



International Organization for Migration (IOM)
The UN Migration Agency

Final Report to Italian Ministry of Foreign Affairs “COMPREHENSIVE AND MULTI-SECTORAL ACTION PLAN IN RESPONSE TO THE MIGRATION CRISIS IN LIBYA”

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| Beneficiaries | Government of National Accord (relevant agencies at the national level and municipal governments); stranded, rescued, detained, and vulnerable migrants (including unaccompanied migrant children, victims of trafficking, and survivors of gender-based violence); members of crisis-affected host communities; IDPs; returnees; and local NGOs. |
| Partner(s) | [omissis], Directorate for Combatting Illegal Migration (DCIM), local communities, central & regional government authorities, partner NGOs/CSOs, Libyan Ministry of Local Governance, Community Management Committees (CMC), ARA PACIS Initiative, the Protection Working Group, service providers, mobile teams, local crisis committees, relevant government ministries, local authorities, and municipalities. |
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I. Summary of Key Achievements during the Reporting Period

The project, entitled “*Support IOM Activities in Libya in Response to the Migration Crisis in Libya*” which was implemented during 1 September 2017 – 30 April 2021¹, comprises of three components:

- I) Voluntary Humanitarian Return (VHR);
- II) Community Stabilization (CS); and
- III) Direct Humanitarian Assistance through the Migrant Resource and Response Mechanism (MRRM).

Through this multifaceted intervention, IOM Libya offered voluntary humanitarian return (VHR) for migrants who want to return to their home countries, while contributing to improving stability in particularly fragile communities in Libya (CS). In addition, the project also contributed to alleviating the sufferings of stranded and detained migrants through the provision of basic life-saving and life sustaining assistance, and awareness-raising activities on the risks of irregular migration and alternative options via referrals (MRRM).

Under **Component 1: Voluntary Humanitarian Return (VHR)**

The objective of component one, VHR and reintegration of migrants stranded and detained in Libya, is to facilitate the voluntary humanitarian return of migrants rescued at sea, detained in detention centres, or stranded in urban areas of Libya and to support their reintegration

With this project IOM assisted a total of **8,928 migrants (7,162 male, 1,766 female)** to voluntarily return to their countries of origin and supported the integration of **1,574 (1442 male 132 female)** migrants in their countries of origin. Based on monitoring and evaluation (M&E) data, 83 per cent of those assisted with reintegration support have operational projects which enable them to earn a monthly income that assists them in their daily expenses and supports their family needs.

Under **Component 2: Community Stabilization (CS)**, IOM emphasized community engagement and the process of creating the conditions for communities to co-exist peacefully, resolve tensions through non-violent means, restore trust in local leadership and regain the agency, within crisis affected groups to drive recovery processes. CS approach includes components that encourage individuals to work together towards collective goals under three interrelated outcomes: strengthening social cohesion, supporting delivery of basic services in the community in order to avoid competition for resources which would further erode cohesion, and improving capabilities and opportunities for community members to improve their livelihoods.

IOM involved 4,493 (3,668 men and 825 women) people in community stabilization and cohesion promotion activities including CSOs grants, handover of Community Improvement Project (CIPs), Community management committee (CMCs). Also, during the project duration IOM organised 10 community events for migrants and host communities (9 iftar celebration and celebration of World water day), 19 outreach events for the handover of infrastructures and equipment projects, 19 CMCs in [omissis] and [omissis] to identify needs of communities.

To create conditions contributing to the restoration of normal social and economic life for all people living in Libya, IOM supported local authorities in providing basic services through the CIPs that consist of rehabilitation of infrastructure, including water and wastewater systems, schools and dormitories, recreational, clinics and playgrounds and delivery of equipment. In total, **35 CIPs** have been implemented during the project and are fully functional.

¹ The project was originally with a duration of 36 months – 1 September 2017 – 31 August 2020. Two four-month no-cost extensions were requested due to challenges posed by the COVID-19 pandemic, thus extending the project duration until 30 April 2021.

A total, 205 people (105 men and 99 women) were involved in vocational and business skills trainings and provided with toolkits (135) or grants (21) under CSOs grants. Selection of the grants was done taking into consideration the local market to each location, offering opportunities for women in home-based businesses and with relatively low set-up costs, such as mobile phone repair. It was determined that each participant would receive a business toolkit to commence work directly after completion of training.

Under **Component 3: Migrant Resource and Response Mechanism (MRRM)** IOM established two MRRM teams – in the migrant-dense areas of [omissis] and [omissis] and surrounding areas and started providing integrated services in these urban areas. MRRM is a modality of programme implementation that uses a comprehensive and community-centred approach to bring together a wide range of services and assistance that IOM provides to migrants. It provides vulnerable migrants with information, access and referral to a wide variety of targeted humanitarian services. Through MRRM, migrants living in urban areas as well as host community very vulnerable cases benefited from MRRM services.

Through the project, IOM was able to reach **30,052 migrants**² (19,042 men and boys and 5,392 women and girls³) and have received various types of assistance, such as the distribution of non-food items (NFIs), food baskets, primary health care consultations and medical referrals for specialised investigations and treatment, awareness raising on irregular migration and health risks, referral to specialised protection assistance, Mental Health and Psychosocial Support (MHPSS) services, and referral and registration for Voluntary Humanitarian Return (VHR). Those reached were living in **28 different localities** of [omissis], [omissis] and [omissis]. Migrants reached were from **36 different countries** with the highest numbers from Chad (5,085 migrants), Niger (4,144 migrants), Sudan (3,750), and Nigeria (2,751). In addition, through the project contribution IOM was able to enhance the capacity of local stakeholders through the collaboration with two local associations to expand the response to migrants especially during COVID19 pandemic. Also, this project has contributed to enhance the local authorities, government officials and other stakeholders' knowledge on migration governance and related laws through the "Certificate in Migration Governance" training which was conducted during this project period.

² Cumulative number of persons reached during different times throughout the project implementation. Some migrants might have been targeted more than once, thus they are counted at each time as reached case.

³ 5,000 assisted during Subratha crisis during year one does not include the disaggregation by gender and age.

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II. Progress Made towards Realizing Outcomes and Outputs

II.1. Voluntary Humanitarian Return

Under this component of the project, IOM provided a rights-based voluntary return and reintegration assistance to vulnerable migrants who found themselves stranded or in detention in Libya, thus offering them with access to safe, dignified and durable solutions to their displacement.

The VHR programme, which was supported under this project, is based on the IOM institutional comprehensive approach on migration management aiming at orderly, safe, and humane return and reintegration of migrants while taking into account and adapting to the circumstances on the ground.

