

Multi-Sector Needs Assessment (MSNA)

Protection
November 2018



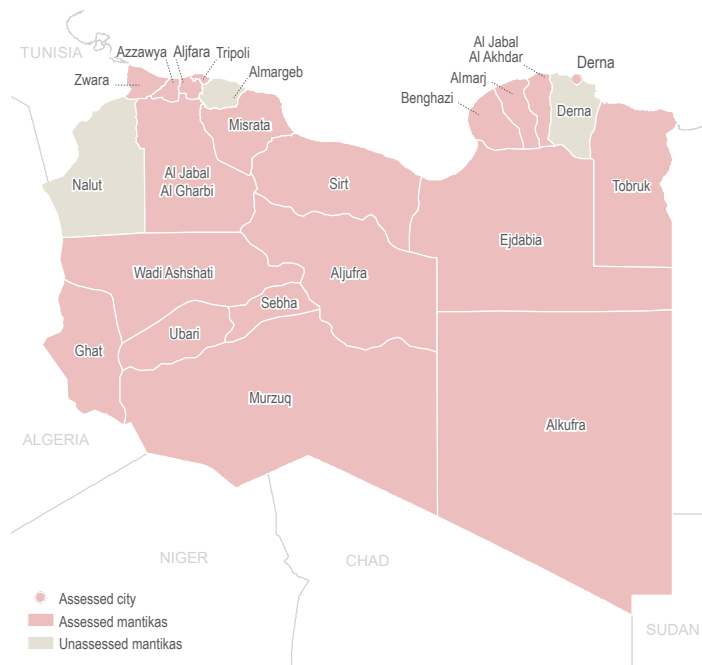
LIBYA

CONTEXT AND METHODOLOGY

As the Libyan crisis enters its eighth year, episodic clashes between a multiplicity of armed actors continue to affect several regions, with an estimated 1.62 million displaced and non-displaced people affected in 2017¹. From 1 January - 31 October 2018, UNSMIL documented at least 175 civilian deaths and 335 injuries². The crisis in Libya is the result of conflict, political instability and a vacuum of effective governance, resulting in a further breakdown of functioning systems with considerable security, rule of law, social and economic consequences³. The most pressing humanitarian needs identified are protection, health and cash & livelihoods⁴, though as the humanitarian situation evolves, the strategies adopted by households to meet their needs remain underexplored.

In light of these continued knowledge gaps, with facilitation from REACH, the Inter-Sector Coordination Group (ISCG) conducted a multi-sector data collection exercise between 23 July and 6 September 2018 to provide updated information on the needs and vulnerabilities of affected populations in Libya. 5,352 households (HH) were interviewed, including non-displaced (2,449), IDP (1,691) and returnee (1,212) HHs, across 20 Libyan mantikas⁵. Findings are generalisable at mantika level for each assessed population group with a **confidence level of 95% and a margin of error of 10%** (unless stated otherwise).

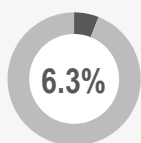
ASSESSMENT COVERAGE



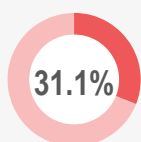
Households with an unmet need in the protection sector:

7.8%

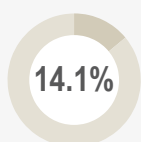
Non-displaced



IDPs



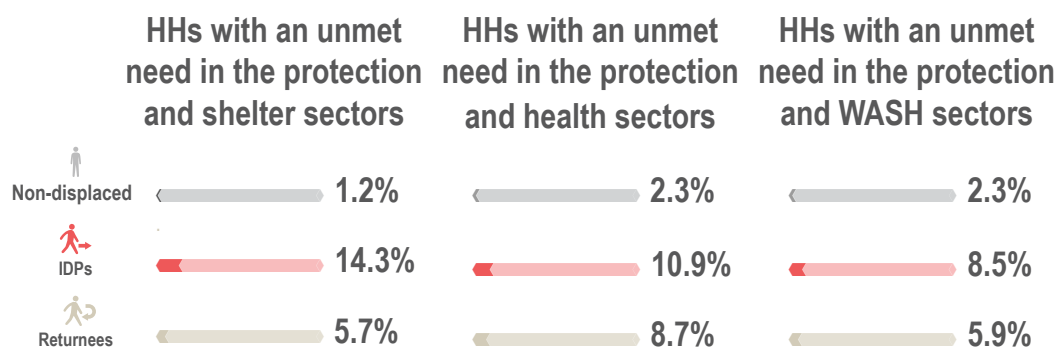
Returnees



SECTORAL AND MULTISECTORAL NEEDS

To understand sectoral needs, multiple indicators were assessed to gauge whether a household (HH) had an unmet need, as further explained in the [annex](#). Overall, **8% of all households** across Libya were found to have an **unmet protection need**, with IDP households the most likely to have an unmet protection need (31%). **Protection needs were highest in Alkufra and Sirt**, where over one-quarter of all households had an unmet protection need.

