Humanitarian situation continues to deteriorate as a result of the ongoing-armed clashes that started on 4 April in the south of Tripoli. As of the latest IOM-DTM report (30 May), an estimated 90,500 have been forced to flee their homes. Out of which 51% are females. While most of the IDP families are staying in private accommodation, over 3,900 IDPs are hosted in 47 different collective shelters in various municipalities. Unconfirmed numbers of individuals remain trapped in the conflict-affected areas including nearly 3,300 migrants and refugees in detention centers, out of which 396 are women and girls held in deplorable and unsafe conditions. Recent joint protection rapid needs assessment conducted in Tripoli indicates the general lack of safe places, privacy, insecurity and harassment as the major safety concerns for women and girls. Overcrowded shelters shared by both family and non-relatives have been reported. Similar issues are also highlighted in the rapid needs assessment conducted Zliten which continue to expose women and girls at risks of GBV. As the ongoing conflict escalates, women and girls continue to face not only restrictive movements in Tripoli but also exposed to kidnapping and sexual exploitation and abuse. The joint protection needs assessment points to increased cases of sexual violence perpetrated by militants against non-Libyans especially those from Chad, Eriteria and Iraq. While GBV risks are considerably high, the recent rapid needs assessment indicate that fewer community members are aware of available GBV services.

In the last two months, GBV partners including UNFPA and its implementing partners (El Saffa, PSS Team and Albayyan), IRC, IMC and CESVI have provided key GBV related services in the collective shelters, urban areas and IDP camps. These services include, clinical management of rape, emergency GBV case management, psychosocial support and dignity kits for women and girls. GBV partners have continued to conduct safety audits to identify key GBV risks and provide recommendations to different sectors to ensure GBV risk mitigation. To date a total of 4,400 individuals have been reached with GBV related interventions.
Emerging needs

- 15,000 displaced women are in need of dignity kits
- An estimated 51% of the displaced individuals are females. Most women and children are traumatized by the ongoing conflict in need of some form of psychosocial support including 400 women are at risk of sexual violence and in need of safety and protection.
- Lack of adequate safe spaces/women and girls friendly spaces to provide individualized case management and PSS for displaced IDPs and migrants
- Absence of integrated Messages on available range of services provided by humanitarian actors targeting displaced populations including migrants and refugees.

GBV response and prevention activities

a) Provision of emergency GBV case management and psychosocial support through mobile teams in collective shelters, urban areas and the CDCs.

UNFPA (with its local partners Elssafa, Albayan and PSS Team) and the International Rescue Committee (IRC) continue to provide psychosocial support services for internally displaced persons in Tripoli. During this reporting month, individual counseling services were provided to 71 individuals in 14 locations (Abdallah Alzahmoul school, Hotel 17 February, Alrazi school, Alrahma clinic – Tajoura, Alghamini school, Abusalim Municipality, Tourist resort-Tajoura, Abi der Elghafar school, Omar ben Alkhatab school, Albader school, Tarek ben ziad school, Trucks company, Ahmed Ben Shatwan, Abu madi mosque and Female Student Hostel/Dorms Tripoli University). Furthermore 47 individuals were provided with GBV specialized services in 7 locations (Alrazi school, Alrahma clinic – Tajoura, Abdallah Alzahmoul school, Tarek ben ziad school, Abu madi mosque, Alasmaa school and Om Amara school)

b) Mitigating GBV risks through regular safety audits at the collective shelters housing IDPs

During this reporting period, the International Rescue Committee (IRC) and the International Medical Corps (IMC) conducted safety audit in Janzour IDP camp which have shown a general lack of privacy in most of the houses, absence of community based safety system, lack of health facilities within the camp, forcing women to seek male accompaniment to access medical services outside the camp. Furthermore, safety audits conducted in Shahada Alzaima and Al Razi collective shelters. Key GBV risks associated with access to WASH facilities were identified and recommendations shared with the WASH sector to address identified potential GBV risks.
Only one women centre run by UNFPA exists in Tripoli. One women centre cannot serve the needs of women and girls in Tripoli thus, limiting women and girls opportunities to socialize, rebuild their social networks, build trust with GBV partners and seek support and care incase they experience violence.

Dignity kits stocks fewer than the demand as we continue to witness and increase in number of displaced women and girls.

General Information dissemination on available services is still low among the displaced populations including migrants and refugees.

Lack of funding to upscale current GBV services (Clinical management of rape, emergency GBV case management and psychosocial support, risk mitigation and awareness raising) to outskirts of Tripoli where populations have been displaced such as Zliten, Al Khums, Zliten, Msalata, Tarhouna Zinten, Jadu, Mezda, Bani Walid and Sabrata.

### GBV Response and prevention gaps
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- Dignity kits stocks fewer than the demand as we continue to witness and increase in number of displaced women and girls.
- General Information dissemination on available services is still low among the displaced populations including migrants and refugees.
- Lack of funding to upscale current GBV services (Clinical management of rape, emergency GBV case management and psychosocial support, risk mitigation and awareness raising) to outskirts of Tripoli where populations have been displaced such as Zliten, Al Khums, Zliten, Msalata, Tarhouna Zinten, Jadu, Mezda, Bani Walid and Sabrata.

### Key Advocacy messages
- Recent protection needs assessments highlights increased incidents of sexual violence perpetrated against non–Libyans by militants. The GBV sub-sector recommends issuance of communiqué to both parties involved in conflict to hold accountable militants perpetrating incidents of sexual violence against civilians.
- Ensure that civilians and migrant women and girls are able to physically move away from conflict areas. All parties must commit to providing warning and ensuring humanitarian corridors for women and girls and other civilians out of affected areas.
- Immediate health, shelter as well as protection needs have to be addressed to save lives. Access to short and long term solutions for safe shelters should be based on the principle of non-discrimination for both Libyans and non-Libyans.