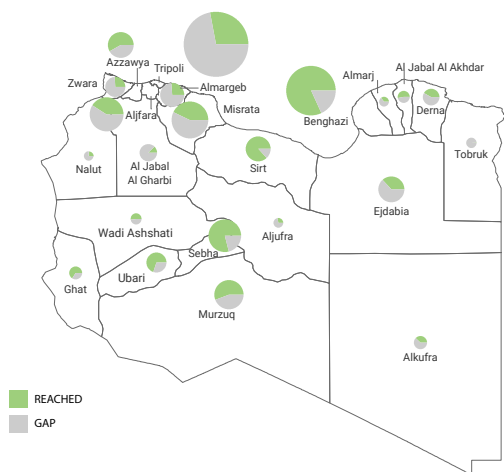
04	At a Glance
05	Change in Context
09	Review of response
11	Changes in People in Need (PiN)
12	Highlights of achievements Sectors Achievements
26	Challenges and constraints

AT A GLANCE

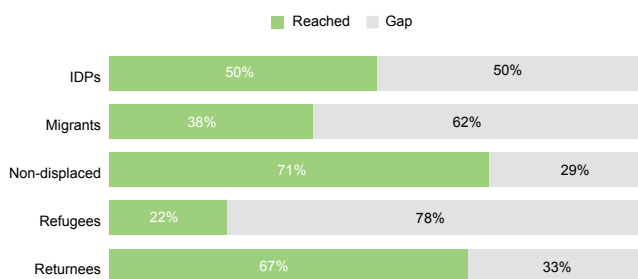
KEY FIGURES



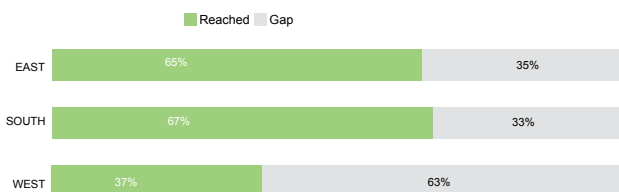
TOTAL PEOPLE REACHED BY MANTIKA



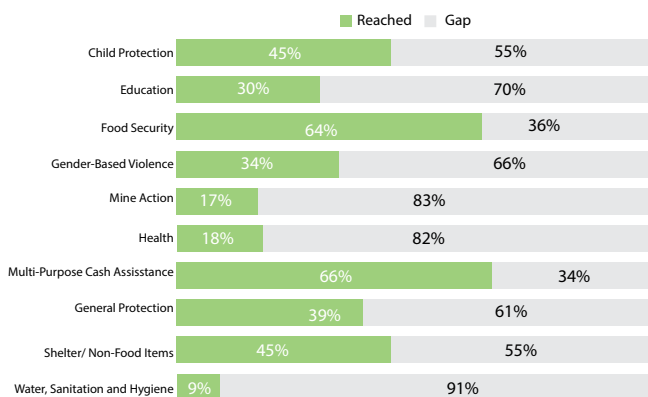
TOTAL PEOPLE REACHED BY POPULATION GROUPS



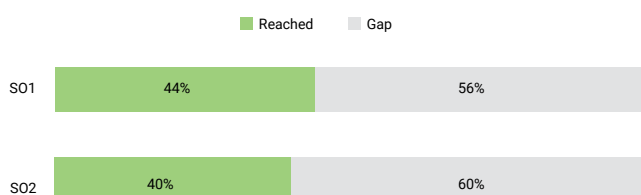
TOTAL PEOPLE REACHED BY REGION



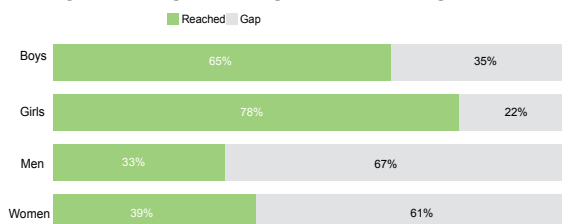
TOTAL PEOPLE REACHED BY SECTOR



TOTAL PEOPLE REACHED BY STRATEGIC OBJECTIVE



TOTAL PEOPLE REACHED BY GENDER AND AGE



* Funding received as of 11 May 2022

CHANGE IN CONTEXT

The 2022 Libya Humanitarian Needs Overview (HNO) assessed that 803,000 people remain affected and in need of some form of continued humanitarian assistance, a reduction by 36 per cent from the 1.5 million people identified in 2021. The HNO further estimated that 211,000 people require targeted humanitarian assistance for the first five months of 2022, including: 56,000 Internally Displaced Persons (IDPs); 18,000 returnees; 52,000 non-displaced Libyans; 41,000 migrants; and 43,000 refugees². While noting steady improvements to the humanitarian situation as evidenced through the HNO and assessments, and in parallel to the achievements on the political and security fronts, the Humanitarian Country Team (HCT) agreed to extend the 2021 Humanitarian Response Plan (HRP) into the first five months of 2022, from January to 31 May. The HRP extension allowed the humanitarian community to evaluate and monitor developments on the ground to determine programming requirements beyond 31 May 2022; taking into consideration the pending outcomes of the presidential elections scheduled at the end of 2021, while also noting the changes in the situation in Libya with the number of people in need reducing and progress towards early recovery and humanitarian-development nexus building, gaining momentum.

In 2021, significant improvements to the overall security situation in Libya, precipitated by the signing of the Ceasefire Agreement in October 2020 and the formation of the Government of National Unity (GNU) in March 2021, fostered a degree of political stability throughout the country. The cessation of large-scale hostilities allowed for more favorable humanitarian conditions resulting in the increase of the number of displaced people returning. According to the International Organization for Migration (IOM)'s latest Displacement Tracking Matrix (DTM), of the current returnee population (673,554), 98 per cent returned to their places of origin due to improvements in the security situation, while 89 per cent of returnees live in their previous homes³. Although the postponement of the parliamentary and presidential elections at the end of December 2021 heightened fears for a return to hostilities and increasing political instability, humanitarian partners did not report serious operational impediments to their programming, which remained largely unaffected. While political uncertainties continue, the overall humanitarian situation has been stabilizing as initiatives towards building government capacity for recovery and rehabilitation are moving forward. However, events outside of Libya's periphery, such as the crisis in Ukraine, contributed to new challenges with food prices rising exponentially in mid-February. The start of the crisis in Ukraine led to a global price increase of wheat flour by 19.7 per cent⁴, with Libya being one of the most-affected as 75 per cent of its wheat supply is imported from Russia and Ukraine. According to

the World Food Programme, the price of wheat flour increased by 15 per cent in Libya within the last two months, while the Monthly Expenditure Basket (MEB) showed an increase by 32 per cent from pre-pandemic levels⁵, raising new concerns not only for vulnerable populations, but all Libyans and their ability to afford food staples, which may lead to adopting negative coping strategies.

Progress towards forming government-led initiatives on durable solutions for the remaining displaced population moved forward with the arrival of an expert on displacement affairs within the Office of the Resident Coordinator (RCO), working in collaboration with government authorities. Work has begun on formulating guidelines towards a national strategy, encompassing solutions not only on displaced populations returning to their places of origin, but also local integration and resettlement with a view towards achieving durable solutions as part of a government-led approach that includes the allocation of dedicated national resources. In addition, on 6 March 2022, OCHA and the Ministry of Social Affairs signed a Memorandum of Understanding (MOU) formalizing an agreement to extend support, including capacity building measures, for services rendered through the Ministry of Social Affairs. The MOU agreement includes supporting capacity building measures on emergency response planning and coordination; information management training to support data collection and analysis; as well as support to the Ministry in reaching the most vulnerable groups, including displaced persons and returnees.

