



LIBYA - COMPLEX EMERGENCY

FACT SHEET #1, FISCAL YEAR (FY) 2018

DECEMBER 1, 2017

NUMBERS AT A GLANCE

6.5 million

Population of Libya
UN – September 2017

199,000

IDPs in Libya
IOM – October 2017

304,300

IDP Returns Registered in
2017 to Date
IOM – October 2017

416,500

Migrants in Libya
IOM – August 2017

43,600

Registered Refugees and
Asylum-Seekers in Libya
UNHCR – October 2017

HIGHLIGHTS

- Insecurity in Libya continues to generate displacement, humanitarian needs
- UN records 23 civilian deaths in October as a result of conflict in Libya
- Access to cash and health care, as well as safety and security, remain key needs among conflict-affected populations
- Donors contribute \$85.7 million toward the 2017 Libya HRP as of December 1

HUMANITARIAN FUNDING FOR THE LIBYA RESPONSE IN FY 2016–2017

USAID/OFDA ¹	\$4,625,311
State/PRM ²	\$23,700,000
\$28,325,311	

KEY DEVELOPMENTS

- Ongoing conflict, civil unrest, and political instability have adversely affected civilians and displaced populations in Libya since 2011. As of October 2017, the International Organization for Migration (IOM) had identified approximately 199,000 internally displaced persons (IDPs) and more than 304,300 cumulative returnees across 100 municipalities.
- Insecurity throughout Libya has resulted in additional civilian casualties and increased humanitarian needs in recent months. The UN reported 23 civilian deaths as a result of hostilities in October. Military activity in northeastern Libya's city of Darnah since late July has severely restricted the movement of local populations and relief actors. In northwestern Libya's Sabratha District, armed clashes prompted rapid displacement in early October and increased humanitarian needs, particularly access to cash to purchase food, as well as access to health care services. While the majority of IDPs returned to the district in late October, humanitarian needs persist in the area.
- IOM and the Office of the UN High Commissioner for Refugees (UNHCR) recently identified access to health care services and safe drinking water as urgent humanitarian needs among conflict-affected and displaced populations in northern Libya. Access to essential and emergency health care remains a challenge throughout the country, according to the UN.
- In FY 2017, the U.S. Government (USG) provided more than \$18 million, including nearly \$2.5 million from USAID/OFDA and \$15.8 million from State/PRM, to support humanitarian response activities in Libya. The USG contribution supports non-governmental organizations (NGOs), international organizations, and UN agencies to provide food, health, protection, shelter, and water, sanitation, and hygiene (WASH) assistance for conflict-affected people in Libya, in addition to supporting humanitarian coordination.

¹ USAID's Office of U.S. Foreign Disaster Assistance (USAID/OFDA)

² U.S. Department of State's Bureau of Population, Refugees, and Migration (State/PRM)

