

LIBYA: Tripoli Clashes

Situation Report No. 25

As of 24 May 2019 (covering 17 – 24 May)

This report is produced by OCHA Libya in collaboration with humanitarian partners.

HIGHLIGHTS

82,300

people internally displaced by ongoing hostilities

135

civilian casualties confirmed, including 31 civilian fatalities

45,600

people assisted with some form of humanitarian assistance since the onset of crisis

\$10.2M

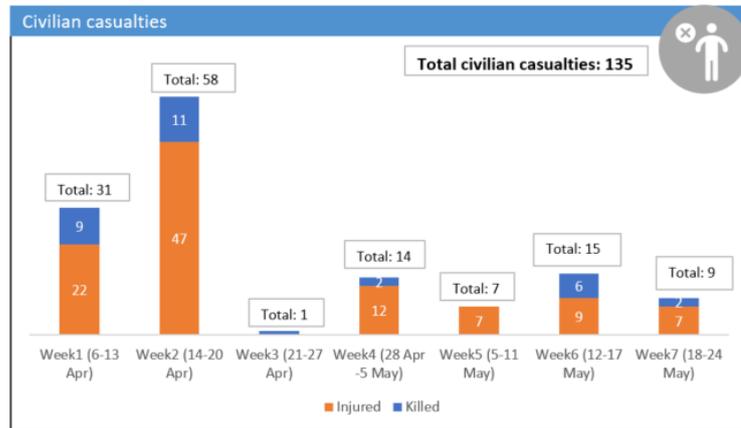
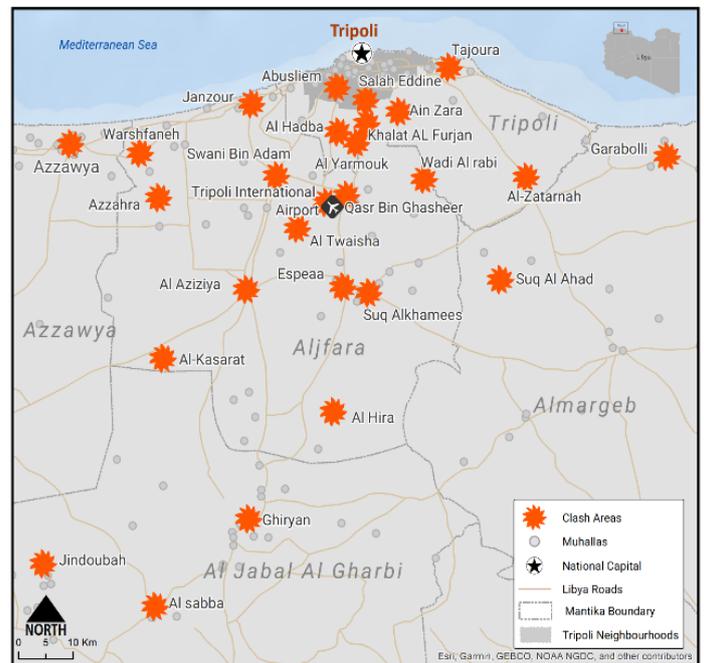
funding required for Tripoli Flash Appeal

SITUATION OVERVIEW

The humanitarian situation continues to deteriorate as a direct result of the armed conflict in and around Tripoli.

135 civilian casualties, including 31 fatalities, have now been confirmed since the beginning of clashes.¹

