

HIGHLIGHTS

- In **40% or more*** of assessed locations **migrants, daily labourers** and the **elderly** were the groups reported to have been the **most negatively impacted** by the socio-economic consequences of COVID-19.
- **Loss of livelihoods** remains one of the major consequences of the COVID-19 pandemic and has affected and continues to affect migrants, the most impacted group, according to key informants.
- In **63%*** of assessed locations key informants reported that **food prices had increased** compared to the previous month.
- In **97%** of assessed locations key informants reported that there was a **willingness to get vaccinated** against COVID-19.

* over the reporting period September to November 2021

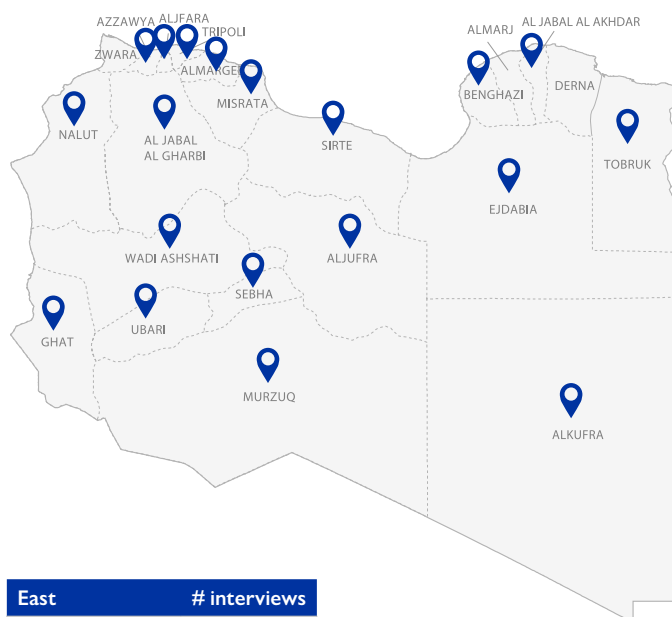
DATA COLLECTION METHODOLOGY

This report presents the findings of data collected during the months of April to November 2021 and covering 53 municipalities (baladiya) of Libya with significant IDP and migrant populations. This assessment was carried out through 445 Key Informant Interviews (KIIs) (Fig 1) conducted at municipality (baladiya) and community (muhalla) levels.

This report aims to shed light on the impact of the pandemic on vulnerable mobile populations, including on livelihoods, access to healthcare and market prices as well as access to COVID-19 vaccines and willingness to get vaccinated. As such, these findings aim to provide a better understanding of the situation and needs of migrants, IDPs, and host communities in Libya and how they have evolved over the past eight months.

- 📅 Assessment period: April - November 2021
- 🔍 445 Key Informant Interviews

Fig 1 | Data collection coverage



East	# interviews
Ejdabia	24
Alkufra	2
Al Jabal Al Akhdar	28
Tobruk	6
Benghazi	1

South	# interviews
Ghat	2
Murzuq	23
Sebha	8
Ubari	6
Wadi Ashshati	10

West	# interviews
Tripoli	90
Aljfarra	28
Aljufra	10
Azzawya	21
Almargeb	35
Al Jabal Al Gharbi	30
Misrata	49
Nalut	37
Sirt	16
Zwara	20

CONTEXT OVERVIEW

While the security situation in Libya remains relatively stable but fragile, the socio-economic situation, which has been hampered by years of conflict, has been further exacerbated by the COVID-19 pandemic.

As of December 2021, the number of confirmed COVID-19 cases in Libya nearly surpassed 375,000²; more than twice as many³ as of six months ago. This pandemic continues to pose a challenge for a healthcare system already weakened by a decade of civil war. Moreover, the public health crisis is impacting the lives of all population groups in Libya but has compounded existing vulnerabilities, particularly among Internally Displaced Persons (IDPs) and migrants.

To measure the socio-economic impact of COVID-19 on vulnerable migrant and displaced populations in Libya and understand their needs to better inform humanitarian programmes and activities, DTM began including a specialized assessment as part of its mobility tracking activities in March 2021.