INSECURITY, DISPLACEMENT, AND HUMANITARIAN ACCESS

- Ongoing insecurity, movement restrictions, and presence of explosive remnants of war (ERW) in areas of origin continues to generate humanitarian protection concerns. Hostilities throughout Libya resulted in at least 23 civilian deaths and 15 civilian injuries during October, according to the UN Support Mission in Libya (UNSMIL). Airstrikes caused the majority of civilian deaths and injuries during the time period, while ERW and gunfire accounted for the remaining casualties, according to UNSMIL.
- Since late July, increased military activity in Darnah—including two unidentified airstrikes in late October that resulted in 12 civilian deaths—has led to deteriorating humanitarian conditions and restricted local population movement and relief operations, the UN reports. Nearly all entry and exit points in Darnah remained closed as of November 9, according to a REACH assessment conducted from November 7–9. The Libyan National Army-imposed border closures in Darnah have created food and fuel shortages in the city, adversely affecting food security for vulnerable populations and hindering access to health care facilities and markets due to the lack of petrol, according to the assessment. The border closures have affected an estimated 100,000 people since early August, according to the UN.
- Clashes between armed groups in the northwestern city of Sabratha between September 17 and October 6 prompted more than 11,000 people to flee the city, the UN reports. As of October 23, the vast majority of IDPs have returned to Sabratha; however, 400 houses required repairs and 120 homes were uninhabitable due to damages sustained during the fighting, and the UN reports that insecurity in the city hinders returns. At least 12 relief organizations provided multi-sector humanitarian assistance—including food, medical supplies, such as body bags and trauma kits, and other relief items—to displaced households and health facilities in Sabratha and surrounding areas between September 17 and October 23 in response to recent insecurity.
- Armed clashes in northwestern Libya’s Al Aziziyah District prompted the displacement of approximately 3,000 households between October 31 and November 7, according to the UN. Local authorities reported the violence resulted in an unconfirmed number of civilian deaths and injuries.
- In mid-November, the UN World Health Organization (WHO) received reports that an unidentified group had kidnapped a health care worker in Sabha. Humanitarian actors continue to urge all parties to the conflict to respect international humanitarian law and ensure the safety and security of all civilians, including health care workers. In mid-November, the UN called for unimpeded humanitarian access to people in need across Libya. Although most international organizations and UN agencies evacuated the country in mid-2014 following an escalation in conflict, some relief actors, including USG partners, have recently initiated efforts to reestablish international staff presence and operational coverage in certain areas of Libya.
- As of October 2017, IOM had identified approximately 199,000 IDPs and 304,300 returnees in Libya. Approximately 93 percent of surveyed IDPs cited the threat or fear of conflict and presence of armed groups as reasons for leaving areas of origin; IDPs in more than 60 percent of municipalities reported the same reasons for not returning to areas of origin, according to the October report. IDPs also identified damaged public infrastructure, the threat or presence of ERW, and economic factors as reasons for continued displacement. Benghazi, Misrata, and Tripoli districts continue to host the majority of IDPs.
- Although nearly 50 percent of IDPs in 2016 fled insecurity in northern Libya’s Sirte District, the majority of IDPs returned to areas of origin in Sirte, as well as to Benghazi, Al Jabal Al Gharbi, Misrata, and Ubari districts, in September and October 2017.
- Libya is a primary transit area for migrants and refugees attempting to cross the Mediterranean Sea to enter Europe, despite insecurity and human rights concerns. As of October, UNHCR had registered nearly 44,000 refugees and asylum seekers in Libya.

HEALTH AND WASH

- Access to health care services remains a significant challenge for crisis-affected populations across Libya, the UN reports. IOM and UNHCR identified access to health care services and safe drinking water as priority needs among conflict-affected and displaced populations in Benghazi and surrounding areas during a late October assessment. In

addition, health actors have reported available health services are poor quality due to overcrowded facilities, poorly trained medical staff, and a lack of female doctors to treat female patients.

- The UN reported an increase in health complications and related deaths in October due to a lack of specialized maternal and reproductive health services, including two deaths in northwestern Libya's Al Jafarah District and five deaths in southwestern Libya's Ghat District, according to the UN. Only 12 percent of health facilities in southern Libya provide antenatal care to mothers and only six percent of Libya's more than 1,100 health facilities provide delivery services.
- On November 1, WHO delivered three trauma kits—sufficient to treat more than 300 moderate and serious injuries—to support emergency health needs in Darnah. In addition, WHO delivered five emergency health kits—sufficient to meet the basic health needs of 5,000 people for three months—to health facilities in Ghat's capital city of Ghat on November 6.
- In late November, an unidentified group shut down water supplies to Libya's capital city of Tripoli for the second time in two months. Water shortages have worsened living conditions for the city's residents who are coping with inflation and severe cash shortages, international media report.
- The UN Children's Fund (UNICEF) is supporting sanitation infrastructure rehabilitation in Libya. UNICEF-supported activities that provided access to improved sanitation facilities benefitted approximately 40,000 people in remote areas of Sabha and Tripoli districts between July and September.
- Through nearly \$1.2 million in FY 2017 assistance, a USAID/OFDA partner delivered primary and secondary health care services; procured and distributed essential medicines, medical supplies, and emergency health kits to health facilities; and trained health care professionals and community health workers in four districts. In addition, the organization hired female staff to increase its capacity to reach vulnerable women; as a result, the partner's medical consultations with women increased by nearly 90 percent in some areas.
- In FY 2017, USAID/OFDA provided \$1 million to WHO to improve access to essential and emergency health care services for vulnerable populations in Sirte. WHO supported 11 primary health centers with emergency health kits and provided medicines and medical supplies to local health workers.