At the same time, administrative and bureaucratic policies of national authorities and the Central Bank of Libya (CBL) also affected humanitarian planning and operations throughout the country. A liquidity crisis set limitations on the amount of funds humanitarian organizations could withdraw from banks, affecting cash-based programming and the procurement and delivery of humanitarian supplies. While some positive steps were taken to improve the process of visa approvals for international NGO staff, delays were still encountered, forcing some organizations to further augment programming.

The pace of people returning remained steady, however the trend has shown signs of slowing as those still displaced face more systemic impediments to return, such as houses damaged due to armed conflict and the lack of access to public services upon return, as well as personal security and social cohesion. According to IOM, more than 50,000 IDPs returned between February 2021 and January 2022, with the current total number of returnees recorded as 673,554 individuals. To date, some 168,011 people remain displaced, which accounts for a 47 per cent reduction in the number of people internally displaced in Libya since the October 2020 ceasefire (when 316,415 individuals were reported as

2 OCHA, 2022 Humanitarian Needs Overview

3 IOM, Libya IDP and Returnee Report Round 40 (December 2021 – January 2022)

4 FAO Index, March 2022

5 REACH, JMMI, April 2022

displaced)⁶. Those displaced for a protracted period, face uncertainty with critical protection risks persisting with an increase in the number of forced evictions and returns not meeting international standards as well as the lack of government solutions.

Since 2021, the forced evictions of individuals and families in collective centres and informal sites significantly increased, leading to a heightened risk of multiple displacement and tenure insecurity. In the first quarter of 2022, eviction notices were issued to IDP settlements, hosting primarily families from Tawergha, for whom several barriers remain for their return and reintegration, which require long-term interventions related to housing, restoration of basic services and livelihoods, as well as support from the government. In early March, the Dawaa Eslameya IDP settlement in Tripoli, hosting approximately 113 Tawerghan displaced families, were issued an eviction notice to vacate the premises within weeks, without the provision of an alternative solution for their protracted displacement status by governmental authorities. Although the Attorney-General's (AG) office extended the deadline, there are potentially four other informal sites facing closure, affecting nearly 800 families in Tripoli and Benghazi. A recent mapping exercise of informal IDP sites, conducted by the Shelter/Non-food Items (SNFI) sector, with support by the Protection sector, identified 24 sites across Libya at risk of eviction or closure, affecting an estimated 2,600 Households. There are also indications of the possible return of IDPs from Murzuq following a reconciliation agreement signed by the conflicted parties in late March 2022. The agreement however is questioned by some of the representatives of the General Assembly of Murzuq and the financial support promised has yet to be disbursed.

Access to migrants, refugees and asylum seekers remained erratic for humanitarian partners in the aftermath of the October 2021 and January 2022 security operations, resulting in the mass arrest of thousands of migrants, forcing many to go into hiding. Their humanitarian needs remain high, with access to health services (74 per cent), non-food items (54 per cent) and shelter/accommodation (50 per cent) as the top priorities⁷. Barriers, such as, risk of detention and the reluctance of landlords in Tripoli to rent to non-Libyans create significant risks of homelessness as well as leading many to adopt harmful coping mechanisms. The status of migrants, refugees and asylum seekers remains precarious especially as there is no legal framework that enables humanitarian actors to provide assistance in a safe and predictable manner, without consideration of the legality of their status in the country. Libya is not a party to the 1951 Refugee Convention and has no legislation concerning the status and treatment of refugees and asylum seekers. The widespread detention of migrants, refugees and asylum seekers, including children, by the Department for Combatting Illegal Migration (DCIM) is arbitrary and contrary to international obligations and legal norms, lacking legal oversight and judicial review, contributing to widespread human rights abuses. Lack of legal protection or a determined status further exposes them to the risk of human trafficking, among them forced labor, forced prostitution, sexual slavery, and forced criminal activities.

According to IOM, the number of migrants, refugees and asylum seekers in the country continued to increase, with a total of 635,051 individuals

6 IOM, Libya IDP and Returnee Report Round 40 (December 2021 – January 2022)

7 IOM Libya, Migrant Report Round 40 (December 2021 – January 2022)

recorded by the end of January 2022, from over 44 nationalities in the 100 Libyan municipalities, including 88,907 children, of which some 5,300 are unaccompanied minors. The operational space to provide principled humanitarian assistance to migrants, refugees, and asylum seekers in Libya deteriorated in the aftermath of the government led security operations, which eventually led to the closure of the Community Day Centre, where migrants received assistance, due to increasing safety concerns.

Migrants and refugees attempting to cross the Mediterranean Sea also increased, with more than 3,500 intercepted/rescued by the Libyan Coast Guard (LCG) and returned to Libya, by the end of March 2022. Of the total number intercepted, nearly 150 were minors (40 girls, 107 boys). Additionally, 318 people attempting to cross were reported dead or missing. With the increase in rescue at sea/interception operations, most of those returned were transferred from disembarkation points into detention centres, held under inhumane conditions without access to due process and facing serious violations and abuses. Limited and inconsistent access to detention centres poses obstacles to the monitoring of the status of those held, increasing concerns over human rights violations, including torture, sexual and gender-based violence (SGBV), and the deprivation of basic needs. The number of migrants held in government detention centres stood at 1,657 individuals by end March 2022, with significant concerns about the whereabouts and fate of hundreds of other people intercepted at sea and detained in Libya by a range of armed actors. Humanitarian partners have been unable to verify reports of informal detention facilities managed by armed security groups, where an estimated 5,000 individuals are believed to be held, due to a lack of access.

The decrease in large-scale hostilities provided for a significant reduction in the use of heavy weapons and explosive ordnance. Although a reduction of hostilities meant that new contamination from explosive remnants of war was not continuing, large amounts of explosive hazard contamination, including unexploded ordnance, landmines, booby-traps, Improvised Explosive Devices (IEDs), and abandoned explosive ordnance that had accumulated during the siege of Tripoli, as well as during previous conflicts, remain in place. The contamination continues to pose a threat to the lives and livelihoods to those who live in their vicinity and act as an impediment to the return of displaced populations, especially in southern Tripoli.

As of end December 2021, Mine Action partners reported the total number of victims stood at 298 (278 men/20 women), of whom 174 were injured and 124 dead. Civilians accounted for 72 per cent (220) of the victims, and 78 individuals (28 per cent) were specialists in explosive ordnance disposal from the Ministry of Defense and Interior. The age of the victims ranged from four to 70 years. Explosive hazard contamination affected humanitarian needs to some degree in virtually all locations where it was reported. Migrants and refugees are particularly at risk, as they do not have access to the same formal and informal information networks and/or are often faced with language barriers when accessing vital mine risk education.

Following regional and global Omicron trends, the COVID-19 pandemic remained an ongoing reality. At the beginning of the year, COVID-19 cases

spiked, once again, across the country, as Libya entered the fourth wave of the pandemic, forcing educational facilities to close for a period of two weeks at the end of January 2022. The National Centre for Disease Control (NCDC) reported that by end February, the overall number of new confirmed cases showed a 35 per cent increase (61,183 cases) from 40,932 cases in January, with the east region reporting a 123 per cent increase, and the south, a 148 per cent increase in cases⁹. Data showed that on a week-by-week comparison, cases were declining by the end of February, and by 20 March, the head of the NCDC announced that Libya had exited the fourth wave of the COVID-19 pandemic, though continued advocating the importance of increasing the rate of vaccinated people to ensure full immunity. By end March, a total of 2.2 million people received one dose of the COVID-19 vaccine, 1.35 million people received two doses and 92,517 people received a booster dose. In addition, the NCDC, in partnership with IOM, continued with their vaccination campaign targeting migrants and refugees, with a total of 10,188 migrants having received the COVID-19 vaccine, of whom some 26 per cent (2,684) have received both doses.