1 UNSMIL Special Envoy Kubis Meets HNEC Chief, Renews UN Commitments to Support Libyans in Holding Free, Fair, Inclusive Elections Free From Threats and Intimidation ([link](#))
 2 WHO Libya COVID-19 Interactive Dashboard (Website [link](#))
 3 WHO Libya COVID-19 Monthly Update (May 2021) (Report [link](#))

SUMMARY OF FINDINGS

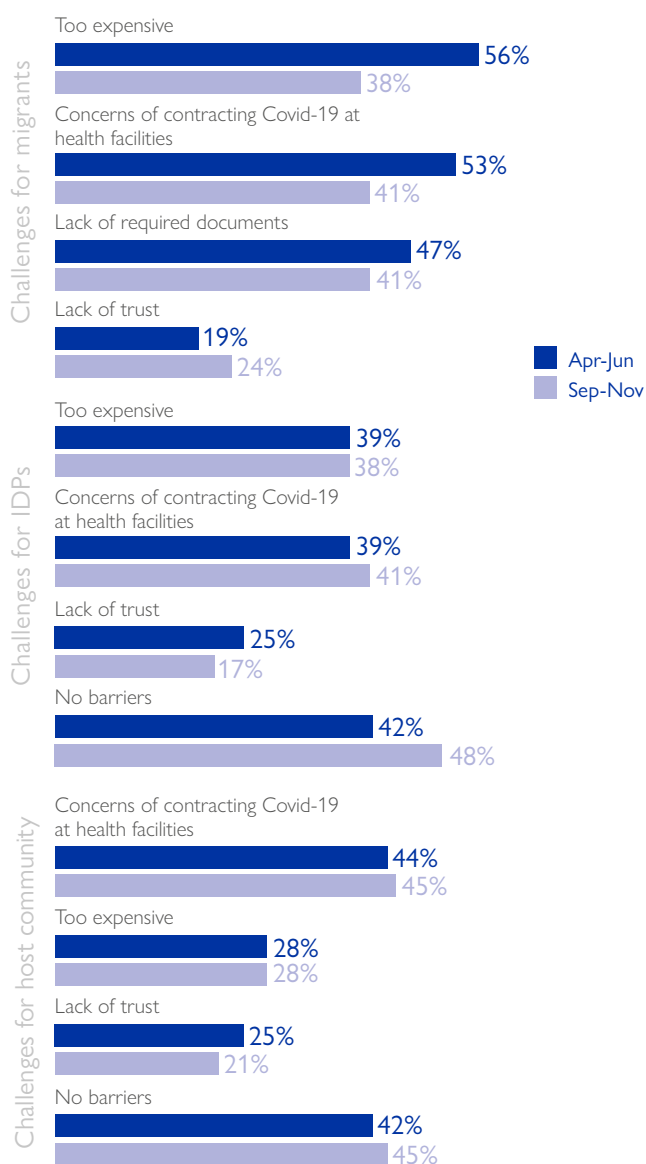


During the reporting period (April to November 2021), Libya [experienced](#)⁴ a third COVID-19 wave following a surge in cases in June 2021 before numbers [started](#)⁵ decreasing in mid-August and stabilising later in November.

According to the latest interviews conducted between September and November, key informants in 41 per cent or more of locations reported that concerns over contracting COVID-19 while visiting a health facility remain a major barrier to accessing healthcare for all three groups interviewed (migrants, IDPs and host community) (Fig 2).

In parallel, the cost of healthcare services also represents a challenge for all groups, according to key informants, but most particularly for migrants and IDPs.

Fig 2 | Main challenges reported related to access to health facilities (% of assessed locations)



In line with these findings, the latest DTM Libya round of data collection ([Round 38, July - September 2021](#)⁶) highlighted that health services remain a priority humanitarian need for both IDPs and returnees. The main challenge both groups face, according to key informants, is related to financial vulnerabilities attributed to the erosion of coping mechanisms as a result of the various crises that have been affecting Libya.

Similarly, individual interviews conducted with migrants by [DTM in July - September 2021](#)⁷ highlighted that the majority of them (77%) reported lacking access to health services in Libya. Based on key informant interviews, the primary obstacle migrants faced was the affordability of care. Moreover, the inability for migrants to access services (e.g. being denied care) and the inadequate quality of services were also issues.

COVID-19 Vaccine

Based on figures from the [National Center for Disease Control](#)⁸ more than 1,7 million doses have been administered (with more than 712,000, or 6 per cent of the Libyan population, having received their second doses), through 430 health facilities across the country since the vaccination campaign began in April 2021.

Key informants in 97 per cent of municipalities assessed reported that COVID-19 vaccines were available during the reporting period (April-November 2021).