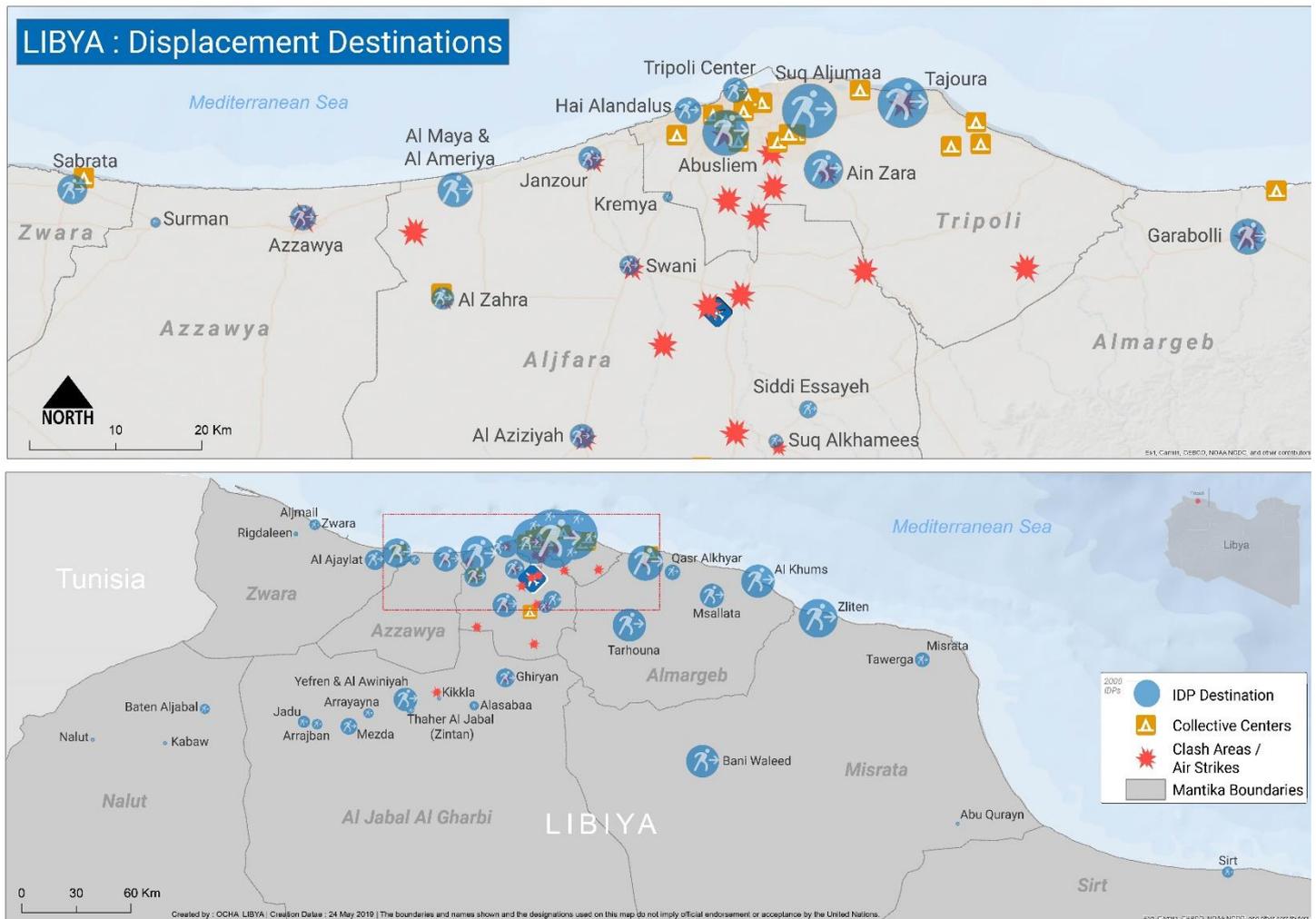
Health personnel and facilities continue to be impacted by the armed conflict, in violation of International Humanitarian Law (IHL). **Two health workers were killed and three others injured** on 23 May when two clearly-marked armoured ambulance vehicles were struck in the Triq Al Matar area of Tripoli. One ambulance was struck, immediately killing a doctor on board. A second ambulance, dispatched to recover casualties from the first attack, was subsequently also struck by shelling, killing one paramedic and injuring two others and a doctor on board. To date, 6 health workers have been killed, 7



health workers have been injured, 14 ambulances have been impacted and 2 health facilities have been impacted/evacuated as a result of armed conflict. These incidents further hamper the ability of already

overstretched health services to provide vital assistance to civilians, including those injured as a result of armed conflict. **IHL obligates all parties to take constant care to spare civilians and civilian objects, including medical personnel and assets. Deliberate attacks on clearly marked medical transports constitute war crimes under IHL.**

¹ These figures include only cases that could be individually verified, and so must be considered a minimum. Last update from Health Sector received 24 May 2019.



During the overnight hours of 21-22 May, indiscriminate shelling was reported in a residential area in Salahuddin district. On the morning of 22 May, indiscriminate shelling was reported in a residential area of Tajoura. No civilian casualties were reported as a result of these incidents. After peaking in mid/late-April, the instances of **random shelling of residential areas**² (with no ostensible military target nearby) had in recent weeks abated. This has coincided with the increase in precision airstrikes carried out by UAV. Humanitarians continue to remind parties of their obligations under international humanitarian law to take all feasible measures to avoid civilian harm, and **call on all parties to refrain from using explosive weapons – including by aerial bombardment or shelling – in populated areas, given their likely indiscriminate effect.**

