

Murzuq Rapid Situation Overview

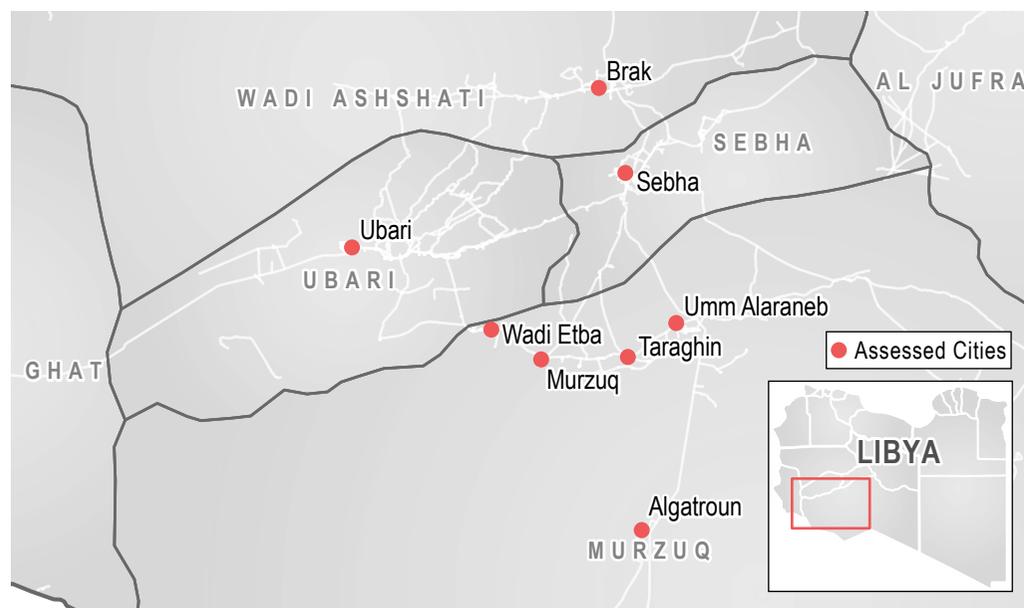
Libya, 30 August 2019

BACKGROUND

Since early 2019, tensions between the Alahali and Tebu communities in the Libyan city of Murzuq have grown progressively more severe, leading to numerous outbreaks of violence. The conflict escalated to unprecedented levels starting on 4 August 2019, when a series of airstrikes sparked heavy urban fighting and mass displacement. As of 27 August, the conflict had eased slightly, but an estimated 17,320 individuals,¹ or nearly 60% of Murzuq's population,² had fled to cities throughout Libya, leaving only small numbers of residents in some areas of the city.

To inform response plans, between 23 and 27 August, REACH assessed the humanitarian situation across seven cities and towns in south Libya that had received large numbers of internally displaced persons (IDPs) from Murzuq, as well as conducting two supplementary interviews in Murzuq itself. Data was collected through 25 multi-sector key informant (KI) interviews conducted with community leaders, tribal council members, medical professionals and others. The information in this document refers only to the situation during the data collection period and should be considered indicative only.