Despite these efforts, the rate of vaccination remains low at 4,000 people per day, which at the current rate would allow for only 20 per cent of the population vaccinated by the end of June 2022.

As the COVID-19 situation started to stabilize, focus on Libya's public health care infrastructure highlighted the deteriorating situation of neglected facilities and services. The availability of general vaccines, such as MMR (Measles, Mumps and Rubella) and bOPV (bivalent Oral Polio Vaccine), indicate a critical gap and alarming nationwide shortages, putting Libya at risk of serious outbreaks of vaccine-preventable diseases, such as Measles and Tuberculosis; while the shortage of essential medications threaten the spread and treatment of HIV, acute diarrhea and dysentery, as well as Leishmaniasis, which remains endemic with resurgent outbreaks. In addition, mental health services remain largely unavailable, particularly in the south region.

8 WHO, Libya COVID-19 Surveillance Monthly Bulletin, 1-28 February 2022

LIBYA

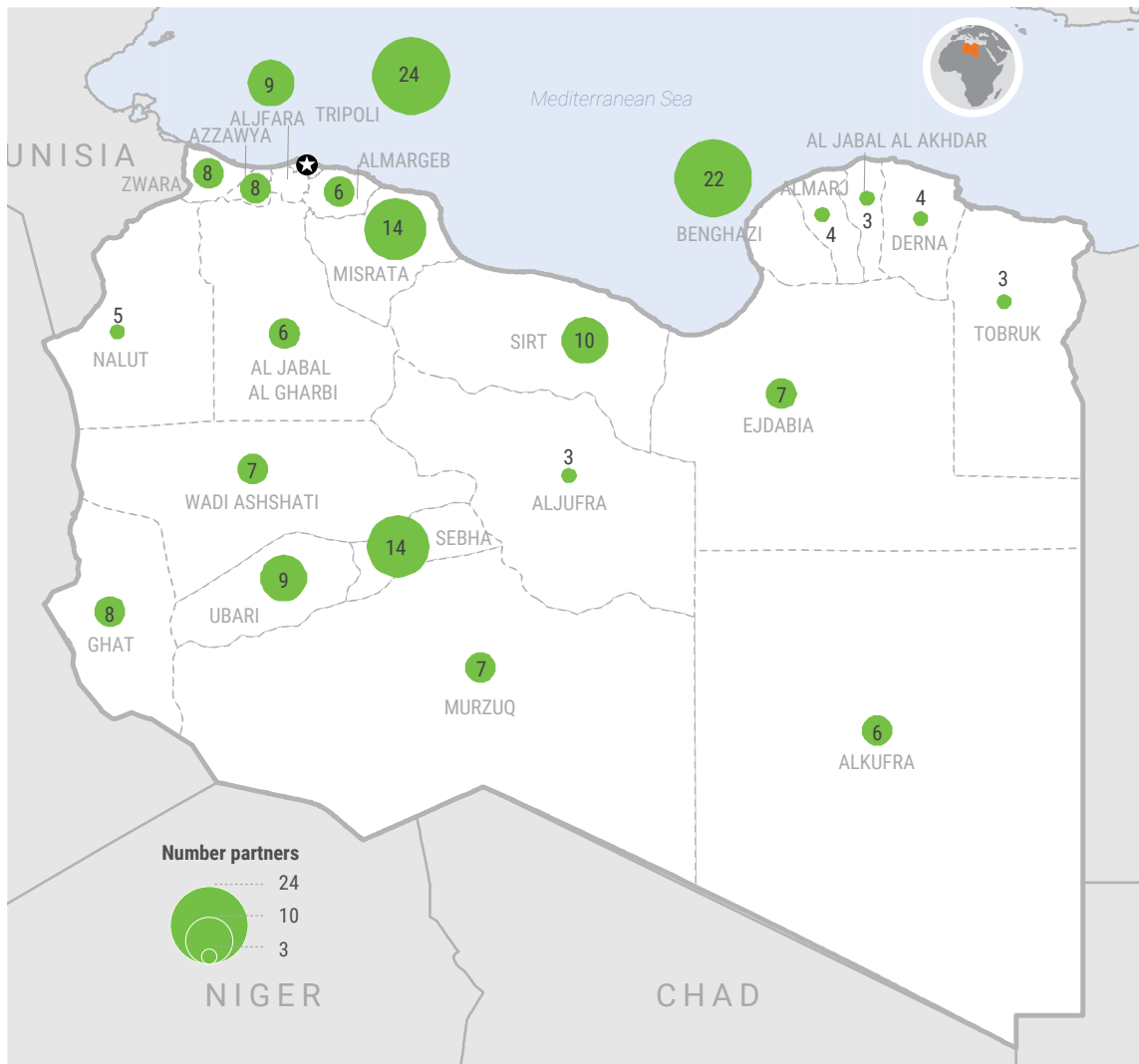
Asylum seekers receiving food assistance during a UNHCR_WFP food distribution in Tripoli
© WFP LIBYA





REVIEW OF RESPONSE

HUMANITARIAN OPERATIONAL PRESENCE IN LIBYA



The 2021 HRP extension identified 211,000 people in need requiring targeted humanitarian assistance during the first five months of 2022, and includes internally displaced persons, returnees, non-displaced Libyans, refugees and migrants. By end March 2022, humanitarian partners reached approximately 103,000 people, 54 per cent women and 45 per cent men, with life-saving assistance. A breakdown by population groups of those reached with targeted assistance, includes: Non-displaced Libyan (71 per cent); Returnees (67 per cent); Internally Displaced Persons (50 per cent); Migrants (38 per cent); and Refugees (22 per cent).

As for sector-specific response rates, three sectors: Child Protection; Food Security; and Shelter & non-food items (SNFI), reached nearly half to up to 64 per cent of their target populations during the first quarter of 2022 with some form of humanitarian assistance; while the Cash & Market Working Group (CMWG) reached 66 per cent of its target population. The Health, Mine Action and WASH sectors cited the lack of funding for HRP projects impacted their ability to effectively deliver services, reaching under 20 per cent of the target populations.

Despite limited financial resources, the Education sector reached nearly 18,000 individuals with services, including access to formal and non-formal education and the provision of essential learning materials; school rehabilitation and improved educational facilities; as well as ensuring psychosocial support services in schools and learning spaces. In the reporting period, the Education sector also reached 43,000 schoolchildren with school feeding activities such as date bar distribution and central kitchen feeding. In collaboration with the WASH sector, hygiene facilities in schools were rehabilitated to ensure infection prevention measures were in place.

The WASH sector, also hindered by the lack of funding, continuous disruptions to the water supply due to electrical cuts, and limited government capacity, managed to provide nearly 54,000 people with hygiene materials and information, in-kind and cash, and reached over 400 people with assistance on COVID-19-related materials, such as masks, gloves, sanitizers and disinfectant. Despite only two out of the seven HRP partners being operational during the reporting period, sector partners rehabilitated WASH facilities in detention centres, IDP collective shelters, schools, and health care centres. Sector partners' capacity on infection prevention and control (IPC) was enhanced to ensure adherence to the recommended hygiene practices while responding to the needs.