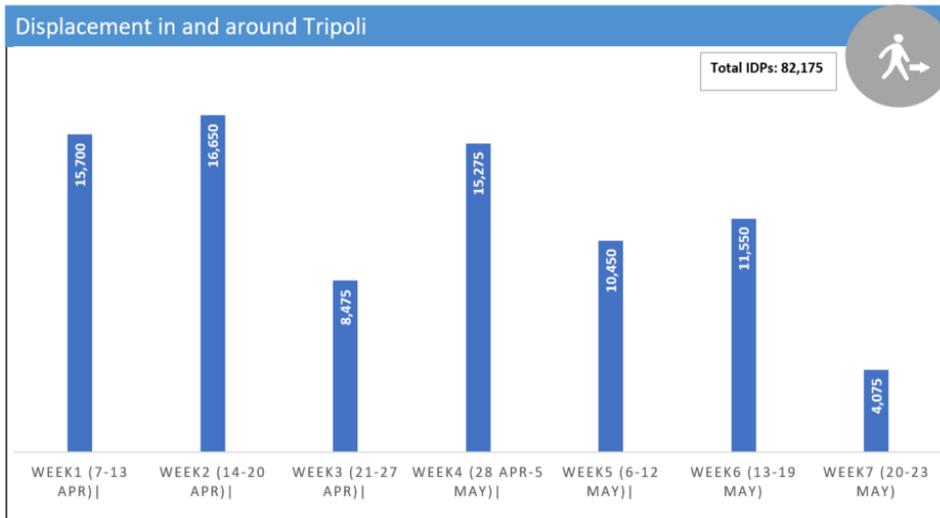
According to latest DTM-IOM figures, at least 82,300 individuals have fled their homes since the start of the conflict. Of these, approximately half are believed to be

children. The rate of displacement has decreased somewhat since the start of the conflict, yet armed conflict continues to drive more and more families from their homes. 47 collective shelters are now in operation, estimated to house some 800 IDP families (approximately 4,000 individuals), with the majority of IDPs staying in urban areas with family/friends or in rented accommodation, mainly in urban areas of Tripoli. Many other IDPs have moved to areas along the coastal line of Western Libya and the Nafusa mountains. **IDP destinations, including collective shelters, are themselves often close to armed clashes**, thus risking secondary displacement and meaning that many IDPs and their host communities remain at risk.

Humanitarian actors estimate that **over 100,000 men, women and children remain in immediate frontline areas**, with over 400,000 more in areas directly impacted by clashes (within a one kilometre radius of the front). Concerns are high for civilians unable to leave these

² Indiscriminate shelling of densely populated urban areas in Ain Zara, Al Twaisha, Abusliem, Suq al Jumaa, Ghararat and Hadbaa

neighbourhoods occurred from 16-27 April, with numerous civilian casualties and damages to civilian property and infrastructure reported.



present conflict, such incidents demonstrate the **vulnerability of the water supply upon which millions of Libyans rely**. The MMRP supplies more than 60% of water to the Libyan people. Even before this incident, WASH partners had reported that the water distribution by the MMRP to Tripoli has reduced by 37% and to Libya as a whole by 25% since the start of the conflict. This is due to the fact that regular planned maintenance has not taken place due to the conflict. Electricity cuts due to damaged infrastructure have also resulted in irregular supply of water in various locations in and around Tripoli.

areas, as conditions deteriorate and emergency services are unable to get through. Water and electricity cuts are being reported from frontline areas, while market access and availability of food is very limited. Refugees and migrants in urban areas are especially at-risk, as they face discrimination in accessing collective shelters and other services. **Humanitarian actors continue to appeal for a humanitarian truce to allow civilians trapped in conflict areas to move freely to safer areas and for assistance to reach those in urgent need.**

Humanitarian actors are extremely concerned for the safety and wellbeing of nearly **3,400 refugees and migrants trapped in ten detentions centres (DCs) exposed to, or in close proximity to, the fighting**. All individuals inside these centres are at imminent risk, as they have no means of seeking safety on their own. In addition to the risk posed by armed clashes, access to food, water and healthcare is severely restricted at these facilities as a result of the conflict. Humanitarian actors continue to **call for detained refugees and migrants to be released and provided with safe shelter** until their asylum claims can be processed or they can be provided with safe repatriation assistance for reunification with their families.

On 20 May, the Humanitarian Coordinator issued a statement condemning **the deliberate cut off of water supply to Tripoli** and other north-western cities, potentially impacting upwards of 2 million people, by an armed group who stormed a water control station of the Man-Made River Project (MMRP) in Jabal al-Hasawna the previous day. On 21 May, the water supply to Tripoli was restored. This was the latest in a series of similar incidents in recent years whereby the same armed group has used the threat of cutting off water supply to Tripoli unless authorities meet its demands, which reportedly revolve around the release of an arrested family member of the group's leader. While not directly related to the

Humanitarian actors are also concerned that responsible local authorities are not able to access primary landfill sites in conflict affected areas, leading to a build-up of solid waste in Tripoli. With the summer season approaching this will lead to foul smells and **a favourable environment for vector breeding**.