Key informant interviews also show that most recently, willingness to get vaccinated against COVID-19 appear to have increased. In a greater proportion of municipalities assessed key informants reported willingness among the population to get vaccinated against COVID-19 over the period from September until November (97%) than between April and June 2021 (86%) (Fig 3).

In the two municipalities (Ubari and Albayda) where key informants reported that there was a limited demand for the vaccine the reason quoted was a fear of the vaccines' potential side effects.

A recent DTM Libya [report](#)⁹ on COVID-19 and vaccination highlighted that while half of migrants interviewed in August and September reported being willing to get vaccinated, those who had doubts raised concerns over the safety of the vaccine and its effectiveness.

Fig 3 | Locations where there is willingness to be vaccinated against COVID-19 vaccines (% of assessed locations)



⁴ OCHA Libya Analysis - September 2021 ([Report link](#)).

⁵ WHO Libya COVID-19 Surveillance Weekly Bulletin (week 46) ([Report link](#)).

⁶ IOM Libya IDP and Returnee Report (Round 38) ([Report link](#)).

⁷ IOM Libya Migrant Report (Round 38) ([Report link](#)).

⁸ National Centre for Disease Control - Libya ([Website link](#)).

⁹ COVID-19 and Vaccination in Libya - Assessment of Migrants' Knowledge, Attitudes and Practices ([Report link](#)).

COVID-19 SOCIO-ECONOMIC IMPACT

Over the reporting period September-November 2021, key informants in 43 per cent of locations reported that migrants were the most vulnerable group affected by the socio-economic impact of the COVID-19 pandemic (Fig 4). Daily labourers and the elderly were also among the groups who had been reportedly most impacted.

Across locations, the most widely cited socio-economic consequence of the pandemic affecting these groups was the loss of livelihoods or other financial means (e.g. remittances) (Fig 5). Unemployment and the lack of resources, such as money, goods or support is a [risk factor](#)¹⁰ that contribute to vulnerability. The most recent [IOM Libya Migrant Report](#)¹¹ highlighted that unemployed migrants interviewed by DTM between July and September consistently reported facing more difficulties, such as financial and security issues as well as lack of access to drinking water than those who were employed. The current unemployment rate among migrants (20%) remains higher than pre-pandemic levels (17%).

In 67 per cent of assessed locations between September and November 2021, key informants reported that daily labour was the field of work most affected by the pandemic, followed by domestic work (30%) and the agricultural, fishing and food industry (23%).

Moreover, in 77 per cent of assessed locations between September and November, key informants reported that the situation had neither improved nor worsened when asked whether they had noticed a change in the economic impact of the COVID-19 pandemic during the past six months in their municipality. In 14 per cent of locations, key informants reported that the impact had either worsened (5%) or improved (9%), while in 9 per cent of locations key informants reported not knowing (Fig 6).

Fig 4 | Most affected groups (% of assessed locations)

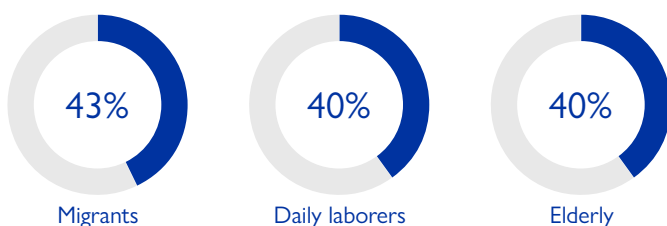
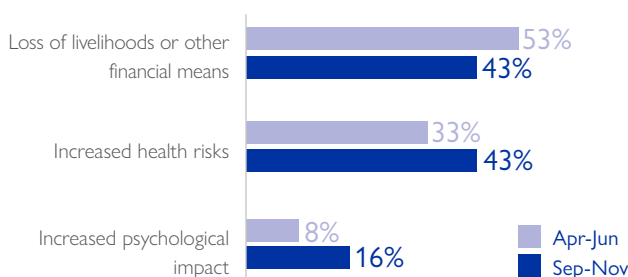
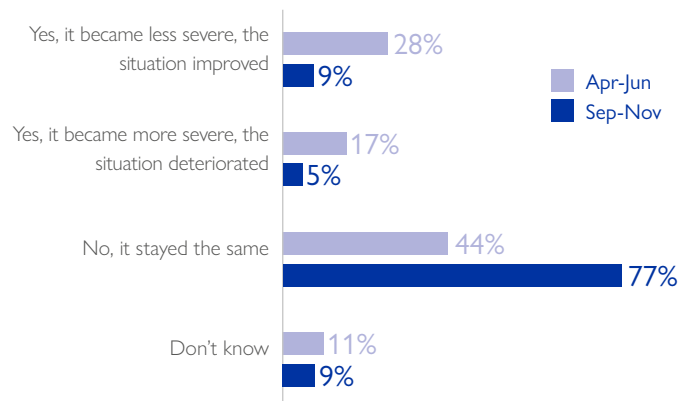