Following the aftermath of the 2011 crisis in Libya, migrants have experienced increasing levels of insecurity and arbitrary arrest by state and non-state actors, detention for indefinite periods of time, labour exploitation, violence, abuse, harassment and deliberate targeting. However, with the deterioration of the circumstances on the ground around 2015, including the intensification of the conflict, evacuation/relocation of the United Nations and most embassies and the scarcity of commercial flights, an assistance programming which takes into consideration the high humanitarian and lifesaving imperative of such return assistance without compromising IOM institutional safeguards to the protection of migrants upon return and provision of reintegration assistance needed to be established. The need for a programme such as VHR as a central solution for many stranded and vulnerable migrants was highlighted. With the necessary political will and commitments by the newly established African Union (AU), European Union (EU) and the United Nations (UN) tripartite task force that was formed following the widely reported discovery of more than 19,000 migrants in [omissis] who had been captured, kept underground and faced much exploitation at the hands of smugglers and traffickers in 2017, the first act of the AU-EU-UN task force was to mandate IOM to support the return and reintegration of the large numbers of migrants detained in detention centres in Libya.

With limited options for integration within Libya and wide array of vulnerabilities facing stranded and vulnerable migrants IOM's VHR programme has proven to be the most viable and durable solution for stranded migrants in Libya.

The VHR programme employs a rights-based approach, mainstreaming protection that is centered around the migrant's right to return to their country of origin; a right enshrined in the Universal Declaration of Human Rights (Art 13(2)) and IOM's institutional approach to migrant protection.

The VHR programme provides outreach services, an information hotline, individual counselling and vulnerability screening, referrals for in depth protection assessment, direct assistance, health care and Mental Health and Psycho Social Services (MHPSS), consular assistance including assistance to obtain travel documents, nationality screenings and other related assistance, pre-departure health checks, departure and transportation assistance, cross referrals with other UN agencies and local and international organizations including UNHCR, coordination with countries of origin for specific assistance to vulnerable returnees including victims of trafficking, and arrival and reintegration assistance.

The reintegration component under the VHR programme provides support to address psychosocial as well as socioeconomic needs of all migrants who are assisted under the programme to help them ease into their communities in a dignified manner.

With this project IOM assisted a total of **8,928 migrants (7,162 male, 1,766 female)** to voluntarily return to their countries of origin via the Voluntary Humanitarian Return Programme (VHR).

IOM provided VHR support to migrants in both detention centres (6,827), and stranded migrants in urban locations in Libya (**2,101**), in mainly the western cities of [omissis], [omissis] and Misrata[omissis] as well as [omissis] and [omissis] cities. IOM organized **252** flights, in which a total was **41** charter flights and **211** commercial flights which proved cost-effective and enabled the support of a higher number of stranded migrants under the VHR assistance than initially foreseen.

Vulnerable migrants⁴ were provided with additional customized assistance during their voluntary humanitarian journey; with a **total of 202 medical cases** requiring further assistance and a total of **117** Unaccompanied and Separated Children (UASC). UASCs' cases are referred to the IOM Protection Team for family tracing, and follow-up with the receiving missions in the countries of return to ensure a safe and sustainable voluntary return and reintegration into their communities as well as **59** Victims of Trafficking (VoTs).

II.1.1. Movement and access

To facilitate safe passage for migrants from urban areas to departure points, IOM coordinates with the [omissis]. The safe passage had become critical between September of 2017 and February 2018, as the conflict continued to affect major cities, located particularly in the southern and western regions, which exacerbated security concerns.

Maintaining access for IOM staff members and embassy consular officers to conduct interviews and assessments and processing migrants' travel documents has been a key challenge throughout the project implementation due to deteriorating security conditions and access limitations to a number of areas in Libya. Coordination with DCIM proved to be highly important for the process of facilitating consular field visits that involve embassy staff representatives of the migrants' countries of origin with the aim of obtaining travel documents as well.

IOM continuously adapted to security challenges, access limitations and aid provision impediments in this dynamic context through the mobilization of a team of local third party contracted staff to facilitate registration, identification and provision of online consular assistance to migrants in inaccessible areas.

To ensure migrants are allowed to leave the country, with the Libyan legislation requiring an exit visa of every foreigner wishing to leave, from January 2019, IOM started covering the cost of 81 EUR per person, as it is nearly impossible for migrants in distress to afford the cost. Previously to that migrants were forced to cover this cost but once IOM started covering it, the interest in VHR among migrants noticeably increased. IOM continued to deliberate with relevant local authorities to advocate for a reduction or a waiver of the exit visa fees.

The start of the COVID-19 pandemic severely affected the VHR programme as the Libyan airspace closed on 19 March 2020. IOM Libya continuously advocated vis-à-vis the government to allow VHR flights out of the country and in the meantime, continued registering and preparing migrant who would like to return. On 20 August 2020, the restrictions were lifted, and IOM resumed preparations for charter flights. Soon after, IOM was able to organize one last flight under this project, carrying 157 migrants to Bangladesh.

Thus, from the beginning of the project on 1 September 2017 until the end of the project on 30 April 2021, IOM had successfully facilitated the return of assisted **8,928 migrants (7,162 male, 1,766**

⁴ Defined as children – including unaccompanied migrant children - persons with health needs, victims of trafficking, and single-headed households etc.

female) to voluntarily return to their countries of origin via the Voluntary Humanitarian Return Programme (VHR). (*Annex VHR 1 – VHR Flights*)

OMISSIS (foto di persona)

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departure

OMISSIS (graph of countries)

II.1.2. VHR outreach and awareness-raising

To raise awareness on VHR possibilities among migrants in Libya and to establish direct connection with migrants in urban settings, IOM conducted **outreach activities** in various locations in East, West and South of Libya and informed migrant communities and local stakeholders of the availability of VHR assistance and its eligibility criteria. During these outreach campaigns IOM was able to identify migrant community leaders and to invite them as Community Mobilizers, thus ensuring a closer link to the community.

OMISSIS (foto di persona)

Frequent meetings were held in [omissis], [omissis] and [omissis] with migrants' countries Embassy representatives in order to address concerns of their respective communities.

Periodical **stakeholder meetings** took place with relevant outreach partners in Libya, such as the [omissis], [omissis], [omissis] and [omissis]. Throughout the project, IOM received inter-agency referrals for VHR, which was a result of IOM's collaborative relationship with relevant international organizations also operating in the field.

Efforts to disseminate information about the VHR programme went hand in hand with launching a **hotline service in July 2018**. The VHR Hotline is a direct tool of communication between migrants in urban settings with IOM staff and it has proved effective.

During the project period, a total of **14,531** incoming calls were registered, out of which **11,491** calls/questions were successfully addressed. All queries were recorded and referred internally to relevant teams.

During the project, IOM established a direct bridge between migrant communities in urban settings and the VHR programme. In synergy with the EU-IOM Joint Initiative, information sessions were organized⁵ in favour of migrant communities and other relevant stakeholders in various cities, namely [omissis], [omissis], [omissis], [omissis], [omissis], [omissis], [omissis], [omissis], [omissis], [omissis], and [omissis]. A total of **21,526** migrants participated in these information sessions, 39 per cent of which were reached under this project.