A DTM-IOM rapid assessment of market access in conflict affected areas in and around Tripoli found that food security varies significantly according to proximity to clashes, with the area of Kahllet Al Furjan and Swami Bin Adam municipality being the worst affected locations. Overall, 26 per cent of markets in assessed areas were reported to be closed, while insecurity directly prevented residents from accessing markets in Al Aziziya, Salaheddin, Qasr Bin Ghasheer and Suq Al Khamis. Another recent assessment, conducted by WFP, noted that the prices of fresh vegetables has increased by 20 per cent in Tripoli markets since the start of the conflict, due in part to the fact that **agricultural areas to the south of Tripoli have been cut off behind frontlines**, while prices for other items such as milk and cooking oil have also increased. Prices of key staples such as bread, rice and couscous have remained stable. Both DTM-IOM and WFP assessments note that increases in food prices may be in some part due to increased demand during the month of Ramadan.

The Tripoli port was temporarily closed on 19 May, reopening the following day. Reportedly, the port was closed due to the arrival of 'special cargo'. During the reporting period, the LNA also announced a 'total maritime ban' on ports in the western region although the LNA is not thought to have capacity to enforce such a ban. **Disruption of port operations could severely hamper humanitarian response**. Humanitarian partners continue to express concern over lengthy delays and inconsistencies in the import and customs clearance of humanitarian cargo entering Libya and call for the fast-

tracking of aid shipments to ensure timely delivery to affected populations.

The impact of clashes is being felt outside of Tripoli, as more IDPs arrive in other areas and **disruptions in humanitarian access and in transportation of essential goods such as food and fuel exacerbate already existing scarcities**. Trucks carrying humanitarian assistance targeting populations in areas under LNA control, particularly in the east, continue to be denied permission by GNA-affiliated authorities to move from Tripoli. Lack of cash liquidity is also exacerbating the need of affected populations, especially in the south. The LNA-imposed no-fly zone in the south has interrupted distribution of cash to banks in the south outside of Sebha, impacting the ability of populations already facing scarcities to obtain food and other basic goods.

Areas south of Ayn Zara, Khala, Azizya, Wadi Rabiya'a and Qasr Bin Ghashir remain largely inaccessible to humanitarian actors due to fighting and random shelling. OCHA is supporting **humanitarian access** through establishment of a new reporting mechanism, whereby humanitarian actors will be able to report access constraints as they transpire to OCHA who will then engage with relevant parties to alleviate, or mitigate the impact of, reported constraints.

Humanitarian partners continue to provide assistance, where access allows. Over 45,600 people have received assistance since the start of the conflict. However **insufficient access and funding are impeding response operations**.

HUMANITARIAN NEEDS AND RESPONSE

Food Security

 **17,500**

people assisted with some form of humanitarian assistance since the onset of crisis

 **2,570**

people assisted in detention centres

 **380**

people assisted in collective centres

Behind the numbers: response and constraints

Under the Tripoli Flash Appeal, the Food Security Sector (FSS) foresees 100,000 new IDPs and 6,000 Migrants/Persons of Concern in need of food assistance.

During the reporting period, **FSS partners distributed food assistance to approximately 1,600 IDPs** in Azzawya, Garabolli and Suq Al Jumaa through the Rapid Response Mechanism (RRM). FSS partners also provided food assistance to 125 Sudanese refugees and migrants in urban settings in Sirrej area of Tripoli, in coordination with the Sudanese embassy in Tripoli. FSS partners face limited access to IDPs in Bani Waleed, as well as in reaching refugees and migrants in need of food assistance in conflict-affected DCs, where the quantity and quality of food reaching refugees and migrants is inconsistent. Municipalities directing requests for food assistance directly to FSS partners, instead of channeling through the relevant Ministry for IDPs, is creating coordination challenges.

Looking ahead: priorities and way forward

The number of IDPs in need of food assistance in 29 identified collective shelters is presently under verification. At present, approximately 200 IDPs in collective shelters in Hay Al Andalus and 1,800 IDPs in urban settings in Gharyan and Tajoura are targeted for food assistance. Approximately **2,300 refugees and migrants in Triq Al Sika, Al Sabaa, Janzour, Abusliem, Gharyan and Tajoura DCs are in need of food assistance**, as regular food distribution by local authorities has been disrupted due to the conflict. Consultation with NGO partners is ongoing to assist the caseload in DCs and FSS is conducting a mapping exercise to capture what assistance is being provided in DCs already.