Humanitarian Mine Action partners completed the survey and clearance of 100km of the 300km road between Abu Grain with Al Jufra, while Explosive Ordnance Disposal (EOD) activities continued. The sector prioritized battle area clearance and emergency response to EOD call outs, in particular in areas that had experienced major conflict escalations since 2019, such as southern Tripoli and other locations in the greater Tripoli area. In the reporting period, Humanitarian Mine Action organizations cleared 400,000 square meters and collected and disposed of over 2,300 explosive remnants of war (ERW).

The Health sector provided services in seven IDP camps, while 22 detention centres and five disembarkation points were covered by fixed health points and/or mobile medical teams. Additionally, the Health sector provided physical rehabilitation/refurbishment support to 32 public health facilities, and a total of 202 standard health kits were distributed in most districts. As per COVID-19 related services: 25 oxygen concentrators and seven patient ventilators for COVID isolation centres were delivered; reached more than 485,000 Libyans and 11,000 non-Libyans through information campaigns on COVID-19 infection prevention and risk awareness; trained staff on vaccination guidelines and data collection. Twelve out of 18 health sector organizations were operational during the first quarter, reaching all 22 districts under its responsibility, with 14 per cent of the municipalities ranked as three on the humanitarian severity scale, and more than 80 per cent of all medical procedures performed in severity scale three or higher areas. The Health sector continued to survey public health care facilities, noting that out of 216 assessed health facilities across the south, 19 per cent (42) were reported as fully functional, 26 per cent (55) partially functioning, and 26 per cent (55) were out of service. Mental health services remain largely unavailable, with some 1,300 (out of the targeted 5,500) having received

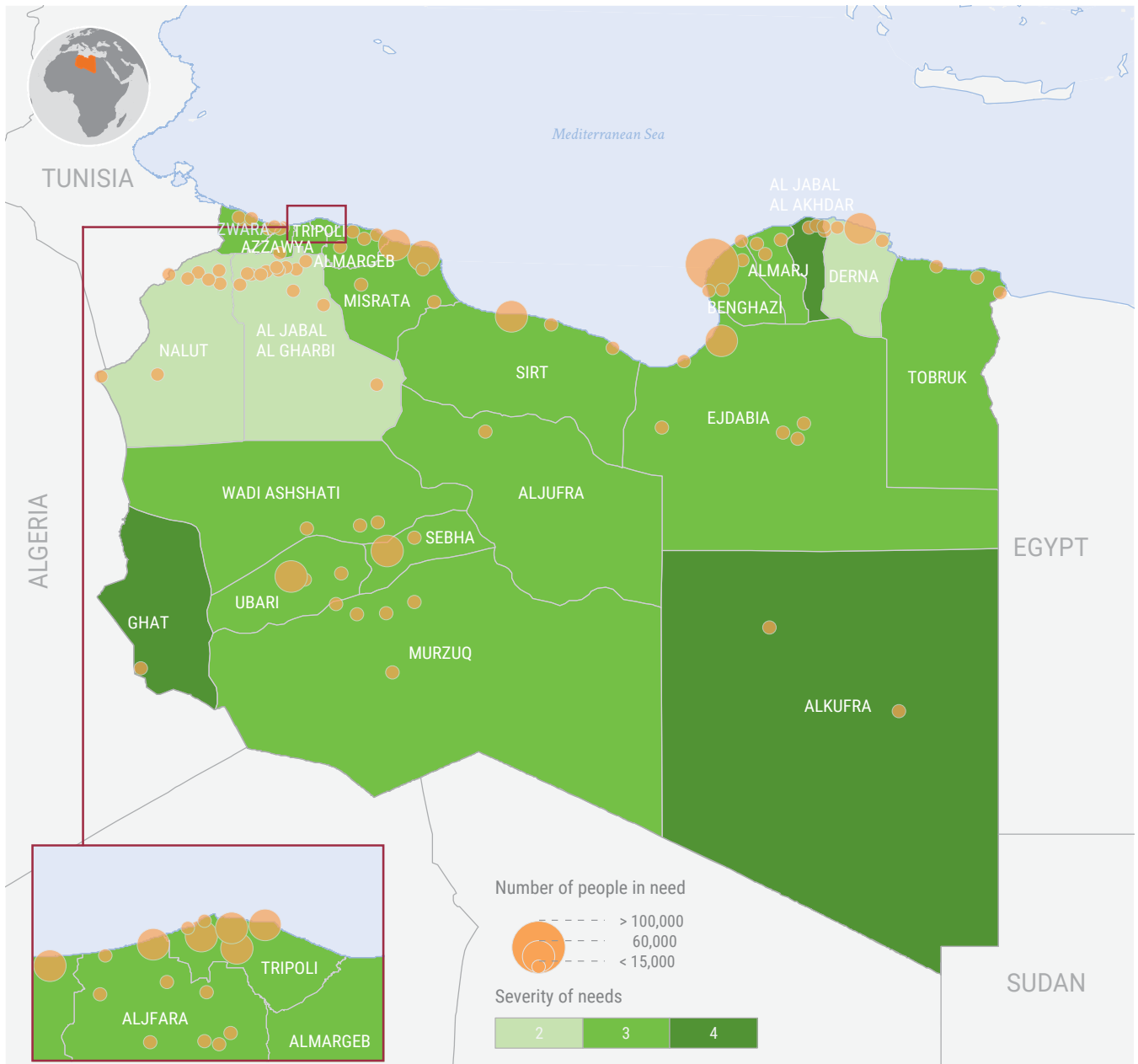
mental health and psychosocial support services (MHPSS) in 40 health facilities. The Protection sector, along with the Gender-Based Violence (GBV) and Child Protection subsectors, also worked collaboratively at the inter-sectoral level to ensure coverage on mental health and psychosocial support services for their specific targeted populations, including migrants, refugees, IDPs, women and children. Nearly 4,900 children and caregivers benefitted from gender, age and disability sensitive MHPSS activities in schools and communities, with 438 at-risk girls (201) and boys (237) referred for specialized services. While the GBV subsector provided psycho-social support for more than 15,600 individuals.

There was no change in protection risks affecting migrants, refugees and asylum seekers since January 2022 with related needs remaining similar to those identified in the 2022 HNO. Maintaining advocacy for alternatives to detention and change of migration management policies is critical. Many migrants and refugees continue to face arbitrary detention, gender-based violence, forced labor, extortion and exploitation, and are at increased risk of being trafficked. The GBV sub-sector reached a total of 23,000 individual with GBV services, including 17,363 women, 4,277 girls, 795 men and 107 boys. The Protection sector assisted more than 5,000 individuals with legal counselling related to Housing, Land and Property-related (HLP) issues as well as civil documentation. In addition, over 13,000 individuals were reached through multiple protection services, and 243 individuals supported with integrated protection response including socio-economic, income-generation, and livelihood support. With the establishment of the Common Feedback Mechanism (CFM) in 2020, through the Emergency Telecommunications Sector, migrants and refugees, as well as affected communities, are able to access information about humanitarian services and COVID-19 via a toll-free number with the Tawasul call center. Callers can share their comments, complaints, suggestions as well as request information and services, which is referred for follow-up through humanitarian agencies. During the first three months of 2022, more than 19,300 calls were registered, of which 15,828 cases were referred and processed by humanitarian actors, relating mostly to protection, SNFI and cash sectors.