All outreach sessions endeavoured to clarify the VHR process and unequivocally ascertained migrants were aware of the voluntary nature of the programme. Furthermore, the outreach sessions highlighted that migrants incur **no costs** for services, including flights and medical fit-to-travel

OMISSIS (foto di persona)

screenings. These measures were put in place to ensure migrants would voluntarily choose to return once a request for assistance was received through outreach activities (including direct visits to detention centres) and referrals from embassies, community leaders, the VHR hotline and IOM social media pages.

Moreover, VHR Hotline cards and HR brochures (in Arabic, French and English) were distributed among migrants in different migrant locations, reaching **24,182** migrants, 39 per cent of which were reached under this project.

OMISSIS (foto di persona)

II.1.3. Pre-departure counselling and screening for vulnerability

Prior to departure, IOM conducts screenings and counselling of migrants through interviews in order to learn more about their migration journey and to identify any vulnerabilities that may require additional assistance. A migrant's vulnerability is determined by the presence, absence and interaction of certain factors and circumstances that increase the potential risk of exposure to violence, abuse, exploitation and rights violations particularly in the below categories:

⁵ Sessions were implemented with COVID-19 preventative measures taken into consideration - wearing of masks, social distancing, use of disinfectants.

- Children and adolescents
- Pregnant women/lactating women
- Individuals living with disabilities (cognitive disabilities and/or physical disabilities)
- Single headed household (female-headed, male-headed or child-headed)
- Elderly people (unaccompanied or accompanied)
- Survivors of gender-based violence (GBV)
- Large households (more than the average number of children in the given community and ratio between breadwinners and dependents)
- Unaccompanied and separated children (UASC)
- Survivors of torture
- Survivors of trafficking in persons
- Individuals at risk due to their nationality, religious beliefs, political affiliation, sexual orientation, ethnicity or any other status
- Safety and security factors (forced recruitment into the conflict, physical abuse and abduction)

During the project, the screening and counselling process identified a **total of 117** Unaccompanied and Separated Children (UASC) and **59** Victim of Trafficking (VoT) were identified.

The VoTs and UASCs are referred to the IOM Protection Team for in-depth vulnerability assessments, family tracing and follow-up with the receiving missions in the countries of return to ensure safe and sustainable reintegration into their communities.

When the migrants were cleared for travel, IOM facilitated the necessary travel documentation (preparing and submitting exit visa applications, coordinating with relevant embassies).

OMISSIS (foto di persona)

II.1.4. Travel documents and medical fit-to-travel screening

Extensive preparatory measures have been undertaken for migrants to be safely supported. The VHR team conducted assessments and ensured voluntariness of return once requests for assistance were received, either through direct visits to detention centres or urban locations, referrals from the Migrants and Refugees platform, embassies, community leaders and IOM social media pages. Voluntariness of return is important to ensure migrants are not returned unwillingly to situations that they fled from.

IOM's procedures include several pre-departure steps (following the vulnerability assessments).

- a) Migrants crossing into Libya often lose possession of their travel documents during their migration journey. IOM coordinates the issuance of travel documents with third country embassies. Most of the embassies, through their community representatives based in Libya, collect the biodata of migrants and issue travel documents within a week of registration.

IOM facilitated the delivery of consular travel documents for all migrants. Counselling, screening for vulnerability and travel document issuance took place in parallel to expedite the return procedure. IOM employs an online consular service whereby migrants are linked online directly with their embassies for consular authentication. This tool ensures quick issuance of travel documents to migrants who have embassies based in [omissis] and/or outside of Libya. For consular support, the VHR team collected and printed passport photos, prepared and delivered consular applications and facilitated exchanges between embassy representatives and their respective nationals in Libya. IOM also supports in the logistics shipment of the travel documents once issued from respective embassies in neighbouring countries and deliver it to migrants in Libya for onward processing.

- b) The VHR medical team provided fit-to-travel medical examinations to ensure migrants were medically safe to travel. This examination is vital to ensure the safety of migrants during the flight as medically unclear travellers can pose a health risk to themselves and other travellers on board. Cases who have medical needs are referred for appropriate assistance until they are declared medically fit and their return logistics are resumed. There were 202 migrants with medical conditions over the course of the project.
- c) As soon as exit visas are secured, IOM Libya shares relevant information, such as expected number of returnees, type of movements (commercial or charter flights) and types of vulnerabilities with IOM missions in countries of return in order to ensure that special assistance is provided as necessary.
- d) As per standard pre-departure preparations within the VHR programme, IOM provided transportation and distributed non-food items (NFIs) consisting of clothes and footwear to all migrants assisted from detention centres (**6,827** individuals) before their return flights. Also, on the day of departure, all migrants were provided with IOM bags for easy recognition by the IOM airport assistants.

IOM missions in the receiving countries ensure sufficient staff to quickly and efficiently process the paperwork of the arriving returnees, arrange their pocket money, transportation and escorts for those traveling further or support upon arrival for identified vulnerable individuals.

II.1.5. Reintegration assistance

Delivery of assistance

IOM Libya oversees and ensures the availability of reintegration support in various destinations of return where the local IOM mission cannot provide reintegration assistance from other projects, including the EUTF. Migrants returning to non-EUTF destinations, under this project were offered post-arrival counselling sessions to support the preparation of Individual Reintegration Plans (IRP). This process adheres to a flexible approach to tailor IRPs based on the specific skillsets and needs of the beneficiaries. IRPs were reviewed by IOM staff in the receiving countries and approved by IOM Libya. During the review process, IOM assessed the sustainability of the reintegration plans, following IOM's procurement procedures to eliminate any possible fraud. Beneficiaries eligible for reintegration assistance have the options of receiving individualized support including support to establish viable income-generating projects, medical treatments, vocational training, housing assistance, psychosocial support or other support using the modality of an in-kind grants of up to 1,000 EUR. Each of the reintegration projects was tracked for three months after grant issuance in order to offer continuous support and monitoring.

During the project, **1,574 beneficiaries (1,442 males 132 female) were provided with reintegration assistance** and their reintegration plan were implemented. A majority of the returnees chose micro business set up as reintegration type.

To be eligible for reintegration assistance, beneficiaries need to develop Individual Reintegration Plans (IRP) under the categories of education, medical, housing and/or income-generating activities. Upon arrival, migrants were informed about the development of IRPs and contact data was gathered to attend reintegration counselling sessions and start the process. Once IRPs were reviewed by IOM staff in the country of origin, they were submitted to IOM Libya for approval. During the review process, IOM assessed the sustainability of the IRPs, which was followed by IOM’s procurement procedures to eliminate any possible fraud. After submitting successful reintegration plans, beneficiaries received in-kind grants to support their approved IPRs equivalent up to 1,000 EUR. The IOM offices in the country of origin then proceeded with the provision of in-kind support to the migrant beneficiary (i.e. purchasing goods, paying for medical treatment or hospitalization, etc.). The IOM reintegration staff in Libya coordinated closely through monthly Skype calls with the offices in the country of origin to support the successful rollout of the reintegration process.