1,600

IDPs reached with food assistance during reporting period

 Health

 **13,900**

people assisted with some form of humanitarian assistance since the onset of crisis

 **315**

people assisted in detention centres

 **539**

people assisted in collective centres

Behind the numbers: response and constraints

Armed clashes and airstrikes continued during the week as parties to the conflict continue fighting. The total number of casualties (civilian and non-civilian) during the week was 438 (50 dead and 388 wounded). This includes 9 verified civilian casualties (2 dead and 7 wounded). The number of casualties continues to increase despite the numerous calls for a humanitarian pause. An average of 63 casualties are being verified every day, warranting the full availability of medical supplies for both first and

second line responders. Additionally, many IDPs are in urgent need of medical assistance due to chronic conditions and disruption to their treatments due to displacement and conflict. **The capacity of health facilities to cope with the current caseload is limited.**

Health Sector partners continue to respond to the crisis by providing regular medical supplies to health facilities and deploying medical teams to primary health care centers and referral hospitals. During the reporting period, WHO surgical teams in Tarhouna and Gharyan performed **31 major surgeries**

and 20 minor surgeries. IOM, IMC and IRC medical teams continue to support four primary health care centers in Tripoli and treated **539 cases during the week.**

Misrata Medical Center and Al Afia hospital in Al Jofra are in need of additional surgical capacity given the increasing number of casualties being received by both hospitals. The capacity of primary health care facilities is limited to cope with the increasing number of IDPs with chronic illnesses. **Access and the security of medical facilities and staff is a major constraint, as field hospitals and ambulance teams are being hampered by indiscriminate shelling and airstrikes.** Additional funding is needed to ensure essential medical supplies are fully available and accessible.

Looking ahead: priorities and way forward

The Health Sector will mobilize additional resources to deploy two surgical teams in Misrata and Al Jofra to address the gaps in the shortage of the health workforce in these locations. The Health Sector will distribute additional medical supplies to the newly identified health centres in Tripoli that are serving the IDPs in order to ensure maximum coverage. **A clear mechanism is required to ensure safe corridors are available not only for the recovery of casualties but also for the safe passage of medical supplies.** Parties to the conflict must uphold their obligations under IHL and refrain from targeting civilians, health facilities and medical personnel.

6
health workers
killed

7
health workers
injured

14
ambulances
impacted

2
health facilities
evacuated

 Protection

 **6,000**

people assisted with some form of humanitarian assistance since the onset of crisis

 **2,780**

people assisted in collective centres

Behind the numbers: response and constraints

Continued armed conflict in and around Tripoli poses continued risk for civilians, including refugees and migrants in urban settings and nearly 3,400 refugees and migrants trapped in DCs exposed to, or in close proximity to, the fighting. During this reporting period, IOM provided health assistance to approximately 400 refugees and migrants in DCs, including **treatment of TB which is present in several DCs**. IOM also carried out protection assessments of vulnerable cases. UNHCR registered 10 (4 female; 6 male) persons from Somalia and verified 155 Persons of Concern (PoCs) at Suq Al Khamees DC. UNHCR verified at the General Departures Facility a total of 21 individuals (4 female; 17 male). On 23 May, IMC provided **medical and humanitarian assistance to 203 refugees and migrants** who were intercepted/rescued by the Libyan Coast Guard and disembarked at Al Khums port. During the reporting period, UNHCR verified at the General Departure Facility (GDF) in Tripoli a total of 21 individuals (4 female; 17 male). Currently, there are 634 refugees and asylum-seekers at the GDF. The group includes 128 women, 109 men and 397 children below the age of 18.

UNHCR and its partners continue protection monitoring activities especially for the most affected groups among Libyans and non-Libyans. The lack of presence of the protection actors in Libya, due to relocation of staff, is affecting the **capacity of the humanitarian community to respond to protection and humanitarian needs**, and to coordinate with Libyan counterparts and local

authorities. Improved protection monitoring activities, including referral systems, are needed, especially in conflict-affected areas and areas of displacement. **Lack of access to conflict affected** areas and areas outside of Tripoli remains a constraint.

Looking ahead: priorities and way forward

A priority moving forward is to support the provision of assistance according to the principle of non-discrimination and impartiality, including **ensuring accessibility for all groups to collective shelters**. The Protection Sector in its area of reasonability will provide guidance and trainings for partners on the ground. The Protection Sector will ensure the inclusion of assistance to specific groups identified as vulnerable in the assessment, including non-displaced groups (recognizing not everyone has the resources/options to flee) and including areas outside of Tripoli which are under-resourced for the current response. Protection monitoring activities will be expanded to better understand the protection risks and to identify vulnerable groups and their needs. The Sector will prioritize the provision of adequate and quality health and protection services. Duty-bearers should facilitate **immediate evacuation of refugees and migrants being held in DCs in conflict areas to safer locations**. International actors should advocate with the Libyan authorities on their obligations and responsibilities towards refugees and migrants in line with IHL and IHRL.