The Shelter/NFI sector continued to work within its three principle portfolios: essential household items, adequate housing and repair of infrastructure and public buildings. By the end of March, the SNFI sector partners distributed winter-related items to 10,000 IDPs, while 377 IDPs and returnees benefitted from improved accommodation due to repair of their damaged homes. During this period, over 18,000 migrants and refugees received essential household items, such as blankets and mattresses. In addition, the CMWG partners were able to reach nearly 12,000 people with 14,624 cash transactions in Benghazi, Sebha, Tripoli and Aljafra. Assistance, in more limited numbers was also provided to beneficiaries in Azzaya, Al Jabal Al Gharbi, Misrata and Zwara, mainly targeting IDPs. Food Security sector partners ensured that nearly 84,000 crisis-affected Libyans were provided with unconditional food assistance (in-kind / cash-based transfers), while over 18,000 migrants and refugees received food assistance. An additional 587 vulnerable people received conditional food assistance through vocation/professional training to strengthen and promote self-reliance.

CHANGES IN PEOPLE IN NEED (PIN)

POPULATION IN NEED MAP 2021



HIGHLIGHTS OF ACHIEVEMENTS



42,917 People received unconditional food assistance through either in-kind or cash-based transfers.



101,975 Outpatient consultations conducted excluding mental health, trauma consultations, physical rehabilitation.



18,191 People benefited from essential household items including mattresses, blankets, kitchen sets, clothing, hygiene kits, dignity kits, mattresses, jerry cans and baby kits.



12,437 People received specialized protection services, including GBV, child protection, and psychosocial support.



11,925 Households reached with multi-purpose cash assistance (either monthly or one-off payments).



17,800 People reached with education services .

Strategic Objective 1

Prevent disease, reduce risks to physical and mental wellbeing, and strengthen the protection of civilians in accordance with international humanitarian law, human rights law and other international legal frameworks

	SPECIFIC OBJECTIVE	INDICATOR	TARGETED	REACHED	PROGRESS
S0 1.1	Increase access to life-saving and life-sustaining humanitarian health assistance for 210,752 people, with an emphasis on the most vulnerable (including IDPs, migrants, refugees and returnees) and on improving the early detection of and response to disease outbreaks.	# of medical procedures provided	1.2 M	109 K	Gap 91%
		% of EWARN reporting sites submitting the reports in a timely manner	250	138	Gap 45%
S0 1.2	Strengthen the protective environment for 56,343 people, including from the risks and impact of explosive hazards.	# of direct beneficiaries benefiting from risk education	21 k	10.2 k	Gap 51%
		# of persons reached with awareness raising activities on key protection issues	11.4 k	3.4 k	Gap 70%
		# of caregivers, children and community members trained and/or sensitized on child protection issues	3.7 k	10 k	Over reached 269%
		# of people reached with awareness sessions on GBV prevention and response and service availability	31.6 k	1.4 k	Gap 96%

	SPECIFIC OBJECTIVE	INDICATOR	TARGETED	REACHED	PROGRESS
S0 1.3	Improve access to safe, sufficient and nutritious food for 59,558 of the most food insecure people.	# of people who receive unconditional food assistance	60 k	42 k	On track 70%

LIBYA

A UNHCR staff member helps an asylum seeker disembark from a vessel after its interception at sea by Libyan maritime forces

© UNHCR LIBYA



Strategic Objective 2

Facilitate safe, equitable and dignified access to critical services and livelihoods to enhance people's resilience and ensure they meet their basic needs.

	SPECIFIC OBJECTIVE	INDICATOR	TARGETED	REACHED	PROGRESS
S0 2.1	Provide access to WASH, education, and protection services to about 93,840 most vulnerable displaced, returnees, non-displaced, migrants and refugees.	# of people with access to adequate sanitation	29 k	-	No Progress
		# of school-aged children (boys and girls) accessing formal/non-formal education	12 k	4 k	Gap 65%
		# of community health workers trained	0.6 k	0.4 k	On track 66%
		# of health service providers trained	1.5 k	1 k	On track 67%
		# of individuals reached through protection services, including individual targeted assistance for persons with specific protection needs.	15.8 k	8.7 k	Gap 45%
		# of women and girls participating in structured group psychosocial activities	6.4 k	9 k	Over reached 141%
		# of children receiving age-, gender-, and disability- sensitive child protection services	2.6k	0.2 k	Gap 93%
S0 2.2	Protect and support livelihoods and people's ability to access basic goods for more than 39,069 people.	# of people whose core and essential NFI needs are met	33.5 k	17.5 k	Gap 48%
		# of individuals who receive the full amount of the multi-month cash transfer	14 k	11 k	On track 79%
		# of individuals in need who receive emergency agricultural inputs, vaccines and lab materials	5 k	-	No Progress
		# of people who receive food through vocational training and/or asset creation/ rehabilitation	2 k	1.2 k	Gap 44%

Education



PEOPLE IN NEED	PEOPLE TARGETED	REQUIREMENTS (US\$)	# OF HRP PARTNERS
171K	60K	\$2.7M	8

PEOPLE REACHED THROUGH HRP	HRP REPORTING PARTNERS	FUNDING RECEIVED (US\$)
17.8K	5	\$0M

Objectives, indicators and targets

	OBJECTIVE	INDICATOR	TARGETED	REACHED	PROGRESS
Strategic Objective 1	Respond to outbreaks of disease and risks to physical and mental wellbeing, while strengthening the protection of civilians in accordance with international humanitarian law, human rights law and other international legal frameworks		59,941	-	No Progress
Sectoral Objective 1.1	Increase awareness on COVID-19 Infection Prevention and Control (IPC) measures among the vulnerable school aged children, teachers and families	# of schools and learning centers reached with COVID-19 IPC measures	284	-	No Progress
		# of children in schools and learning centers reached with COVID-19 IPC measures	28,495	-	No Progress
Strategic Objective 2	Facilitate safe, equitable and dignified access to critical services and livelihoods to enhance people's resilience and ensure they meet their basic needs.		11,856	17,837	Over reached 150%
Sectoral Objective 2.1	Enhanced access to quality formal and non formal education services in safe and protective learning environment.	# of Children(boys and girls) accessing psychosocial support services in schools and learning spaces	1,862	3	No Progress
		# of school aged children (girls & boys) provided with meals at school/learning spaces	4,380	9,920	Over reached 226%
		# of School-aged children (girls & boys) accessing rehabilitated and improved educational facilities (WASH facilities, inclusivity for children with disabilities, classrooms, furniture)	4,792	2,643	Gap 45%
		# of Children (boys and girls) receiving essential learning materials	9,624	2,419	Gap 75%
		# of School-aged children (boys and girls) accessing formal/non-formal education	47,424	4,181	Gap 91%

	OBJECTIVE	INDICATOR	TARGETED	REACHED	PROGRESS
Sectoral Objective 2.2	Strengthened capacity of teacher, education personnel and sector members to deliver a timely and coordinated education response.	# of education actors (f/m) oriented on EIE policy, planning, information management, sector coordination and INEE Minimum Standards	56	-	No Progress
		# of Teachers and education personnel trained on PSS	174	-	No Progress
		# of Teachers and education personnel trained on child-centered pedagogy, child safeguarding, and remote learning	191	23	Major gap 88%

LIBYA

Girls, and boys painted murals at UNICEF office with young artists and volunteers as a sign of support for the rights of the children.
©UNICEF/Libya/Tripoli