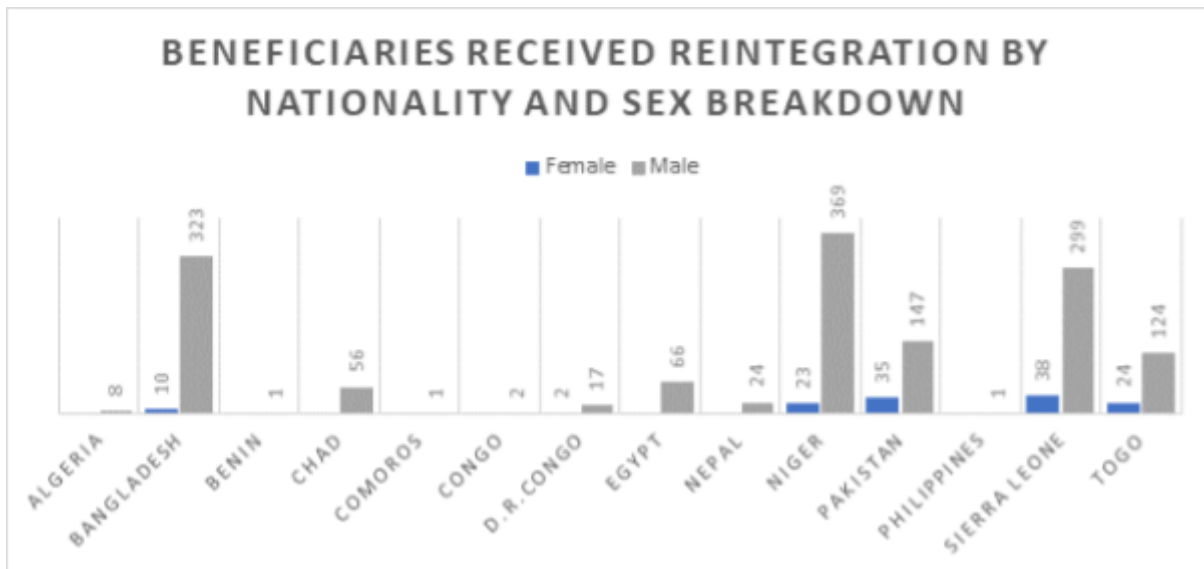


Figure 5: VHR reintegration assistance beneficiaries by country and sex

OMISSIS (graph)

According to the findings, 60 per cent of surveyed migrants indicated either not having any formal education or completed only primary education. As for work experience, 39 per cent of those surveyed in Libya indicated that back home they worked in the agriculture sector or other labour-intensive jobs. Many of the assisted returnees chose to return to their areas of origin, which were primarily rural and offer limited livelihood opportunities.

Based on M&E data of a reintegration study, conducted with 1,476 beneficiaries who returned to their countries of origin under this project, 76 of whom received reintegration assistance under this project, 83 per cent of those assisted with reintegration support have operational projects which enable them to earn a monthly income that assists them in their daily expenses and supports their family needs. Many of them also plan on expanding their business.

Monitoring of the sustainability of the reintegration

Throughout the project, IOM conducted several monitoring visits to beneficiaries' places of work or residence.

In 2019, three monitoring missions were conducted to [omissis], [omissis] and [omissis] to follow-up on the reintegration of returnees, identify process improvement opportunities, and meet a sample of returnees to better understand their needs. The missions included meetings with IOM staff and other relevant local stakeholders, conducting both individual on-site visits as well as focus group discussions (FGD) with the returnees to assess the impact of reintegration assistance.

In [omissis], the reintegration teams of IOM Libya and [omissis] conducted a workshop to review implementation process, as a result the IRPs were simplified to allow smooth case-management, while long-term agreements were signed with main vendors in key locations of return. These are efforts to expedite the reintegration processing time. A FGD took place with a group of returnees from Libya in [omissis] district, about 230 km away from capital, [omissis]. Findings included the rural hardship and limited job opportunities, which force many returnees to opt for seasonal agriculture work or animal breeding.

From the [omissis] monitoring mission, information gathered about hardship of reintegration process in the provinces. Therefore, many returnees chose to stay in capital in order to avoid their own communities, as they often felt being stigmatized and judged by local community for not being successful in their migration attempt.

OMISSIS (foto di persona)

The monitoring mission in [omissis] focused on training IOM [omissis] reintegration team on IOM's global M&E tools and reintegration visibility, as well as generating knowledge on reintegration experience through conducting various monitoring sessions and on-site visits to returnees from Libya.

In early 2020 monitoring visits took place in [omissis], A total of 66 [omissis] migrants have been assisted with return and reintegration thus far under this fund. Therefore, the programme deemed it necessary to conduct a qualitative three-day monitoring mission during which eight reintegration beneficiaries (all men) were met respectively: three in [omissis], three in [omissis] and two in [omissis]. All visits were on-site at workplaces or at the home of returnees. Additionally, the reintegration team attended two counselling sessions organized in IOM [omissis] offices, to observe the manner according to which reintegration counselling is provided to returnees. All the visited reintegration beneficiaries chose the agriculture sector, specifically animal breeding, as this type of business can be supported by family members and it allows returnees to supplement their income by performing other revenue generating activities such as daily labour. Out of eight visited returnees, seven reintegration plans were operational, while one was not successful. The beneficiary whose project failed was struggling to secure sufficient income and indicated that he relies on periodical daily labour to cover his family's needs.

OMISSIS (foto di persona)

From March 2020 (the start of the COVID-19 pandemic) until the end of the project in April 2021, in-site monitoring visits were no longer possible as a result of the COVID-19 pandemic. From then onwards, all monitoring assessments were conducted over the phone, with the exception of two in-site monitoring visits conducted in [omissis].

IOM conducted 216 phone interviews with 24 returnees to [omissis], 97 to [omissis] and 97 to [omissis]. Most reintegration plans of most of the monitored cases were still operational and while most were largely satisfied, some returnees indicated that their business does not generate enough income with regard to their individual or family needs.

Two in-site monitoring surveys were conducted in [omissis] as stated above. They indicated being satisfied with their reintegration plan, as well as the revenue it generates.

II.2. Community Stabilization

The objective of component two, Community Stabilization (CS), is support the stability and resilience of conflict-affected communities in Libya.

The CS approach emphasizes community engagement and the process of creating the conditions for communities to co-exist peacefully, resolve tensions through non-violent means, restore trust in local leadership and regain the agency, within crisis affected groups to drive recovery processes. CS approach includes components that encourage individuals to work together towards collective goals, such as community based public works, and in so doing establish and strengthen social cohesion.