The GDF facility is almost at its full capacity. UNHCR is now planning an evacuation for 30 May.

Gender-Based Violence Protection sub-sector

 **4,400**
people assisted with some form of humanitarian assistance since the onset of crisis

 **1,200**
people assisted in collective centres

Behind the numbers: response and constraints

Increased risk of GBV, particularly **sexual exploitation and abuse**, continues to manifest as a result of ongoing conflict. Decrease in food security, cash liquidity, market access and availability of water and electricity all increase GBV risks. Women and girls traumatized by the ongoing conflict are in need of some form of psychosocial support (PSS) including an estimated 400 women at risk of sexual violence and in need of safety and protection. Non-Libyan

20,000

women and girls in need of dignity kits

women and girls are at greater risk of GBV as non-Libyans in general have fewer shelter options.

During this reporting period, IRC conducted **safety audits** in two collective shelters. Key GBV risks associated with access to WASH facilities were identified and recommendations shared with the WASH Sector to address identified risks. Lack of separate toilets/showers for men and women in collective shelters remains a concern.

UNFPA in collaboration with implementing partners has deployed **mobile teams comprised of specialized social workers and psychologists to provide GBV related services to IDPs in collective shelters and urban settlements**. During this reporting period, the

mobile teams have provided individual counseling services to 48 individuals (40 women; 8 men) in ten collective shelters and urban settings. Furthermore, 10 women were provided with GBV specialized services in 5 collective shelters. In addition, IRC GBV caseworkers continued to conduct emergency GBV case management through mobile teams and remotely (through phone calls) to migrants and refugees in urban settings, Primary Health Centres and collective shelters.

Over 20,000 displaced women and girls are in need of **dignity kits**. As part of the RRM, UNFPA has distributed a total of 640 dignity kits to IDP women and girls in urban settings in Azzawaya, Garabolli and Suq Al Jumaa during this reporting period.

Among identified gaps, only one women's centre, operated by UNFPA, exists in Tripoli, limiting women and girl's opportunities to seek support and care. A recent joint protection rapid assessment conducted in Tripoli indicates low levels of knowledge information about available GBV services. There is a lack of funding to upscale current GBV services to reach IDPs outside of Tripoli where information and assistance is largely absent. Dignity kits stocks are fewer than the demand as

the number of displaced women and girls continues to grow. **Clinical management of rape (CMR) services are not available at public hospitals in Tripoli.** Affected refugees and migrants have limited access/ability to benefit from the full cycle of GBV case management.

Looking ahead: priorities and way forward

GBV partners seek funding to upscale GBV programming in the outskirts of Tripoli. GBV partners also will liaise with the Sexual and Reproductive Health Working Group and the Health Sector to address the lack of CMR services in public hospitals. Priority will be given to **the development of integrated messages across Sectors to increase awareness about available GBV services.** GBV partners will also liaise with the Cash Working Group to explore provision of cash-for-rent specifically for vulnerable migrants and refugees to mitigate GBV risks.

Recent protection needs assessments highlight increased reports of sexual violence perpetrated against non-Libyans by combatants. The GBV sub-sector recommends issuance of a communiqué to both parties involved in conflict to hold accountable combatants perpetrating incidents of sexual violence against civilians.

Child Protection sub-sector

 **5,700**
people assisted with some form of humanitarian assistance since the onset of crisis

 **1,800**
people assisted in collective centres

Behind the numbers: response and constraints

Conflict-affected children and their caregivers require PSS and recreational services as well as mine risk education and awareness. National partners require capacity-building to help meet the needs of conflict-affected children.

To date, Child Protection partners have reached approximately **5,700 conflict-affected children with PSS/recreational activities and 1,025 conflict-affected children with specialized PSS** in collective shelters and in urban areas. 775 caregivers were reached through PSS and child protection awareness raising sessions in these same collective shelters and areas. UNICEF distributed 106 recreational and early childhood development (ECD) kits to the PSS units of the Ministry of Education and Ministry of Social Affairs to support the

response to conflict-affected children. UNICEF has started to scale up Mine Risk Education to reach children and families in Tripoli and surrounding municipalities.

Child protection partners face obstacles in accessing areas affected by the conflict.