Fig 5 | Consequences of COVID-19 (% of assessed locations)



10 IOM - The Determinants of Migrant Vulnerability (Report [link](#))
11 IOM Libya Migrant Report Round 38 (Report [link](#))

Fig 6 | Have you noticed any changes in the level of economic impact of the COVID-19 pandemic over the past six months in your municipality? (% of assessed locations)



MARKET IMPACT ASSESSMENT

Since the beginning of the COVID-19 pandemic, [fluctuation in food prices](#)¹² has contributed to food insecurity.

In 63 per cent of the areas assessed, key informants surveyed between September and November reported that food prices had increased compared to the previous month, at the time of survey (Fig 7) compared to 43 per cent of those previously surveyed between April and June.

Fig 7 | Food prices change



According to the Libya Joint Market Monitoring Initiative the median cost of essential food and non-food items, such as hygienic and pharmaceutical commodities, has increased by 13 per cent, from an estimated average of 704 LYD (in [April 2021](#)¹³) to 796 LYD (in [September 2021](#)¹⁴). Overall, the price of essential food and non-food items remains over 26 per cent higher than pre-pandemic levels in March 2020.

Key informants in several locations stated that the prices of staple foods such as rice, flour, cooking oil and vegetables had increased significantly over the period September-November 2021 (Fig 8).

12 WFP & World Bank Food Security and Nutrition: Libya (Report [link](#))

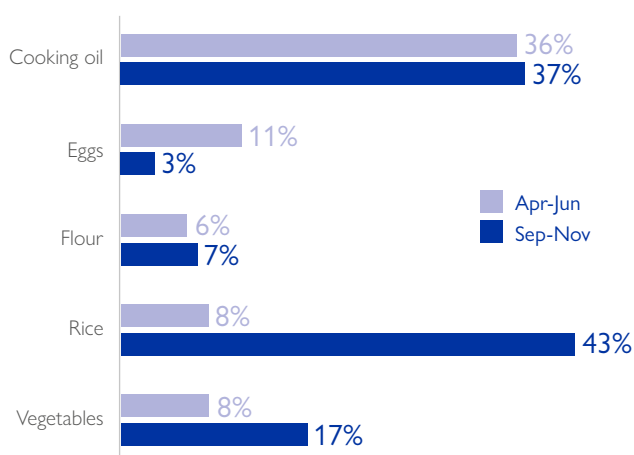
13 Libya Joint Market Monitoring Initiative 1-13 April 2021 (Report [link](#))

14 Libya Joint Market Monitoring Initiative 1-13 September 2021 (Report [link](#))

15 Note: Latest available data at the time of publishing.

EDUCATION

Fig 8 | Food items for which prices increased compared to the previous month (at the time of survey) (% of assessed locations)

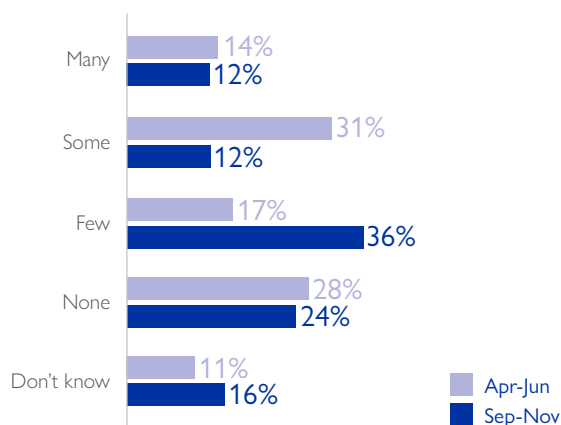


In line with these findings, several migrants who participated in [focus group discussions](#)¹⁶ held in June 2021 on COVID-19 and vaccination mentioned that work opportunities were more scarce and that the prices of food, transportation and rent had increased, in some cases. According to the latest [DTM Libya data](#)¹⁷, 20 per cent of the migrants in Libya are unemployed.