To strengthen coordination of humanitarian planning and to aid integrated responses, it is important to understand the overlapping needs households face across multiple sectors. **Multisectoral needs involving the protection sector were identified primarily in the south**, and mainly in Alkufra and Sebha, where just under **20%** of households were found to have an unmet need in the **protection and WASH** sectors. **IDP households** most commonly displayed simultaneous needs in **protection and shelter** (14%) and **protection and health** (11%) while **19% of IDP households** had an unmet need in **3 or more sectors**.



DISPLACEMENT

% of IDP and returnee HHs by number of times displaced, per population group:



Top 3 push and pull factors reported by IDP HHs:

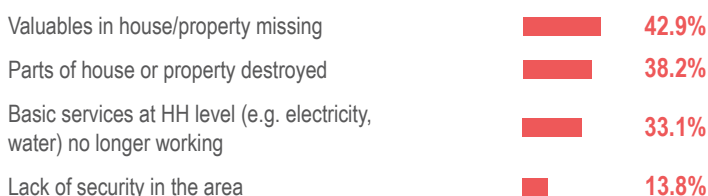
Push factors	Pull factors
Insecurity/conflict in the area	1 More secure environment
Shelter destroyed	2 Presence of friends and family
Threats of violence against HH	3 Presence of HH's community

Top 3 push and pull factors reported by returnee HHs:

Push factors	Pull factors
Insecurity/conflict in the area	1 End of conflict in area of origin
Threats of violence against HH	2 Presence of friends and family
Problems accessing healthcare	3 Presence of HH's community

2.5% of HHs reported having a family member missing.

Top reported problems faced by returnee HHs upon return to areas of origin⁶:



Main reasons for IDP HHs not to return to their area of origin:

- Shelter has been destroyed
- Insecurity/conflict in the area
- Threats of violence against HH

16.4% of HHs reported that at least one member of the HH intended to leave Libya.

Of HHs with at least one member intending to leave Libya, top 3 reasons that HH members intend to leave the country^{6,7}:



HAZARDS FROM UNEXPLODED ORDNANCE

HH awareness of hazards from unexploded ordnance (UXO), per population group:

	Non-displaced	IDPs	Returnees
% of HHs reporting UXO presence in their neighbourhood	3.3%	8.2%	11.2%
% of HHs reporting having received information on hazards from UXO	16.4%	15.9%	19.6%

HH awareness of hazards from unexploded ordnance (UXO), per mantika:

Mantika	% of HHs reporting UXO presence in their neighbourhood	% of HHs having received information on hazards from UXO
Al Jabal Al Akhdar	1.2%	28.2%
Al Jabal Al Gharbi	8.7%	6.9%
Aljfara	0.4%	53.5%
Aljufra	16.9%	21.5%
Alkufra	4.1%	1.3%
Almarj	5.6%	0.9%
Azzawya	5.5%	10.5%
Benghazi	9.4%	26.7%
Derna	6.5%	14.9%
Ejdabia	8.1%	4.6%
Ghat	1.7%	25.8%
Misrata	2.5%	33.2%
Murzuq	1.0%	10.4%
Sebha	18.2%	13.4%
Sirt	14.2%	40.1%
Tobruk	0.0%	27.2%
Tripoli	0.0%	0.0%
Ubari	6.1%	5.4%
Wadi Ashshati	12.1%	5.6%
Zwara	0.0%	37.1%



Of HHs having received information on hazards from UXO, reported sources of information^{6,7}:



2.4% of HHs reported that at least one member of the HH has been harmed as a result of exposure to UXO.

DOCUMENTATION

5.0% of HHs reported that at least one member of the HH has lost an identity document (ID) or other documentation during the conflict.

% of HHs reporting at least one member of the HH having lost ID or other documentation during the conflict, per population group and per mantika:

	Non-displaced	IDPs	Returnees
Al Jabal Al Akhdar	0.3%	13.5%	NA
Al Jabal Al Gharbi	0.3%	5.7%	6.0%
Aljifara	0.7%	2.2%	1.0%
Aljufra	1.4%	5.4%	NA
Alkufra	2.2%	9.2%	10.0%
Almarj	2.9%	3.9%	NA
Azzawya	4%	12.4%	42.1%
Benghazi	1.6%	25.3%	13.2%
Derna	8.8%	14.3%	4.2%
Ejdabia	0.3%	4.1%	8.9%
Ghat	4.5%	12.9%	NA
Misrata	10.6%	30.4%	3.1%
Murzuq	0%	5.5%	4.3%
Sebha	8.8%	21.2%	0.0%
Sirt	2.4%	6.3%	15.5%
Tobruk	1.8%	5.4%	NA
Tripoli	4.8%	9.5%	7.1%
Ubari	4.5%	12.9%	3.0%
Wadi Ashshati	0.0%	13.5%	6.3%
Zwara	0.0%	0.0%	NA

23.8% of HHs who lost documentation during the conflict had not reapplied for new documentation at the time of data collection.