Looking ahead: priorities and way forward

Further efforts and coordination are needed to reach conflict-affected children in urban settings. Support to municipalities outside Tripoli affected by displacement of families and children is needed. Further coordination between sub-Sectors, collaboration with national authorities and capacity development plans for national partners are needed. The international community should call on all parties **to refrain from committing grave violations of children's rights.**

 **20,500**

people assisted with some form of humanitarian assistance since the onset of crisis

 **3,000**

people assisted in detention centres

 **860**

people assisted in collective centres

Behind the numbers: response and constraints

During the reporting period, approximately 7,000 additional IDPs were identified, potentially in need of shelter and/or NFI assistance.

269 IDP families (approximately 1,345 individuals), in urban areas have been provided with in-kind assistance during the reporting period, in the form of NFI packages, frequently completed with food parcels, hygiene kits, and dignity kits. These interventions have targeted mostly populations previously displaced who have not received assistance yet in Tripoli, Misrata and Garabolli.

One of the current main challenges is **assessing the needs of displaced populations**. Since humanitarian partners do not have access in all areas of displacement, unmet needs are not always able to be assessed. An important gap remains a lack of complete information regarding the number and movement of IDPs in/through collective shelters.

Since the vast majority of newly-displaced families are hosted by families/friends, these populations and their needs are becoming increasingly challenging to identify. According to a recent DTM assessment of market access, the worst affected areas were Khallat al Furjan (in Ain Zara municipality) and Swani Bin Adam municipality, where most markets were reported to be closed, causing limitations for newly displaced population to access basic goods, such as NFIs when needed. **The commodities reported most in need in these areas are fuel, mattresses and diapers**. New areas of displacement are currently being assessed for shelter/NFI need, while areas already reached in past weeks also require re-assessment in order to identify new arrivals as well as populations that have not received assistance previously.

Since humanitarian access is restricted in many areas of displacement, assistance cannot be provided to all IDPs in their current place of displacement. Since new displaced populations are constantly being identified it remains extremely difficult to dedicate capacity on the ground for **post-distribution monitoring** in order to revise the design of assistance packages according to identified needs of the displaced people. Although

affected populations indicate a need for cash-for-rent and other in-cash assistance as a priority, implementation challenges for agencies results in in-kind modalities being prioritized.

Communication between Sectors especially regarding sharing of information collected among field teams

11,750

IDPs in urban areas targeted for immediate assistance

remains challenging – leading to a lack of updated information, especially related to needs in collective shelters but also in urban areas. The **exchange of information between Sectors and local authorities remains extremely difficult** since no common tools are currently used to share information between the different entities.

Looking ahead: priorities and way forward

Approximately 2,350 additional IDP families (11,750 individuals) in urban areas are planned to be supported in the coming days with full NFI packages in areas such as Tarhuna, Tajoura, Misrata, Tripoli where large numbers of newly displaced are reported to be in need of support. In Tarhuna, where some 3,500 families are reportedly displaced, the main gap remains identification of the affected population and their needs. In the Garabolli Beach Resort and Tripoli University Dorms collectives shelters, approximately 500 IDP families are reportedly hosted, but little assistance has been provided since the start of the crisis and urgent assessment is needed. Municipalities and Local Crisis Committees seem to be taking over a large part of the assistance to the displaced populations; nonetheless, information sharing mechanisms should be developed to highlight more properly the remaining unmet needs to be covered by the humanitarian community.

The Sector continues its effort to collect and compile incoming information from different sources in order to provide **timely information regarding the most urgent needs** and also to avoid duplication/overlapping of conducted interventions. Stockpiles are being maintained to meet envisioned future needs.

Water, Sanitation and Hygiene

 **17,500**

people assisted with some form of humanitarian assistance since the onset of crisis

 **2,250**

people assisted in detention centres

 **1,000**

people assisted in collective centres

Behind the numbers: response and constraints

Approximately 41,000 IDPs are in need of emergency WASH assistance.

Due to the attack on the MMRP facility in Jabal al-Hasawna on 19 May as well as electricity cuts, irregular water supply was observed across various areas in Tripoli during the reporting period. Disruption to solid waste management also poses a growing health risk.

Nearly 3,500 IDPs have been provided with clean water for drinking, hygiene and sanitation through **maintenance and upgrading of WASH facilities** in collective shelters. During the reporting period, **657 IDPs were**

3,500

IDPs provided with clean water for drinking, hygiene and sanitation

provided with WASH assistance by UNICEF through rehabilitation of WASH facilities and distribution of hygiene kits in seven collective shelters.

Looking ahead: priorities and way forward

WASH Sector through UNICEF and other Sector partners is working with government counterparts on **contingency planning** for disruption of regular water services.