Over the reporting period of September to November 2021 key informants in a majority of municipalities assessed (60%) reported that the local economy had suffered from job losses to varying degrees (Fig 9). In a total of 24 per cent of locations key informants reported that many or at least some individuals had lost their employment.

Business owners in Libya and across the Middle East and North Africa (MENA) region have been heavily [impacted](#)¹⁸ by the pandemic, with nearly a third (30%) reporting a drop in investments and more than one in three (35%) citing having needed to lay off employees since the beginning of the public health crisis.

Fig 9 | Estimation of the number of people who lost their jobs due to COVID-19 crisis based on key informants (% of assessed locations)



16 COVID-19 and Vaccination in Libya (Report [link](#))

17 IOM Libya Migrant Report Round 38 (Report [link](#))

18 IOM Cairo Regional Office, Assessing the Socio-Economic Impact of COVID-19 on Migrants and Displaced Populations in the MENA region (Report [link](#))

Based on the 2022 [Humanitarian Needs Overview](#)¹⁹ (HNO), there are 160,000 children, including displaced, returnees and migrants, who are in need of assistance because of school closures or damage to infrastructure caused by the impact of past armed conflicts. The COVID-19 pandemic has had, and continues to have, a significant academic, social and psychological impact on the lives of children.

According to key informants, schools were reportedly closed in a greater proportion of locations during the period September-November than between April and June (Fig 10). In late July, a partial lockdown was [imposed](#)²⁰ across the western region and many municipalities closed their educational institutions, which could help explain this difference.

The main barriers to accessing education reported by key informants were related to school closures, the fear of contracting COVID-19 and the lack of necessary documentation (affecting migrant children). According to [DTM data](#)²¹, while only a minority of migrants in Libya are with school-aged children, more than two in five reported that their children were unable to access school mainly because of financial (80%) and language barriers (74%).

Fig 10 | Schools status (% of assessed locations)

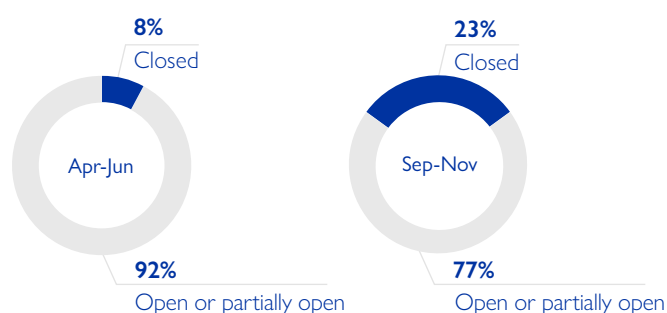
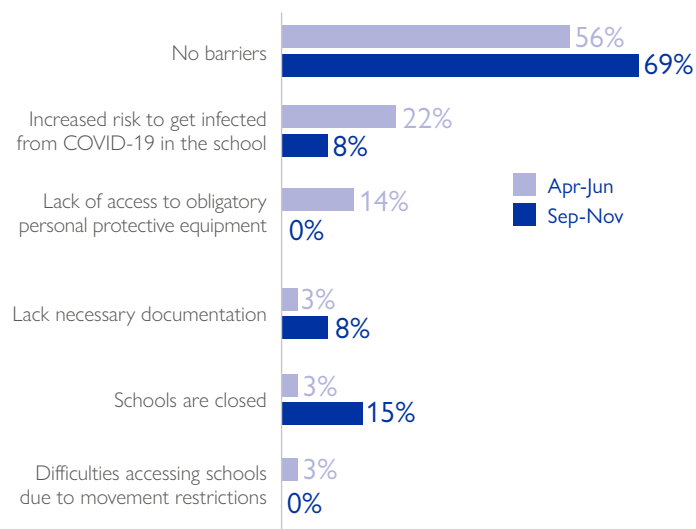


Fig 11 | Barriers reported related to access to education facilities (% of assessed locations)



19 Humanitarian Needs Overview: Libya, 2022 (Report [link](#))

20 OCHA Libya Humanitarian Access Snapshot: Education (Report [link](#))

21 IOM Libya IDP and Returnee Report (Round 37) (Report [link](#))