FOOD SECURITY AND RELIEF COMMODITIES

- Ongoing conflict continues to result in cash, electricity, food, fuel, and water shortages in many areas of Libya, the UN reports. Despite access challenges and a lack of consistent funding, the UN World Food Program (WFP) reached more than 45,200 people with emergency food assistance in September, the UN agency reports. WFP also scaled up food assistance programming in September to cover eight locations in southern and western Libya.
- Populations in Benghazi, Sabha, and Tripoli reported adequate physical access to markets and a stable supply of food between August and September; however, lack of access to cash hindered many people from purchasing basic food and household commodities in the markets, according to a recent REACH assessment. Populations in Darnah and Sabratha reported access to cash, primarily to purchase food, as a priority need. While the food subsidy system remains partially functional in Benghazi, subsidies are no longer available in Sabha and Tripoli, reducing the purchasing power of households in those areas. According to the assessment, migrants and refugees are particularly vulnerable to the market access challenges.
- UNHCR, in coordination with NGO partners, distributed relief items—including blankets, hygiene kits, kitchen sets, mats, plastic sheets, solar lamps, and winter jackets—to more than 1,800 IDPs and returnees in Benghazi from November 5–16. More than 78,000 IDPs and refugees received critical relief items and more than 2,000 IDP and refugee households received cash assistance between January and mid-November, according to UNHCR.

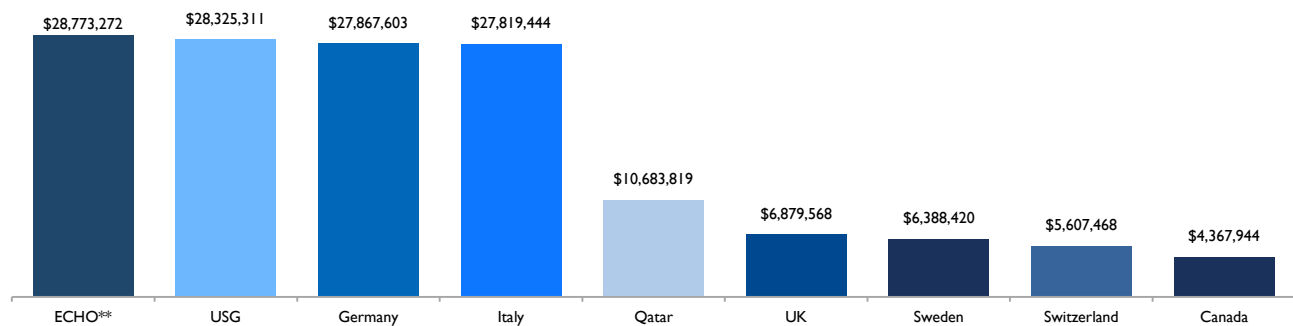
OTHER HUMANITARIAN ASSISTANCE

- Donors have contributed approximately \$112.7 million to support the Libya response to date in 2017, according to the UN Office for the Coordination of Humanitarian Affairs (OCHA). Of the total, donors had provided \$85.7 million, or nearly 57 percent, of the \$151 million requested for the 2017 Libya Humanitarian Response Plan (HRP) as of December 1.
- In response to humanitarian concerns about ERW clearance in areas of return for IDPs, the Government of France recently committed nearly \$510,000 to support UN Mine Action Service activities in Libya, including the destruction of approximately 200 metric tons of ERW near residential areas in northern Libya’s Misrata District. The activities will protect civilians, facilitate humanitarian operations in the area, and prevent theft of the unstable items, the UN reports.

CONTEXT

- Since 2011, armed conflict, civil unrest, and political instability in Libya have adversely affected an estimated 2.4 million people—approximately 40 percent of the civilian population—and internally displaced more than 503,300 people, of whom an estimated 60 percent have since returned to areas of origin, according to the UN. Libyan Government of National Accord military operations against the Islamic State of Iraq and Syria in Sirte between May and December 2016 resulted in new population displacements and increased humanitarian needs; as of December 2016, Libyan forces had assumed control of Sirte.
- On November 16, 2016, U.S. Ambassador Peter W. Bodde issued a disaster declaration for Libya due to the effects of the ongoing complex emergency and lack of local capacity to effectively address the humanitarian needs of conflict-affected populations.