Emergency Telecommunication



PEOPLE IN NEED	PEOPLE TARGETED	REQUIREMENTS (US\$)	# OF HRP PARTNERS
804k	211k	\$0.8M	1

PEOPLE REACHED THROUGH HRP	HRP REPORTING PARTNERS	FUNDING RECEIVED (US\$)
0k*	1	\$0M

Objectives, indicators and targets

	OBJECTIVE	INDICATOR	TARGETED	REACHED	PROGRESS *
Strategic Objective 1	Prevent disease, reduce risks to physical and mental wellbeing, and strengthen the protection of civilians in accordance with international humanitarian law, human rights law and other international legal frameworks.		210,751	-	
Sectoral Objective 1.1	Enhance the safety and security of the humanitarian community through the coordination and implementation of security telecommunications.	# of common operational areas covered by common security telecommunications network	-	1	
		% of users reporting delivery of the service as "satisfactory" and within "satisfactory" timeframe	-	-	
		Information Management and collaboration platform established and maintained	-	1	
Strategic Objective 2	Facilitate safe, equitable and dignified access to critical services and livelihoods to enhance people's resilience and ensure they meet their basic needs.		132,909	-	
Sectoral Objective 2.1	Support the communication needs of affected communities.	# of service for communities' implementations	-	1	
		% of users reporting delivery of the service as "satisfactory"	-	-	
Sectoral Objective 2.2	Strengthen the CFM through improved referral systems and enhanced regular reporting	# of sector-specific reports submitted to sector focal points	-	7	
		% of call users reporting delivery of the service as "satisfactory" and within "satisfactory" timeframe	-	-	
		% of partners reporting delivery of the service as "satisfactory" and within "satisfactory" timeframe	-	-	

* Emergency Telecommunication progress on sector activities and services is reported annually,

Food Security



PEOPLE IN NEED	PEOPLE TARGETED	REQUIREMENTS (US\$)	# OF HRP PARTNERS
511k	67k	\$10.3M	3

PEOPLE REACHED THROUGH HRP	HRP REPORTING PARTNERS	FUNDING RECEIVED (US\$)
43k	2	\$4.6M

Objectives, indicators and targets

	OBJECTIVE	INDICATOR	TARGETED	REACHED	PROGRESS
Strategic Objective 1	Prevent disease, reduce risks to physical and mental wellbeing, and strengthen the protection of civilians in accordance with international humanitarian law, human rights law and other international legal frameworks.		59,558	41,862	On track 70%
Sectoral Objective 1.1	Ensure that crisis-affected vulnerable populations in Libya have access to safe, sufficient and nutritious food.	# of people in need who receive unconditional food assistance through in-kind or cash-based transfers	59,558	41,862	On track 70%
Strategic Objective 2	Facilitate safe, equitable and dignified access to critical services and livelihoods to enhance people's resilience and ensure they meet their basic needs.		7,225	1,173	Gap 84%
Sectoral Objective 2.1	Protect livelihoods and promote livelihood-based coping capacities of crisis-affected vulnerable populations at risk of hunger and malnutrition.	# of people who receive food through vocational training and/or asset creation/rehabilitation to strengthen self-reliance	2,100	1,173	Gap 44%
Sectoral Objective 2.2	Protect agricultural livelihoods and build national and community resilience against current and future food insecurity shocks.	# of individuals in need who receive emergency agricultural inputs, vaccines and lab materials	5,125	-	No Progress

Health



PEOPLE IN NEED	PEOPLE TARGETED	REQUIREMENTS (US\$)	# OF HRP PARTNERS
804K	211K	\$18.6M	11

PEOPLE REACHED THROUGH HRP	HRP REPORTING PARTNERS	FUNDING RECEIVED (US\$)
36K	2.9	\$8.3M

Objectives, indicators and targets

	OBJECTIVE	INDICATOR	TARGETED	REACHED	PROGRESS
Strategic Objective 1	Prevent disease, reduce risks to physical and mental wellbeing, and strengthen the protection of civilians in accordance with international humanitarian law, human rights law and other international legal frameworks.		210,751	34,946	Gap 83%
Sectoral Objective 1.1	Increase access to life-saving and life-sustaining humanitarian health assistance, with an emphasis on the most vulnerable (including IDPs, migrants, refugees and returnees) and on improving the early detection of and response to disease outbreaks.	# of outpatient consultations (excluding mental health, trauma consultations, physical rehabilitation)	1,162,700	101,975	Gap 91%
		# of nutrition assessments (SMART survey) conducted	1	-	No Progress
		# of children aged 6-59 months (girls & boys) received emergency nutrition services	5,500	1	No Progress
		# of patients referred for treatment between different levels of care and locations	7,000	2,173	Gap 69%
		# of trauma/injury related consultations	20,000	2,157	Gap 89%
		# of mental health consultations	5,500	1,983	Gap 64%
		# of physical rehabilitation (disability) sessions/consultations	3,000	196	Gap 93%
		# of vaginal deliveries attended by a skilled attendant	1,500	201	Gap 87%
		# of caesarian sections supported	300	16	Gap 95%
		# of health facilities and community centers providing MHPSS services	150	5	Gap 97%
		# of mobile medical teams/clinics (including EMT)	60	4	Gap 93%
		# of vaccination centers received cold chain equipment	75	2	Gap 97%
		# of vaccinators trained on cold chain and vaccine management	2,000	2,020	Over reached 101%
		% of reporting sites submitting the reports in a timely manner	250	1	No Progress
		% of disease outbreaks responded to within 72 hours of identification	200	-	No Progress
		# of EWARN sentinel sites	250	180	On track 72%

	OBJECTIVE	INDICATOR	TARGETED	REACHED	PROGRESS
Strategic Objective 2	Facilitate safe, equitable and dignified access to critical services and livelihoods to enhance people's resilience and ensure they meet their basic needs		132,909	1,985	Gap 99%
Sectoral Objective 2	Strengthen health system capacity to provide the essential package of health services and manage the health information system	# of coordination meetings at the national and sub-national levels	36	6	Gap 83%
		# of completed health sector assessments conducted	12	-	No Progress
		# of attacks on health care reported	-	3	On track 100%
		# of public PHC facilities supported with health services and commodities	600	8	Gap 99%
		# of public secondary health care facilities supported with health services and commodities	50	-	No Progress
		# of provided medical equipment	650	539	Gap 83%
		# of provided standard health kits	650	259	Gap 60%
		# of provided PPE (personal protective equipment) materials	1,200,000	12,329,660	Over reached 1,027%
		# of health facilities supported with mobile medical teams	60	5	Gap 92%
		# of public health facilities refurbished and/or rehabilitated	30	-	No Progress
		# of IDP camps/settlements covered by fixed health points and/or mobile medical teams	20	1	Gap 95%
		# of official detention centers covered by fixed health points and/or mobile medical teams	20	2	Gap 90%
		# of disembarkation points covered by fixed health points and/or mobile medical teams	14	2	Gap 86%
Sectoral Objective 2	Strengthen health and community (including IDP, migrants and refugees) resilience to absorb and respond to shocks with an emphasis on protection to ensure equitable access to quality health care services.	# of health service providers trained through capacity building and refresher training	1,500	1,011	On track 67%
		# of community health workers trained through capacity building and refresher training	600	394	On track 66%
		# of health workers trained on CMR (Clinical management of rape)	100	-	No Progress