Within IOM's CS approach, the communities are at the centre of the stabilization process. Community based approach is inclusive of all, including the most vulnerable, powerbrokers, contributors to stability or instability, with the aim of tackling social exclusion, as a potential driver of instability. By way to offering practical solutions to mitigating tensions within the communities, the CS approach includes deliverables required to enable recovery, such as rebuilding service delivery infrastructure and creating livelihoods.

This project built upon the work in the four regions of intervention ([omissis], [omissis], [omissis] and [omissis]). Activities grouped into three outcome areas comprise IOM's response.

II.2.1. Enabling actions and preparatory work

In the first year of the project, IOM conducted rapid assessments and conflict sensitive assessments of the socio-political context in project locations in [omissis], [omissis], [omissis] and [omissis]. This was done to ensure programming is built on a thorough understanding of the local context, the relationships between relevant stakeholders and follows *Do No Harm* (DNH) principles. Through targeted, on-the-ground research and analysis, these assessments provided insights in communities' satisfaction levels of public services across different sectors and of concerns and opportunities related to community stabilization. Based on surveys and focus group discussions with community members and key informant interviews with officials, these assessments inform the component's future planning and strategy as it identified entry points for IOM activities (for example, it was suggested that sports activities could bring together people of different tribal and political affiliations) and local conflict dynamics.

OMISSIS (mappa)

In December 2018 (the beginning of the second project year), the Community Stabilization (CS) teams in Tunis and [omissis] held a strategic planning workshop with field staff from all four target areas of intervention. During this workshop, the soft component of the CS programme (civil society capacity building to promote social cohesion and livelihood promotion) was worked on extensively with field staff in order to align the implementation plan with local context dynamics in the field locations and identify good practices for subsequent implementation. The workshop discussed the mapping of CSOs and support to entrepreneurship initiatives.

Continuing work on the strategy for the social cohesion component of the program and to enhance the capacity of staff across different areas of work, IOM again brought together CS staff from the four regions for a second workshop in July 2019. An important theme during the workshop was the engagement of CSOs and other local stakeholders that may be interested in submitting a proposal to

the Expression of Interest (Eoi) for social cohesion activities and livelihood activities launched in June 2019. The staff also identified challenges they face, which they subsequently grouped and prioritized, while brainstorming about solutions. Significant challenges were identified related to the security situation, implementation, and communication and coordination. An external consultant facilitated a session on conflict sensitivity, as a follow up to the original conflict sensitivity research, in order to continuously engage staff on considerations of conflict sensitivity for each specific location.

OMISSIS (foto di persona)

II.2.2. Outcome 1: Improved community social cohesion enables the successful and mutually-beneficial integration of migrants

IOM worked on bringing together community groups from different backgrounds in a spirit of cooperation, and to promote positive relationships and peaceful coexistence. For this purpose, several approaches were employed:

1. Directly engage with local communities and authorities through a participatory process for the identification of priorities and handover of Community Improvement Projects (CIPs);
2. Promote community engagement and social cohesion with community-based initiatives;
3. Support CSOs to implement projects that promote community engagement and social cohesion, involving different tribal groups as well as migrants, internally displaced persons and returnees.

II.2.2.1. Community Management Committee (CMCs) and CIPs handover events

To address the most pressing concerns of communities by having a local, transparent, and accountable identification process of these needs, IOM worked with local stakeholders to set up conflict sensitive, representational Community Management Committees (CMC) in [omissis] and [omissis] in 2018. These community committees comprise a cross-section of tribal groups who monitor and support IOM's community stabilization efforts, advise on local conditions and concerns, and provide recommendations of project priorities. This way of working ensured equal participation of communities, oversight and local ownership. In bringing together people of different tribes and social groups to jointly identify the most urgent community concerns, to agree on proposed solutions, and to be present during the handover upon completion of the projects, these platforms of community engagement contribute to social cohesion.

In total, IOM supported nineteen community CMCs in [omissis] and [omissis] reaching a total of 263 (231 males and 32 females) community members aimed to identify community-prioritized activities, ensuring a participatory approach in the selection of projects and transparency regarding project implementation and local ownership of all interventions. IOM ensured through an induction training that CMC members are mindful of the need for inclusive access for all community members, tribal groups, migrants, IDPs and women. Inclusivity is likewise encouraged through participation in CMC meetings by representatives from CSOs, public service providers, interested community members,

tribal elders, and the municipality. For more information of the functioning of CMC, see [Annex CS1 - CMC Standard Operating Procedures](#).

With the progress of the project, CMC meetings have become more established and well-known, attracting representatives from organizations seeking assistance to address what they perceive as

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gaps in public services and continue to provide salient recommendations for increasing positive community engagement. For example, in the CMC meetings held in different muhallas in [omissis] on 2-3 September 2019, discussions were centred around women and youth needs and challenges. Women's group representatives attended both meetings, with the result that suggestions for creating a civil society space for women to engage in public life were considered a priority on both occasions.

After more than a year of community discussion and based on the result of the conflict sensitivity assessment in [omissis] and [omissis], forming CMCs in these areas, modelled on the existing CMCs of [omissis] and [omissis], has turned out to be infeasible. This relates both to the size of the city in [omissis] and the sharp tribal divisions in [omissis] which inhibits people of Tebu and Zawiya ethnic background to engage in common activities. Instead, thematic ad-hoc project oversight committees have been used to gain inputs from the community.

In parallel to CMCs, IOM also encourages social cohesion through public outreach events, when the CIPs are officially handed over to the community. Twenty of these events were organized during the project reaching 306 community members (239 males and 67 females) aimed to strengthen the trust and relationship between community members and local authorities, ownership of the CIPs and promote community-led activities. One important event was the inauguration of a football pitch in [omissis], where [omissis] Mayor, [omissis] stated: "[omissis] is a city divided by tribal tensions. Tebu and Zway groups have distinct areas within the city and a long history of conflict. Since 2013, this is the first time I can participate at an inauguration event in a [omissis] area and I hope this will be a step toward a peaceful coexistence." After the speech, two inauguration football matches were held, involving four teams with [omissis], [omissis], migrant and IDP members. [omissis], a participant said: "I heard about this initiative on the local radio. I'm displaced here since 2015 and it's the first time to play football. It was an important opportunity for me, as until now it was very difficult to make connections with inhabitants, since there are no spaces for gathering or other types of social activities. At the end of the match we exchanged our contacts and we agreed to play football each week."

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Between March to August 2020, despite in-person meetings being put on hold following the COVID-19 outbreak, IOM continued to coordinate with CMC members (via phone) to discuss decision-making, update local communities on progress and encourage feedback and suggestions. CMC and other community members have regularly been invited to the handover events of infrastructure projects. For example, eight CMC members attended the handover of the [omissis] and [omissis] Guest House rehabilitations in May 2020 and due to COVID-19 preventive measures, only relevant local authorities were invited. One of the attendees stated: *“These facilities were unusable before the rehabilitation, but now are in very good condition. They will provide services to all [omissis] inhabitants. It is an important, tangible change for our community”*. These two guest houses are an example of how CMCs prioritize the rehabilitation, furnishing and provision of equipment to community assets in areas inhabited by various tribal groups considering the needs of [omissis] and [omissis] communities, migrant and IDP populations.