Of these, top 3 reported reasons for not reapplying for documentation:

- 1 Process is too complicated and takes time
- 2 Safety risks to travel to civil registry⁸
- 3 No functioning civil registry nearby

Of HHs having lost documentation, top 3 reported challenges due to the loss of documentation^{6,7}:

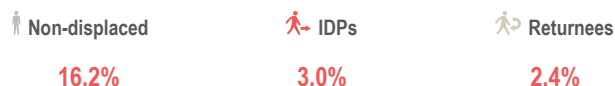


ASSISTANCE

% of HHs receiving humanitarian assistance in the 6 months prior to data collection, per population group:



Of those, % of HHs that faced barriers to accessing humanitarian assistance⁷:



Top 3 reported barriers to accessing humanitarian assistance:

- 1 Lack of consent from actor controlling territory
- 2 Legal recognition of humanitarian organisations
- 3 Damage to roads leading leading to area of assistance

Main sources of information on humanitarian assistance:

- 1 Community leaders
- 2 Television
- 3 Social media

1 [Libya Humanitarian Needs Overview, OCHA, 2018](#)
 2 [UNSMIL, Human Rights Report on Civilian Casualties, 2018](#)
 3 <https://www.unocha.org/middle-east-and-north-africa-romena/libya>
 4 [Libya Humanitarian Needs Overview, OCHA, 2018](#)
 5 Libya is divided into four types of administrative areas: 3 regions (admin level 1), 22 mantikas or districts (admin level 2), 100 baladiyas or municipalities (admin level 3), and muhallas, which are similar to neighbourhoods or villages (admin level 4).
 6 Multiple response options could be selected.
 7 Due to limited sample size for this indicator, results are indicative and not representative.
 8 36.7% of IDP HHs reported safety risks as their main reason to not reapply for documentation.



CALCULATING UNMET NEEDS AND MULTISECTORAL NEEDS

For each sector, an index of unmet needs was calculated using one or multiple individual needs indicators* selected by each active sector in Libya. If a household reported having an unmet need for one of the sectoral indicators, then they were considered to have unmet needs in that sector. The percentage of households with unmet needs per mantika and population group was then calculated.

The only exception is the Protection sector where, due to the large number of individual sectoral indicators, a threshold weighting was applied to displaced households (IDPs and returnees). In this instance, households were required to report having an unmet need for two or more indicators in order to be considered as having unmet needs in the sector.

* Each of these indicators was also used by OCHA to calculate the People In Need (PIN) figure for the Humanitarian Needs Overview.

Multisectoral needs:

The multidimensional index of needs for each household was subsequently calculated as a total of the number of sectoral needs that the household faced (maximum of 6). This aggregated number can then be extrapolated to the mantika and national levels for each population group. Analysing the % of households by the number of sectors they have unmet needs in provides an understanding of the geographic variation in which humanitarian needs converge. Population groups and areas with a higher proportion of households with unmet needs in multiple sectors, such as in three or more at the same time, are likely to face acute problems in meeting their basic needs.

Multisectoral analysis presents an opportunity to identify and understand the interrelationships between sector-specific indicators that contribute to overall household needs. Adopting an integrated sector approach can help assess the impact of current and future interventions aimed at mitigating humanitarian needs. The multisectoral analysis presented above investigates the % of households that have needs in two sectors, for example in Protection & Health, presenting findings by each sector.

SECTORAL INDICATORS

Protection:

- % HHs losing civil documentation because of conflict and not reapplying
- % HHs facing protection-related barriers to receiving humanitarian assistance
- % HHs reporting presence of explosive hazards
- % HHs with with members injured or killed by an explosive hazard
- % of returnee HHs facing protection-related problems upon return
- % IDP HHs hosting displaced family members or other displaced persons
- % IDP HHs hosting displaced under 18 or unaccompanied children
- % IDP HHs evicted or threatened with eviction in the past 6 months
- % IDP HHs with members diagnosed with a clinical mental disorder or physical disability
- % IDP HHs with children under 18 who have worked in the past month
- % IDP HHs displaced more than once since 2011

WASH:

- % HHs reporting insufficient quantity of drinking water in the past month

Shelter & NFI:

- % IDP and returnee HHs living in unfinished buildings, collective centres, informal settlements or open areas
- % HHs living in heavily damaged or destroyed shelters
- % HHs needing assistance to cover energy needs
- % HHs recently evicted or threatened with eviction
- % HHs reporting squatting as occupancy type

Education:

- % HHs with at least one school-aged child not enrolled in school
- % HHs with at least one school-aged child not regularly attending school

Health:

- % HHs with an ill family member who did not go to a health facility
- % HHs facing challenges accessing health facilities due to damaged/ destroyed health facilities; no available health facilities that can accept new patients; lack of money to pay for care; lack of medical staff in general; lack of medical supplies
- % HHs reporting more than 1 hour by car to nearest health service provider
- % HHs with a women who gave birth in last 2 years, consulted by an uncertified midwife; nurse; relatives/friends; or no one
- % HHs with a family member diagnosed with a chronic disease, clinical mental disorder or physical disability with no access to medicines/ healthcare

Food security:

- CARI Analysis; Food Consumption Score, food expenditure share, coping strategies