Protection



PEOPLE IN NEED	PEOPLE TARGETED	REQUIREMENTS (US\$)	# OF HRP PARTNERS*
804K	211K	\$21.3M	19

PEOPLE REACHED THROUGH HRP	HRP REPORTING PARTNERS*	FUNDING RECEIVED (US\$)
55K	12	\$7.7M

Objectives, indicators and targets

	OBJECTIVE	INDICATOR	TARGETED	REACHED	
Strategic Objective 1	Prevent disease, reduce risks to physical and mental wellbeing, and strengthen the protection of civilians in accordance with international humanitarian law, human rights law and other international legal frameworks		210,751	45,947	Gap 78%
Sectoral Objective 1.1	Enhance the protective environment and reinforce community ownership of protection initiatives by strengthening accountability to affected populations and promoting meaningful engagement and capacity-strengthening with communities, authorities and local actors	# of persons (humanitarian workers, CSO members and local/ national authorities) who receive training/ capacity support (cumulative interventions)	294	67	Gap 77%
		# of informal community committee leaders and members who receive training/capacity support (cumulative interventions)	370	40	Gap 89%
		# of persons reached with awareness raising activities	11,363	3,570	Gap 69%
Sectoral Objective 1.2	Strengthen the protection of individuals and communities from the risks and impact of explosive hazards.	Total of m2 surveyed	16,000,000	47,586,425	Over reached 297%
		m2 cleared from explosive hazards	650,000	848,819	Over reached 131%
		Total of m2 of contaminated area newly identified (SHA and CHA)	730,000	52,486	Gap 93%
		# of direct beneficiaries benefiting from risk education	21,000	10,204	Gap 51%
		# of explosive hazard items removed	2,390	3,182	Over reached 133%
		# risk education campaigns conducted	1	1	No Progress
		# of services delivered	-	-	No Progress

* Number represents total number of partners for Protection, Mine Action, Child Protection and Gender-Based Violence

	OBJECTIVE	INDICATOR	TARGETED	REACHED	
Sectoral Objective 1.3	Strengthen community-based child protection to enhance protection of children from violence, abuse and exploitation in targeted location.	# of caregivers, children and community members trained and/or sensitized on CP issues incl. CP and GBV risks, CP/GBV referrals (disaggregated by age/sex/disability)	3,743	10,081	Over reached 269%
		# of children and caregivers benefitting from gender, age and disability sensitive MHPSS activities	26,478	5,981	Gap 77%
		# of non-child protection actors (national/local authorities/ civil society actors) trained on CP concepts, including CP mainstreaming (disaggregated by age/sex)	83	121	Over reached 146%
	Strengthened capacities and coordination among service providers, national/local institutions and communities in GBV response, prevention and risk mitigation	# of people reached with awareness sessions on GBV prevention and response and service availability	31,600	1,387	Gap 96%
		# of individuals trained on GBV Prevention and Response, Case Management including static, mobile and remote service delivery	500	72	Gap 86%
		# of non-GBV frontline workers trained on GBV core concepts in line with GBV guiding principles	150	-	No Progress
Strategic Objective 2	Facilitate safe, equitable and dignified access to critical services and livelihoods to enhance people's resilience and ensure they meet their basic needs		132,909	19,148	Gap 86%
Sectoral Objective 2.1	Identify and respond to the protection needs and promote the rights of Libyans and non-Libyans through the provision of specialized protection services and strengthening of integrated protection	# of individuals assisted with integrated protection response provided through livelihood, income generation other socio-economic support	204	232	Over reached 114%
		# of individuals receiving legal counselling or assistance, including civil documentation and HLP issues (cumulative interventions)	8,198	4,058	Gap 51%
		# of individuals reached through protection services, including individual targeted assistance for persons with specific protection needs (includes MHPSS) (cumulative interventions)	15,832	8,858	Gap 44%
Sectoral Objective 2.2	Improved access to safe, timely, confidential and coordinated GBV services in line with GBV Guiding Principles and the survivor-centered approach.	# of women and girls participating in structured PSS activities	6,400	9,001	Over reached 141%
		# of women and girls participating in life skills activities	3,600	917	Gap 75%
		# of dignity kits distributed	4,000	562	Gap 86%
		# of referral pathways in place	4	9	Over reached 225%
		# of safety audits conducted	2	-	No Progress

	OBJECTIVE	INDICATOR	TARGETED	REACHED	
Sectoral Objective 2.3	Increase availability of and access to quality child protection specialized services	# of child protection actors trained on specific CP technical areas (disaggregated by age/sex)	2,620	358	Gap 86%
		# of girls and boys referred for specialized services (refers to children already receiving case management services referred for additional services, regardless of who is providing the additional service).	2,620	333	Gap 87%
		# of children receiving age, gender and disability sensitive case management services	2,645	177	Gap 39%
Sectoral Objective 2.4	Enhance national Mine Action operational capabilities to mitigate the risks and impact of explosive hazards.	# of people trained	63	-	No Progress

LIBYA

Carla, an immigrant from Niger being treated for tuberculosis at one of the WHO-supported hospitals in Tripoli.

©WHOlibya2021



Shelter & NFIs



PEOPLE IN NEED	PEOPLE TARGETED	REQUIREMENTS (US\$)	# OF HRP PARTNERS
397K	39K	\$5.5M	6

PEOPLE REACHED THROUGH HRP	HRP REPORTING PARTNERS	FUNDING RECEIVED (US\$)
17.5K	4	\$0.7M

Objectives, indicators and targets

	OBJECTIVE	INDICATOR	TARGETED	REACHED	PROGRESS
Strategic Objective 2	Facilitate safe, equitable and dignified access to critical services and livelihoods to enhance people's resilience and ensure they meet their basic needs.		38,840	17,535	Gap 55%
Sectoral Objective 2.1	Provide humanitarian life-saving and life-sustaining shelter and NFI support.	# of people assisted with rental assistance.	40	1	Gap 98%
		# of people assisted by rehabilitated collective centers	60	-	No Progress
		# of people assisted by upgraded unfinished buildings	284	41	Gap 86%
		# of people assisted with core and essential NFI items	33,510	18,146	Gap 46%
Sectoral Objective 2.2	Contribute towards the resilience and social cohesion of communities and households by improving housing and related community/public infrastructure.	# of people assisted by repaired/rehabilitated community/public buildings	160	-	No Progress
		# of people assisted by rehabilitated damaged houses	2,203	45	Gap 98%
		# of people assisted by repaired/rehabilitated community/public infrastructure	2,583	-	No Progress

Water, Sanitation and Hygiene



PEOPLE IN NEED	PEOPLE TARGETED	REQUIREMENTS (US\$)	# OF HRP PARTNERS
381K	95K	\$5.7M	7
PEOPLE REACHED THROUGH HRP	HRP REPORTING PARTNERS	FUNDING RECEIVED (US\$)	
8.4K	2	\$0M	

Objectives, indicators and targets

	OBJECTIVE	INDICATOR	TARGETED	REACHED	PROGRESS
Strategic Objective 1	Prevent disease, reduce risks to physical and mental wellbeing, and strengthen the protection of civilians in accordance with international humanitarian law, human rights law and other international legal frameworks.		28,966	-	No Progress
Sectoral Objective 1.1	Increased awareness on COVID-19 Infection Prevention and Control (IPC) measures.	# of people reached with Covid-19 assistance	86,898	-	No Progress
Strategic Objective 2	Facilitate safe, equitable and dignified access to critical services and livelihoods to enhance people's resilience and ensure they meet their basic needs.		95,140	8,447	Gap 91%
Sectoral Objective 2.1	Most vulnerable population groups affected by humanitarian crisis are provided with life-saving WASH assistance.	# of people provided with basic WASH facilities in schools and Health Centres	24,310	136	Gap 99%
		# of people with access to safe drinking water	25,345	-	No Progress
		# of people with access to adequate sanitation services	28,966	-	No Progress
		# of people provided with hygiene materials (in kind/cash) and information	31,645	8,074	Gap 74%
Sectoral Objective 2.2	WASH Sector partners capacity strengthened on water and sanitation responses in emergencies and pandemics.	# of Govt, I/NGOs offices provided with technical supplies	2	-	No Progress
		# Government, I/NGOs staff trained on emergency preparedness and response planning and WASH in Emergencies and pandemics	91	-	No Progress

CHALLENGES AND CONSTRAINTS

Since the postponement of the elections at the end of 2021, uncertainty prevails over the political landscape and the potential resumption or escalation of violence and armed clashes between rival political opponents. The emergence of armed groups, increased interceptions at sea by non-governmental actors and informal detention centres, mass arrest campaigns targeting migrants and refugees, and the increase in the number of evictions of displaced families, are all issues requiring greater scrutiny by the humanitarian community to ensure that the needs of vulnerable populations are being addressed. As the number of people in need of humanitarian assistance decreases, it is becoming incumbent on the government to ensure a safety net is in place and to ensure that it has the capacity and resources to deliver basic services to all populations in Libya.