II.2.2.2. Social cohesion and community engagement initiatives

Throughout the project duration, IOM implemented 10 community engagement events to improve social cohesion, reaching **2,394** community members (2,364 males and 30 females) including 1,931 migrants.

A short description of the events organized:

On 22 March 2019, IOM organized a **World Water Day event**, implemented jointly with the [omissis], a [omissis]-based civil society organization. Around **100** community members attended the event and activities included painting activities for children, games, and a dialogue session on water conservation. Children were able to learn about how to save water and use it sensibly through different games, while in the evening, participants enjoyed singing and dancing activities.

Nine Iftar events took place in [omissis], over the course of May and June 2019 reaching more than 2,000 migrants and host communities. For many migrants, this was the first time that they participated in such events in Libya and met other migrants and host community members. [omissis], a migrant living in [omissis] summarized his impression of the event. *“I was invited with my friends. When I arrived to the place of the event, it was full of people whom I had never met before, Libyans and migrants. So, I lent a hand to the organizers during the distribution of the Iftar. The atmosphere is very good, it was nice to see people helping others.”* On this occasion, IOM combined also the provision of emergency assistance to support communities affected by the flooding in [omissis] (1,300 km south west of [omissis]) in June 2019⁶. Members of a local CSO [omissis] and members of the [omissis] Community Management Committee (CMC) formed a central committee coordinating efforts to provide relief assistance to affected communities in [omissis]. As [omissis] and [omissis] Scouts had worked on raising funds to support communities in [omissis], they proposed to reallocate funds initially earmarked for iftar refreshments to provide much needed relief items instead. Therefore, the food planned to be used for the Iftar dinner was replaced by more durable emergency food items such as bottled water, juice, milk powder and tuna. A portion of the aid was distributed to residents and migrants that were sheltered in schools, and another portion was transferred to the [omissis] General Hospital. With the funds raised by [omissis], the assistance reached nearly 1,000 community members.

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A member of the [omissis] explained how he became involved in the emergency assistance, stating, *“I was told by my friend about what happened and decided to participate because I love to help people, especially as I am a member of the Alhekma club. There was a spirit of cooperation in helping the people. I built some new relationships with people that live in a different region than myself. Helping people is a noble thing to do, especially in light of these difficult conditions, and ultimately it brings us all together.”*

II.2.2.3. IOM’s support to CSOs

At the beginning of June 2019, IOM launched an Expression of Interest (Eoi) to welcome proposals from civil society organizations to conduct community engagement projects promoting social cohesion but many organizations struggled with the proposal process. CSOs are a relatively new development within the Libyan social space as they were banned under prior political regimes, so there is a lack of experience and knowledge, despite their increasing popularity and community influence. A new strategy was developed to address this lack of CSO capacity, with a focus on outreach to build capacity within the CSOs, specifically in relation to how to submit proposals and a broader understanding of the grants process.

In the following two months, IOM increased its outreach to CSOs in the different areas in order to disseminate information about the Eoi and clarify the application process, discuss ideas, and address questions. A significant number of local CSOs IOM staff consulted reported that they need an improved capacity in project development in order to acquire the needed skills to apply. To address this need and support CSOs to respond to the calls for proposals, IOM in partnership with the [omissis] organized a proposal writing workshop for 22 CSO members from [omissis] on 17 and 18 August 2019. The EOI was published again in October 2019 and from the 75 proposals received, offering a wide range of opportunities to engage a broad spectrum of community actors from mental health and psycho-social support activities through arts in elementary schools, engaging IDPs, and migrant community youth in peacebuilding activities, building capacity of local government stakeholders to improving communication between local councils and members of the community. Other CSOs proposed developing a women’s salon and safe spaces for positive interactions across tribal, ethnic and social divides.

36 were shortlisted with nine CSOs selected – five implementing social cohesion and community engagement initiatives (Outcome 1) and four implementing livelihoods initiatives (Outcome 3). A completed description of their activities and results are described at the [Annex CS2 - Social cohesion and community engagement grants to CSOs](#).

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Despite some delays due to the COVID-19 situation, contracts were signed in July and August 2020. Prior to implementation, the CSOs attended kick-off meetings with IOM staff to discuss in detail project plans including budgets, deliverables and visibility before completing two additional sessions on financial, monitoring and evaluation requirements. IOM prepared a set of documents in English

and Arabic, including monitoring and evaluation templates and guidelines (*Annex CS3 - Monitoring and Evaluation guidelines for CSOs*) slides as well as finance and logistic guidelines (*Annex CS4 - Finance and logistic guidelines for CSOs*) with the aim to enable the CSOs to better meet project requirements and coach them to improve their internal capacity. In addition, to be COVID-19 sensitive, all implementing partners were equipped with personal protective equipment including masks, disinfectant and hand sanitizer to share between staff and beneficiaries. Large group activities were replaced with smaller initiatives and participants of training sessions have been divided into smaller groups to maintain physical distancing. IOM supported the CSOs by providing health awareness posters and brochures on COVID-19 prevention to ensure all participants have access to information regarding the pandemic.

Under this outcome, a total of 1,530 community members (834 men and 696 women) were involved in social cohesion and community engagement activities.

CSOs had to meet comprehensive M&E deliverables to ensure a close follow up of the activities, in addition to the daily IOM monitoring visit:

- Pre and Post Test for training
- Training Evaluation form
- Interim and final narrative report
- M&E event report
- Most significant change interviews

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The two tables below show the results of the training evaluation form filled in by 273 youth (124 males and 149 females) trained by the CSOs [omissis] and [omissis] that has been used to measure progress on the Outcome 1 indicator: *% of surveyed respondents indicating positive experience in being engaged with other community groups.*

The first table summarizes the replies of 234 youth (137 women and 97 men) trained for four-days in peacebuilding and dialogue sessions in [omissis] and [omissis], divided into groups of approximately 25 participants. At the end of the course in November 2020, the project team and the trainers selected the most active and motivated 50 youth based on their performance and engagement, to create a network of peace influencers, with peacebuilding and facilitation knowledge and skills, in each municipality to encourage positive discussions around community cohesion, peacebuilding and its practical usage in the social and political life.