Map 1: Assessed areas⁵



KEY FINDINGS

- **Displacement from certain mainly Alahali areas of Murzuq has been widespread**, with only small numbers of residents remaining in these areas. Tebu neighbourhoods also witnessed large-scale, though not complete, displacement, and KIs report that **Tebu families are slowly beginning to return to their homes**.
- **Displacement flows were reportedly determined by a household's community identity**, with both Alahali and Tebu households fleeing to areas controlled by their own or allied communities.
- In several assessed cities, **an estimated 15-30% of recent arrivals from Murzuq had reportedly moved on to other destinations, most often the city of Sebha**. Many of these new arrivals had left due to difficulty finding affordable food, shelter, healthcare, and other services in the smaller towns and villages that were their first points of arrival.
- Movement between cities prompted particular protection concerns for Murzuq IDPs due to armed group activity and *ad hoc* checkpoints between cities. KIs reported that **frequent security incidents had taken place at these checkpoints**, including robbery, detention, kidnapping, sexual harassment, and theft of identity papers.
- **Shelters and infrastructure in Murzuq sustained significant damage** at the height of the conflict, with civilian homes and businesses reportedly being looted and burned by armed groups. Many Murzuq IDPs throughout South Libya continued to struggle with **overcrowded shelters** and a shortage of available housing options.
- KIs in all assessed cities reported that **additional strain had fallen on their communities due to the influx of Murzuq IDPs**. The increased difficulty of finding core items in marketplaces was widely mentioned, as was the lack of support for local families who were hosting IDPs. In some cities, furthermore, **the amount of clean drinking water available was reportedly insufficient to support both the local and IDP populations**.
- All KIs reported that operational healthcare facilities were present in their cities, though many of these, including Murzuq Hospital itself, were **poorly supplied and/or did not have the necessary facilities** to be able to deal with a large influx of IDPs with complex health needs.
- Murzuq IDPs in all assessed cities reportedly had a strong preference for a mixed aid package including **both in-kind aid and cash transfers**.

¹ IOM DTM, "Libya – Murzuq Flash Update", 27 August 2019.

² Based on population estimates updated in 2018 by the Libyan Bureau of Statistics and UNFPA.

FINDINGS BY SECTOR

Displacement

- **Displacement from certain areas of Murzuq**, mainly located in Alahali neighbourhoods, **has been widespread**, with only small numbers of residents remaining in these areas. Tebu neighbourhoods also witnessed large-scale, though not complete, displacement, and KIs report that **Tebu families are slowly beginning to return to their homes**.
- IDPs from Murzuq were primarily displaced to the surrounding cities and towns of **Wadi Etba, Sebha, Ubari, Taraghin, and Algatroun**.³ Smaller groups had been displaced to Benghazi, Brak, Jufra, and a number of smaller towns throughout south Libya, including Umm Alaraneb, Zuwaila, Alghuraifa, Fungul, Jaizu, and Adalaim.
- **Displacement flows were reportedly determined by a household's community identity**, with both Alahali and Tebu households fleeing to areas controlled by their own or allied communities. Most IDPs in Brak and Taraghin were reportedly Alahali; other assessed cities reported a mix of Alahali and Tebu arrivals.
- KIs in some areas, particularly Sebha, expressed concern that **certain areas of displacement might be unsafe** for some Murzuq IDPs due to ongoing intercommunal tensions.
- In Wadi Etba, Ubari, Brak, Taraghin, and Umm Alaraneb, **an estimated 15-30% of recent arrivals from Murzuq had reportedly moved on to other destinations, most often aiming for the city of Sebha**. Many of these new arrivals had left due to difficulty finding affordable food, shelter, healthcare, and other services in the smaller towns and villages that were their first points of arrival.
- KIs in assessed cities felt that continued displacement in south Libya would most likely stem from a reignition of the conflict in Murzuq city itself. Although no KIs directly reported concerns that the conflict would spill over into surrounding cities, this situation will require close monitoring, particularly in areas which have seen an influx of both Alahali and Tebu IDPs.

Freedom of Movement

- Even in areas of Murzuq that were reported to be largely empty, it is probable that **small numbers of civilians had remained**, whether due to conflict-related dangers, a lack of resources, a lack of mobility, a desire to protect household assets, or fear of reprisals if they did leave.⁴ Those who stayed were reportedly at elevated risk of armed attack or detention.
- As of 30 August, key roads leading to Murzuq had partly reopened.⁵ However, KIs reported that **travel into and out of the city remained heavily restricted** due to armed group activity and roadblocks. Most Alahali IDPs, in particular, were able to access only a single road out of

Murzuq leading to Wadi Etba, which was shelled and targeted by sniper activity at the height of the conflict.

- Further protection concerns were associated with Murzuq IDPs' efforts to travel among southern cities in the form of armed group activity and *ad hoc* checkpoints between cities. KIs reported that **frequent security incidents had taken place at these checkpoints**, particularly those on the road between Ubari and Sebha, including robbery, detention, kidnapping, sexual harassment, and theft of identity papers. Instances were reported of both Alahali and Tebu IDPs being harassed at or denied passage through certain checkpoints due to their community identity.