Repair and maintenance of sanitation facilities in IDP hosting areas and collective shelters remains a priority. WASH Sector is undertaking a comprehensive WASH assessment in collective shelters and DCs.

Water infrastructure and facilities, particularly the MMRP and its staff, must not be subject to attacks. It is vital that service providers for solid waste management be allowed safe access to landfill sites.

Logistics

Behind the numbers: response and constraints

Information regarding the temporary closure and subsequent re-opening of Tripoli port on 19-20 May has been circulated through the Logistics Sector's mailing list to ensure that all partners are kept informed on possible new logistical constraints. An **updated import guidance document** has been circulated on 17 May, together with an updated suppliers list, which includes several logistic service providers based in the Misrata area. Both these documents are based on information received from the Sector's partners. Regular coordination meetings continue to be held to ensure that logistical bottlenecks are identified and common solutions sought. Information management products including logistics guidance, meeting minutes, maps and assessments are available on the Logistics Sector's webpage: <https://logcluster.org/sector/lby18a>.

Looking ahead: priorities and way forward

Although operations at Tripoli port are proceeding normally as of Monday 20 May, close monitoring of the situation is needed, as the receipt of humanitarian shipments could be delayed or hampered should access to Tripoli port be disrupted again.

Lack of clarity in **customs procedures** remains the main logistical bottleneck and clarifications continue to be sought on import procedures for humanitarian cargo. All partners have been invited to inform the sector should they experience delays or difficulties with the receipt of their cargo at Libyan ports, so that immediate follow up can be ensured. Unimpeded access to Libyan ports should be guaranteed for humanitarian cargo, to ensure the humanitarian community's ability to appropriately respond to the needs on the ground in Libya. A strong

need remains for **expedited import procedures for humanitarian cargo**, to be clearly stated and applied by authorities. Fast-tracking of humanitarian cargo blocked

at entry points would also greatly assist the prompt availability of supplies and ensure timely delivery of assistance to affected populations.

Emergency Telecommunication

Behind the numbers: response and constraints

Mobile networks in the south of Tripoli and conflict areas around Ain Zara continue to be unstable. With the current instability in the mobile network and the risk of continued power outages, the **backup communications systems are now being relied upon, and require strengthening**. UN agencies apart from UNSMIL do not have any licenses to own and operate or import radios in Libya. The regulatory environment in Libya poses a constant challenge when planning radio infrastructure and for the importation of satellite equipment.

There are multiple humanitarian hotlines and call centres for affected populations to call. There is a need to consolidate these lines to demonstrate a commitment to accountability to affected populations. The Inter-Sectoral Coordination Group has come together to implement a **Common Feedback Mechanism (CFM)**, bringing the

voice of the affected population into the overall response and adhering to its commitment on accountability to the affected population. However, the Emergency Telecommunications Sector (ETS) does not currently have funding to move past the planning phase of the CFM.

Looking ahead: priorities and way forward

Coordination for the CRM began on 13 May and will continue until 24 May. ETS is working to resolve the radio licensing on behalf of UN agencies. Toward this end, on 10 May UNSMIL sent a Note Verbal to the Ministry of Telecommunications requesting UN agencies to join their existing Tetra radio license. ETS is also working toward the establishment of a **Tripoli crisis and communications center**. On 15 May, ETS completed a site assessment in Palm City and work is now underway.

FUNDING

Tripoli Flash Appeal 2019

US\$ 10.2 million requested



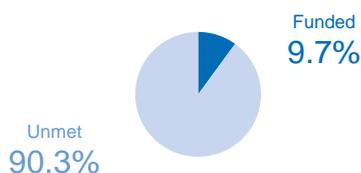
With the launch of the Tripoli Flash Appeal, **humanitarian actors urgently seek US\$10.2 million** to assist some 100,000 highly vulnerable people in and around Tripoli.

US\$2 million funding has been allocated by the CERF to respond to the current emergency and to ensure civilians receive timely life-saving assistance. **Additionally, the UK's Department for International Development has pledged £1 million** to meet the requirements of the Tripoli Flash Appeal.

The humanitarian community is presently revising the Libya Humanitarian Response Plan 2019 to incorporate continued response as set forth under the Tripoli Flash Appeal.

Libya Humanitarian Response Plan 2019

US\$ 202 million requested



The humanitarian community appeals for US\$202 million under the Libya Humanitarian Response Plan 2019. To date, only 9.7% is funded. **If no additional funding is received, humanitarian partners will not be able to respond to the immediate humanitarian needs of the people who have recently been affected by the clashes in Tripoli.**

The mission of the United Nations Office for the Coordination of Humanitarian Affairs (OCHA) is to Coordinate the global emergency response to save lives and protect people in humanitarian crises.

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