| Training Evaluation – peacebuilding and dialogue sessions from Nana Marine | I felt included in group activities and discussions | The activity helped me to connect with people outside my own community | There was a positive atmosphere among participants |
|---|--|---|---|
| Group 1 [omissis] | 80 | 72 | 76 |
| Group 2 [omissis] | 95 | 95 | 90 |
| Group 3 [omissis] | 90 | 100 | 100 |
| Group 4 [omissis] | 84 | 88 | 84 |
| Group 5 [omissis] | 92 | 100 | 100 |

| | | | |
|-------------------|--------------|--------------|--------------|
| Group 1 [omissis] | 100 | 100 | 100 |
| Group 2 [omissis] | 66 | 100 | 86 |
| Group 3 [omissis] | 100 | 100 | 73 |
| Group 4 [omissis] | 100 | 100 | 57 |
| Group 5 [omissis] | 86 | 100 | 100 |
| Average | 89.3% | 95.5% | 86.6% |

The second table shows the responses of the 39 youth (27 males and 12 females) that attended a series of workshops (active communication, political speech, civic work and engagement) aimed to increase their capacity to engage with government stakeholders and create a sustainable youth committee.

| | | | |
|--|--|---|---|
| Training Evaluation – Youth forum project | I felt included in group activities and discussions | The activity helped me to connect with people outside my own community | There was a positive atmosphere among participants |
| Active communication and political speech | 93 | 100 | 86 |
| Civic work and engagement | 80 | 86 | 100 |
| Average | 88% | 97% | 84% |

II.2.3. Outcome 2: Communities affected by conflict and mass migration have their needs for basic services met by capable local government actors.

To create conditions contributing to the restoration of normal social and economic life for all people living in Libya, IOM supported local authorities in providing basic services through the Community Improvement Projects (CIPs) that are rehabilitation of infrastructure, including water and wastewater systems, schools and dormitories, recreational centres, clinics and playgrounds. IOM also provided equipment, such as furniture for schools, medical equipment and generators for clinics, pumps for the water and wastewater companies, and equipment to municipal staff to improve their services. Projects were identified through a consultative process with local communities - CMCs in [omissis] and [omissis] and ad hoc committee in [omissis] and [omissis] - to engage and strengthen local capacity and foster their ownership and commitment to ongoing management of rehabilitated facilities.

In total, **35 CIPs** have been implemented during the project and are fully functional. Below a table summarizing the sector of implementation. A completed description of the CIPs at the *Annex CS5 - Description of Community Improvement Projects*.

| Location | Education | Government | Health | Public Space | Sanitation | Water |
|--------------|-----------|------------|----------|--------------|------------|----------|
| [omissis] | 4 | 1 | 2 | | | |
| [omissis] | | | 3 | 1 | | |
| [omissis] | | | 1 | 9 | | 3 |
| [omissis] | 3 | | 2 | 1 | 2 | 3 |
| Total | 7 | 1 | 8 | 11 | 2 | 6 |

To ensure appropriate implementation and monitoring of the infrastructure projects, IOM set up two national teams in each project location, consisting of a national operation assistant and a field

engineer. As first step, following the community suggestions collected with CMCs and community meetings, a concept note was developed for each CIP to collect information on the specific need to be addressed, the rehabilitation work and equipment required, the possible impact and number of beneficiaries.

Through a public tender process, IOM assigned the grants for the CIP to local vendors that were continuously monitored by field monitoring staff. At the completion of the work, IOM ensured that everything was delivered in good condition and functional and organized an event to handover the project to local communities and authorities.

After a minimum of three months upon completion of the infrastructure/rehabilitation/equipment grant, IOM conducted outcome assessment visit to each site aimed at:

- Reviewing the achievements of the grant in line with intended objectives and broader outcomes, recording successes and challenges.
- Identifying urgent issues, if any, thereby enabling immediate follow-up and closing feedback loops with communities.
- Collecting data to report against related logframe indicators.
- Complying with commitments laid out under Accountability to Affected Populations framework, including:
 - o Communities can expect delivery of improved assistance as organizations learn from experience and reflection.
 - o Communities have access to safe and responsive mechanisms to handle complaints

In total, 45 people were interviewed during the outcome assessments visits. Among them, 43 out of 45 reported that following the rehabilitation, the condition of people living in the area and related to the specific need addressed by the CIP were improved.

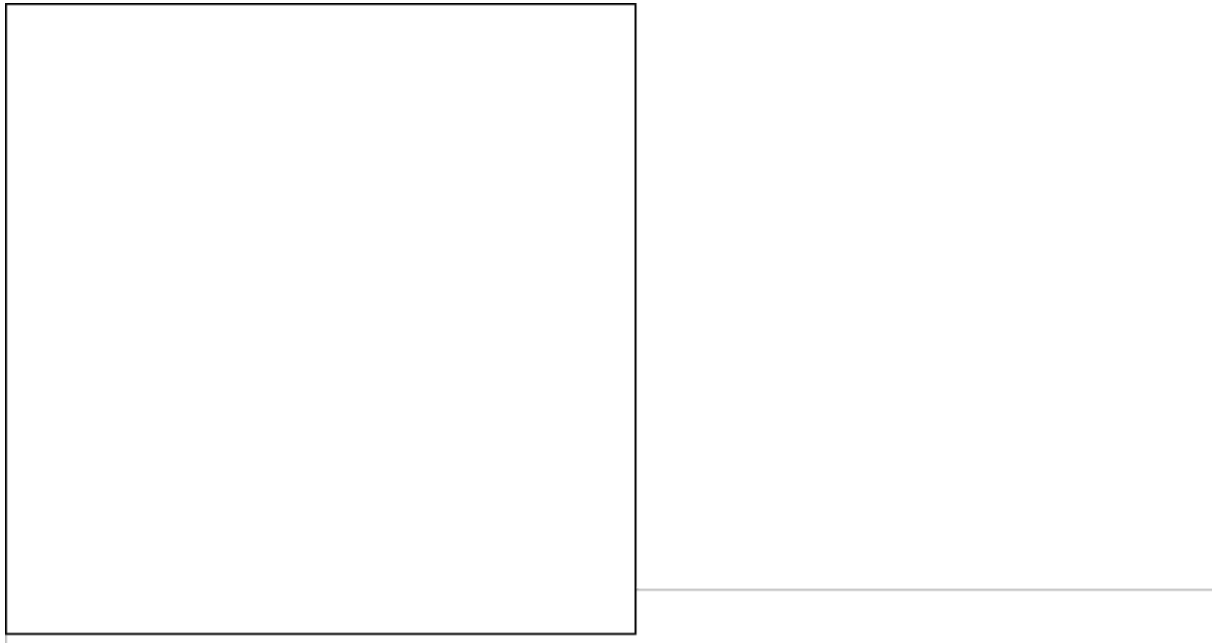
- [omissis], Director of [omissis] dormitory at [omissis] University stated *“IOM have provided the dormitory with many things that are very helpful for the students. 300 rechargeable lamps provided help the students study and they maintain charge for nine hours, which is enough for them. The air conditioners are helping the students considerably in the summertime as summer is very hot and when they come back from the university, they need a cool room. The beds and closets helped the students to organize their rooms.”*
- [omissis], representative of the municipality regarding the rehabilitated [omissis] Guest House: *“The guest house is an essential facility of the community, especially in remote villages. Thanks to the rehabilitation, we’re able to use the place for meetings on social occasions, for public meetings including weddings and funerals”.*
- [omissis], head of the [omissis] culture office explains *“The supplied equipment and furniture will be used by culture office staff and also community members and CSOs in the area who implement soft activities like workshops, training sessions and meetings.”*
- The director of [omissis] hospital regarding the generator provided by IOM: *“Now the hospital has back-up electrical supply to clinical areas, so that operations can be completed in the event of a power failure and the hospital is totally self-sufficient.”*
- [omissis], a municipality representative said regarding the rehabilitation of [omissis] School in [omissis]: *“Some parents were not sending their kids to the school because the environment was not safe: toilets were very old and there was not enough space for everyone, students were sitting in the corridor. I’m glad now we can offer an appropriate space for our students.”*
- [omissis] mayor regarding the construction of a garden in albakhi municipality: *“This garden is the first in the area and the only entertaining and open space where children and women can seek stress relief and recreational activities. This will have a significant impact on people*