Shelter

- Shelters and infrastructure in Murzuq sustained **significant damage** at the height of the conflict, with civilian homes and businesses being looted and burned by armed groups, particularly in the neighbourhoods of Addisa, Alhurriya, and Alqurudh.⁶
- Across most assessed cities, KIs estimated that 10-30% of recently displaced Murzuq IDPs were being **hosted by family or friends**—a lower percentage than in many other Libyan displacement crises—excepting Taraghin and Umm Alaraneb, where 70-80% of IDPs who had remained were being hosted. A further 5-30% of Murzuq IDPs across all assessed cities were **renting** their own accommodation, a similar percentage as for the non-displaced populations in these areas.
- Significant percentages of Murzuq IDPs were estimated to be living in **ad hoc collective shelters** in Ubari (20%), Wadi Etba (30%), and especially Brak (80%), where residents and local authorities had reportedly launched an initiative to convert a public school to temporary IDP housing. Some collective shelters in Wadi Etba had already closed as their residents relocated to other areas or cities.
- Many Murzuq IDPs continued to struggle with **overcrowded shelters** and a shortage of available housing options. According to KI estimates, more than half of those displaced to Umm Alaraneb, Taraghin, Wadi Etba, and Ubari were living in overcrowded conditions. KIs highlighted **an increased need for basic household items, particularly mattresses and blankets**, to meet the needs of the newly displaced.
- **Electricity shortages remained severe** across south Libya for reasons unconnected with the conflict in Murzuq, including high temperatures and deteriorating infrastructure. KIs across all assessed cities reported an average of 15-20 hours of power cuts per day, with electricity weak even when present. These power cuts had impacted households in many other ways, leading to shortages of generator fuel, causing large appliances such as water pumps to break down, and limiting the operation of mobile networks.

³ IOM DTM, "[Libya – Murzuq Flash Update](#)", 27 August 2019, corroborated by KI data collection.

⁴ OCHA, "[Libya: Communal Violence in Murzuq Flash Update](#)", 14 August 2019.

⁵ OCHA, "[Libya: Communal Violence in Murzuq Flash Update](#)", 30 August 2019.

⁶ Libya Protection Sector: "Protection sector update: Murzuk clashes", 20 August 2019.

Food Security

- Food security in Murzuq had become problematic due to **widespread closures of marketplaces and food stores throughout the city**. KIs confirmed that the city's remaining population had become partly reliant on food aid for their day-to-day consumption.
- In all other assessed cities, Murzuq IDPs remained **largely reliant on market purchases** for their food, whether with cash, with cheques, or, more rarely, with credit. More severe coping strategies, such as begging, borrowing, or a reliance on zakat, were not reported.
- Except in Murzuq, **bread appeared to be ubiquitous and bakeries remained open in all assessed cities**. Bread was reportedly 50% more expensive in both Taraghin and Umm Alaraneb compared to the median South Libya price calculated by the Joint Market Monitoring Initiative (JMMI) in August 2019.⁷ Prices in all other assessed cities were more closely aligned with the JMMI figures.
- KIs in all assessed cities reported that **additional strain had fallen on their communities due to the influx of Murzuq IDPs**. The increased difficulty of finding core food items was widely mentioned, as was the need to support local families who were hosting IDPs. Although bakeries were reportedly functioning adequately, KIs in Wadi Etba, Ubari and Taraghin recommended supporting bakeries with fuel and subsidised flour to prevent the price of bread from increasing.