Limited national budgetary allocations impacted all sectors' ability to ensure the timely delivery of humanitarian assistance. The WASH sector being severely affected due to regular degradation and aging of water and sanitation facilities, with no provisions provided by the government for WASH infrastructure repair and rehabilitation, as well as support for the procurement of much-needed WASH supplies. Prolonged electricity cuts have further affected the continuous flow of safe drinking water, while indiscriminate attacks on water structures resulted in the temporary shut-down of several water stations. Building capacity of national counterparts is a priority, and as such, the WASH sector is supporting the General Company of Water and Wastewater (GCWW) on the procurement of WASH items and spare parts, such as water pumps. The sector has also undertaken advocacy measures at the national level to ensure national authorities take the lead in safeguarding water infrastructure.

Similar concerns regarding the lack of a defined national budget and limited national capacity were raised by the Health sector, warning of a severe shortage of lifesaving medicines and supplies in the country; impending stockouts of childhood vaccines; and periodic stockouts of COVID-19 labs, IPC and case management supplies. The sector, in turn, has been working with national authorities, including the Ministry of Health and the NCDC, to identify priority lifesaving supplies, enhance coordination between national and sub-national level health entities, and ensure that priority groups are identified through enhanced data collection modalities. The Food Security sector, faced with a critical shortfall in funding, was obliged to reduce food rations by 50 per cent for some 90,000 people. Although WFP, Food Security's main implementing partner, was able to secure additional funding through an emergency mechanism, the reduction in the food rations remain at 50 per cent until further funds are received.

Along with political uncertainty, bureaucratic and administrative impediments account for most of the constraints faced by humanitarian

organizations in obtaining operational permission in Libya. Lengthy and cumbersome visa and registration processes combined with limited feedback from authorities posed several challenges for humanitarian partners. Although a new online platform for visa applications helped improve the time needed to approve visas, the number of visas issued remained limited. Banking restrictions and limitations on cash withdrawals hampered several sectors' ability to deliver services. The SNFI sector, which has traditionally used cash to provide essential household items and accommodation, is now implementing the use of vouchers, i.e. cash cards, rather than cash, which can be exchanged for goods at retail outlets, as a temporary solution.

During the reporting period, humanitarian partners noted increasingly stringent financial regulations on cash withdrawals and local/international banking transactions. Specific banks utilized by NGOs encountered policies that appear consistent with a 2016 circular of the Central Bank of Libya, which imposed a limitation on the maximum amount of cash withdrawals by INGOs set at 1,000 LYD (US\$215) per day; thus, hindering the continuity of some cash-based activities across the country. The Humanitarian Coordinator has met with the CBL Governor to help mediate the liquidity issue on behalf of the INGOs, whereby the Governor gave assurances that the matter would be regulated. In addition, a limited number of humanitarian banking transactions have gone through since December 2021, with approximately \$1 million currently pending approval to reach partners in-country, further contributing to tensions with contractors and government partners as payments are delayed⁹.

Support for durable solutions encompassing physical, material, and legal safety remains a top priority for people living in protracted displacement and recent returnees, including the communities from Tawergha, Murzug and other minority groups. A follow-up assessment conducted by the Eviction Taskforce (ETF) identified some 700 people living in the Dawaa Eslameya settlement at threat of eviction, with 44 per cent being below the age of 18 (308) and 54 per cent female. Most of the IDPs interviewed prefer to return to their place of origin (59 per cent), however, cited barriers related to housing, livelihoods and conflict-related (such as UXO exposure and security concerns) as impediments affecting their return. While the Ministry of Social Affairs plans to allocate financial support to affected households, pending budget approvals coupled with the liquidity crisis, pose challenges in ensuring that the support is received prior to the evictions. In addition, maintaining access to services, such as, education and health as well as livelihoods is critical. Legal aid and HLP-focused counselling focused on tenure security is needed to support those entering the private rental market, specifically female-headed households.

9 OCHA, Access Snapshot, March 2022

In the aftermath of the October 2021 and January 2022 security operations targeting migrants and refugees, humanitarian partners' access to the affected population faced further limitations. With a large of migrants and refugees gone into hiding, fearing arrest and expulsion from the country, humanitarian agencies have used alternative modalities, i.e. home/field visits, and the use of other secure locations to deliver lifesaving activities. Although the Common Feedback Mechanism offers an alternative and safe space for affected populations to access information on humanitarian services, ETS noted the lack of feedback from partners affects their ability to ensure accurate follow-up related to the original inquiry/case, and whether assistance was provided.

Libya is at a crossroads as attention is shifting towards recovery and full national ownership for its structural development. Humanitarian partners have scaled up coordination with national counterparts with a view towards handing over emergency response programming. This includes agreements reached with the Ministry of Social Affairs in improving Libya's capacity on data collection and ensuring the needs of all vulnerable populations are registered for continued assistance. Humanitarian partners are also working collaboratively with humanitarian-development nexus counterparts on socio-economic vulnerability, adopting tools and

methodologies used by development actors to help bridge humanitarian/development/governmental assistance. However, the growing migrant and refugee population poses numerous humanitarian challenges, as Libya is not a party to international legal frameworks recognizing their status in the country. As such, the provision of ongoing protection services and support for migrants, refugees and asylum seekers will require targeted interventions from humanitarian partners as well as advocacy at the government level for durable solutions.

Although the continuation of humanitarian programming is contingent upon the political and security situation, progress has been made in Libya, especially over the past year, with humanitarian conditions improving, as evidenced with a significant reduction in the number of vulnerable populations on the high end of the severity scale. The number of people internally displaced is steadily decreasing, while most returnees, around 98 per cent, returned to their place of origin due to the improved security situation, highlighting the will of Libyans to rebuild their lives and communities. The onus is now on the Libyan government to ensure basic services and structural reforms are enhanced, while adhering to international standards, and the humanitarian community continuing its advocacy with the government to promote durable solutions for the remaining affected populations.

LIBYA

A group of young men preparing sandwiches to be distributed with school meals in Garyounis school in Benghazi as part of WFP's central kitchen programme. (WFP/Ali Alshen)

© WFP LIBYA



This document is produced on behalf of the Humanitarian Country Team and partners.

This document provides the Humanitarian Country Team's shared understanding of the crisis, including the most pressing humanitarian needs, and reflects its joint humanitarian response planning.

The designation employed and the presentation of material on this report do not imply the expression of any opinion whatsoever on the part of the Humanitarian Country Team and partners concerning the legal status of any country, territory, city or area or of its authorities, or concerning the delimitation of its frontiers or boundaries.



www.unocha.org/libya



www.humanitarianresponse.info/en/operations/libya



[@OCHA_Libya](https://twitter.com/OCHA_Libya)