2016–2017 HUMANITARIAN FUNDING* PER DONOR



*Funding figures are as of December 1, 2017. All international figures are according to OCHA’s Financial Tracking Service and based on international commitments during the 2016 and 2017 calendar years. However, USG figures are according to the USG and reflect the most recent USG commitments based on fiscal years 2016 and FY 2017, which began on October 1, 2015, and October 1, 2016, respectively.

**European Commission’s Directorate-General for Humanitarian Aid and Civil Protection (ECHO)

USG HUMANITARIAN FUNDING FOR THE LIBYA RESPONSE IN FY 2017¹

IMPLEMENTING PARTNER	ACTIVITY	LOCATION	AMOUNT
USAID/OFDA²			
Implementing Partners (IPs)	Health, Humanitarian Coordination and Information Management	Countrywide; Benghazi, Misrata, Sabha, Tripoli	\$1,475,000
WHO	Health	Sirte	\$1,000,000
TOTAL USAID/OFDA FUNDING			\$2,475,000
STATE/PRM			
IPs	Food Assistance, Health, Protection, Relief Commodities, Shelter and Settlements, WASH	Countrywide	\$6,600,000
UNHCR	Capacity-Building, Cash Assistance, Health, Protection, Relief Commodities	Countrywide	\$9,200,000
TOTAL STATE/PRM FUNDING			\$15,800,000
TOTAL USG HUMANITARIAN FUNDING FOR THE LIBYA RESPONSE IN FY 2017			\$18,275,000

USG HUMANITARIAN FUNDING FOR THE LIBYA RESPONSE IN FY 2016

IMPLEMENTING PARTNER	ACTIVITY	LOCATION	AMOUNT
USAID/OFDA²			
IP	Health	Benghazi, Misrata, Sabha, Tripoli	\$1,150,311
IOM	Logistics Support and Relief Commodities	Al Jabal al Akhdar, Al Jabal al Gharbi, Al Wahat, Az Zawiyah, Benghazi	\$1,000,000
TOTAL USAID/OFDA FUNDING			\$2,150,311
STATE/PRM			
IP	Food Assistance, Health, Protection, Relief Commodities, Shelter and Settlements, WASH	Countrywide	\$4,900,000
UNHCR	Capacity-Building, Cash Assistance, Health, Protection, Relief Commodities	Countrywide	\$3,000,000
TOTAL STATE/PRM FUNDING			\$7,900,000
TOTAL USG HUMANITARIAN FUNDING FOR THE LIBYA RESPONSE IN FY 2016			\$10,050,311
TOTAL USG HUMANITARIAN FUNDING FOR THE LIBYA RESPONSE IN FY 2016–2017			\$28,325,311

¹ Year of funding indicates the date of commitment or obligation, not appropriation, of funds.

² USG funding totals represent actual committed amounts as of December 1, 2017.

³ In addition, PRM contributed \$7.2 million to UNHCR for the North Africa region and \$28.6 million to ICRC for operations Africa-wide, which may be used in support of the Libya response. PRM also provided \$2.2 million to IOM to address irregular migration flows through North Africa, including in Libya.

PUBLIC DONATION INFORMATION

- The most effective way people can assist relief efforts is by making cash contributions to humanitarian organizations that are conducting relief operations. A list of humanitarian organizations that are accepting cash donations for disaster responses around the world can be found at www.interaction.org.
- USAID encourages cash donations because they allow aid professionals to procure the exact items needed (often in the affected region); reduce the burden on scarce resources (such as transportation routes, staff time, and warehouse space); can be transferred very quickly and without transportation costs; support the economy of the disaster-stricken region; and ensure culturally, dietary, and environmentally appropriate assistance.
- More information can be found at:
 - USAID Center for International Disaster Information: www.cidi.org or +1.202.661.7710.
 - Information on relief activities of the humanitarian community can be found at www.reliefweb.int.

USAID/OFDA bulletins appear on the USAID website at
<http://www.usaid.gov/what-we-do/working-crises-and-conflict/responding-times-crisis/where-we-work>