Cash and Markets

- **Most marketplaces, food stores, and bakeries in Murzuq city**, particularly in Alahali neighbourhoods, **remained closed**, though small numbers of informal traders continued to provide key commodities at substantial price mark-ups. Some households remaining in the city were forced to travel up to two hours through highly insecure settings to reach other cities with operational markets.⁸
- In other assessed cities, **markets remained functional and accessible, though under significant strain**. In Wadi Etba and Ubari, KIs estimated that only 25-50% of the normal number of traders were operating; in Algatroun and Sebha, this figure rose to 50-75%.
- KIs reported **widespread barriers to financially accessing markets** in all assessed cities, most often because products had become too expensive to afford or because households did not have a means of payment, generally in the form of sufficient cash.
- In all assessed cities, KIs consistently reported that **all 11 key food and non-food items** included in this assessment **were available to purchase in stores and marketplaces**, though sometimes too expensive for households to afford. The only reported shortages were of bottled water in Algatroun and LPG (cooking fuel) in Taraghin. However, KIs also noted that **basic household items**, particularly mattresses, blankets, cooking pots, and utensils, **were becoming**

increasingly scarce due to high demand from IDPs.

- Across the assessed area, KIs mentioned that **cash and cheques were the main payment modalities used** in day-to-day transactions. Almost no KIs reported that credit, debit, or prepaid cards could be consistently used. KIs in all cities apart from Ubari reported that cash had become more difficult to access than usual during the period of the Murzuq conflict, despite the fact that Sebha had recently received a new shipment of cash from eastern Libya on 5 August.

Water, Sanitation, and Hygiene

- In all areas assessed, **the most common drinking water source by far was the public network**, followed distantly by protected wells and bottled water. Though there are ongoing problems with the public water supply in south Libya connected to the region's frequent power outages,⁹ it was reported to function adequately in all assessed cities for at least 4-6 days per week.
- KIs generally stated that the water from the public network was fine to drink, with the exception of those in Taraghin and Sebha, where both the taste and odour of the water were perceived as foul. KIs in Sebha and Brak explained that **the public water system was outdated** and the water was in need of desalination.
- KIs in Murzuq, Sebha, Taraghin and Umm Alaraneb stated that **the amount of clean drinking water available was not sufficient to support both the local population and the new influx of Murzuq IDPs**. In Murzuq itself, KIs unanimously highlighted the fact that a lack of clean drinking water affected almost the entire population, partly due to **water pumps failing as a result of electricity shortages**.
- **Trash disposal services continued to function** in all cities aside from Murzuq and Sebha.

Education

- Schools in Murzuq and surrounding cities had been shut for the summer holidays while the clashes were ongoing. **Some school buildings in Murzuq reportedly sustained damage** from shelling and armed group activity; others had been **used as watchtowers for snipers**, with their facilities exploited and heavily damaged by armed groups. These schools will need heavy cleaning and maintenance, particularly to windows, doors, and toilets, before students can return.
- KIs in Ubari, Wadi Etba, and Brak mentioned that **several local schools had been converted into collective shelters** for displaced families from Murzuq, in particular a large school in Brak that housed the majority of Murzuq IDPs in the city. These facilities may be unavailable for children's use when the school year begins again.

⁷ Libya CWG and REACH, "[Libya Joint Market Monitoring Initiative](#)", 1–9 August 2019.

⁸ IOM DTM, "[Libya - Murzuq Rapid Assessment](#)", 12 August 2019.

⁹ REACH, "[Effects of the Tripoli Conflict on South Libya](#)", June 2019.

Table 1: Functionality of health services in assessed cities based on reports from medical professional KIs

● Service currently available; ● Service currently available but with reduced functionality; ● Service rendered unavailable by conflict; ● Service not generally provided. No data available for Sebha.

	Emergency care	Minor surgery	Major surgery	Diagnostics	Imaging	Pharmacy services	Immunisations	Blood transfusion	Antenatal care	Delivery services	Tuberculosis treatment	Diabetes treatment	Cardio-vascular services	Respiratory services	Mental health services
Murzuq	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●
Algatroun	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●
Brak	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●
Taraghin	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●
Ubari	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●
Umm Alaraneb	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●
Wadi Etba	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●

- Displaced students from Murzuq had reportedly faced **difficulty registering for their secondary certificate exams** in their areas of displacement.¹⁰

Health

- All KIs reported that operational healthcare facilities were present in their cities, though many of these, including Murzuq Hospital itself, were **poorly supplied and/or did not have the necessary facilities** to be able to deal with a large influx of IDPs with complex health needs. See **Table 1** above for a breakdown of the health services provided in each city at the time of data collection.
- Access to health facilities was in some cases dependent on community affiliation.** At the height of the conflict, Alahali households remaining in northern Murzuq were unable to access most of the city's health facilities, as they had been taken over by armed groups and access was limited only to combatants; they therefore relied largely on *ad hoc* clinics set up in private homes, with care often provided by civilians with improper training or equipment. Tebu IDPs, meanwhile, relied largely on Taraghin Hospital and on private clinics in southern Sebha, but were often unable to access Sebha Medical Centre due to intercommunal tensions.

- Medical professionals in Murzuq, Algatroun, Brak, Taraghin, Ubari, and Umm Alaraneb all reported **shortages of common medications and medical supplies**, in particular insulin, chronic disease medicine, vaccinations, sterilisation kits, surgical instruments and paediatric equipment.
- On 17 August, the Bendelwah Primary Health Centre in northern Murzuq was **shelled by armed groups**, causing damage to the facility and leading to the evacuation of all staff and patients to a facility in Tasawah. The Bendelwah PHC is not currently operational or accessible to civilians.¹¹
- KIs across the assessed area reported that the top three health needs were emergency care, treatment for chronic diseases, and skilled obstetric care.

Protection

- KIs in Murzuq confirmed a number of **security incidents**, including airstrikes, killings, arrests, robberies, property destruction, and intercommunal disputes. Additionally, there were reports of robberies and extortion against Murzuq IDPs in Sebha, as well as against those traveling along the major roads between cities in south Libya (see Freedom of Movement).

¹⁰ OCHA, "Libya: Communal Violence in Murzuq Flash Update", 30 August 2019.

¹¹ Libya Health Sector, "Flash Update: Monitoring Violence Against Healthcare", 17 August 2019.

- Travel between displacement sites was frequently reported as dangerous, as IDPs risked being arrested or robbed at checkpoints between cities. In addition, the **lack of security in collective shelters** exposed IDPs to further risks, including theft and assault.
- Some IDP households reportedly fled their homes without **documentation** or had it stolen during their displacement, complicating their efforts to gain access to services in their current locations.
- **No KIs reported that they had observed tensions between Murzuq IDPs and local populations.** This may, however, be a symptom of the fact that most IDPs who stayed in South Libya were careful only to travel to areas where they had preexisting community support (see Displacement).
- Many IDPs were reported to be under **intense psychological stress** as a result of their experiences and general lack of security. KIs in Ubari and Algatroun stated that **women were in need of medical support**, especially obstetric care, as well as psychosocial support. Across all cities, KIs consistently mentioned that **children were experiencing psychological distress** and lacked psychosocial support to help them cope.

✦ Priority Needs and Assistance

- Across all assessed cities, the top reported need for displaced households from Murzuq was **safety and security**. In particular, KIs highlighted the need to protect families from armed groups as they moved between IDP sites and cities.
- **Shelter** was the second highest priority, reinforcing the need for decent housing options and adequate space to house all new arrivals.
- **NFIs** and **health** were tied in third place. KIs emphasized the lack of adequate medical supplies and equipment in health facilities, as well as a need for basic household NFIs that were increasingly difficult to find on markets, including mattresses, blankets, cooking pots and utensils, and hygiene items.
- Murzuq IDPs in all assessed cities reportedly had a strong preference for a mixed aid package including **both in-kind aid and cash transfers**.

About REACH

REACH, a joint initiative of IMPACT Initiatives, ACTED, and UNOSAT, facilitates the development of information tools and products that enhance the capacity of aid actors to make evidence-based decisions. In Libya, REACH operates fully under the oversight of ACTED, and its activities are conducted in cooperation with inter-agency aid coordination mechanisms. For further information on this document, contact libya@reach-initiative.org.