and we'll ask communities to help us in taking care of the gardens." n people and we'll ask communities to help us in taking care of the gardens."

Only two of them think that situation remained the same for the following reason:

- Regarding the rehabilitation of [omissis] Secondary School for Boys, the School manager said: *"the rehabilitation is good but not as I was expecting, for example there have been cracks on two windowpanes, and the two classes with this problem will not be used until the windows are repaired. The building has 16 classrooms out of which 10 are in use while 6 still lack desks and whiteboards and do not have air conditioning. "*
- Regarding the rehabilitation of [omissis] football pitch, the staff said: *"Rehabilitation was good, but unfortunately people and municipality are not taking care of the space. Also, there are often disputes between residents to use the space and some of them damaged the facility."*

Also, 39 out of 45 said that they were satisfied with the process (transparency, efficiency, communication) by which the work was done. Finally, the table below showed the replied of the two questions used to measure progress related to the objective indicator: *% of surveyed residents of areas of intervention who express improved perceptions of their local authorities, other tribes, and migrants, including IDPs and returnees and the economic wellbeing of their community.*



II.2.4. Outcome 3: Libyans and migrants in communities affected by conflict and mass migration have stable and dignified livelihoods

Under the livelihood component, IOM contributed to create conditions for the improvement of entrepreneurship and livelihood opportunities to stimulate local economic development and lay the foundations for improved stability. Through its implementing partners, which include CSOs, private sector organizations or vocational training centres, the IOM aims to build the capacity of aspiring and existing entrepreneurs in starting or expanding their businesses in line with their needs, as well as support them with small grants.

With the first initiative implemented in March 2019, IOM supported the facilitation of a consultation workshop attended by 104 people, including farmers, experts, academics and representatives of

various ministries (including the Minister of Agriculture and Livestock, Members of Parliament, Deputy Minister of the Ministry of Local Government and Agricultural Advisor to the Presidential Council) on how to combat the date pest⁷, which is a significant threat to the livelihood, income generation and food security of date farmers. As an output of the consultation workshop, participants have agreed on a plan of action along with a list of recommendations as a way forward to transfer the knowledge shared during the seminar.

Also, to diversify micro-entrepreneurship support in the agriculture and livestock sector, which is believed to engage a significant number of migrants, IOM commissioned the research group, [omissis] with the task to assess the agricultural and livestock sector and provide a better Selection of the four grants was done taking into consideration the local market to each location, offering opportunities for women in home-based businesses and with relatively low set-up costs, such as mobile phone repair. It was determined that each participant would receive a business toolkit to commence work directly after completion of training.

Activities were completed and in total, 205 people (105 men and 99 women) were involved in vocational and business skills trainings and provided with toolkits (135) or grants (21) understanding of gaps, needs and support opportunities in this sector. This study found that financial support in the form of investments, loans and grants could be a key to unlocking potential in the sector (see *Annex CS6 - Agricultural Assessment Report*). Farmers believe it will help in creating employment opportunities for youth and migrants. It is perceived that procurement of machines and equipment will enable more cultivation of land and improved income. Technical support, such as trainings in skills specific to the various agricultural sectors is also considered to be vital for greater productivity. The assessment found that enhancing the technical skills of farmers and their employees is perceived by farmers to be instrumental in increasing production quality and productivity, along with the protection of livestock and crops from diseases. Direct support providing seeds, fertilizers, fodder, and other basic materials and machinery is considered relevant for promoting the production of agricultural outputs.

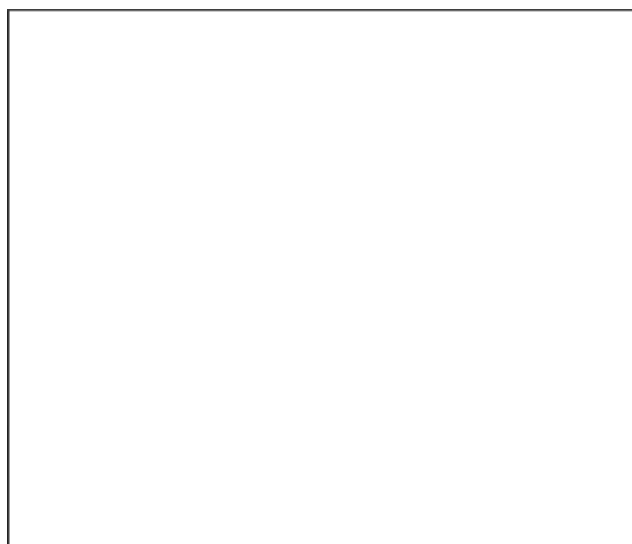
As described under *Outcome 1*, in June 2019 IOM launched an EOI encouraging local CSOs to propose projects focused on livelihoods and community cohesion in each of the four regions of intervention ([omissis], [omissis], [omissis] and [omissis]). In addition to the M&E data collected during the implementation – pre and post tests training results, livelihoods survey, training evaluation – a survey was conducted with 107 participants after three months of the grants closure to measure participants satisfaction, understand challenges and capture impact.

The survey contained quantitative and qualitative question to understand participants perception on the new technical skills acquired during the trainings and if they're using them together with the toolkits provided.

Also, respondents were asked if this programme helped participants to open or improve their business. To this question, respondents were divided between those that declared that confidence in themselves and the toolkits received after the training helped them (44 out of 107) and those that were “partially agree” (44 out of 107) since due to several challenges (COVID-19 pandemic, market competition, personal issue) were still not able to open their business. Also, in general, data showed that women were more successful and confident than men in opening their business and declared that their economic situation after the project improved. Below the table summarizing the replies to the quantitative questions:

⁷ Dates are a major source of income in Libya. According to the agricultural and livestock assessment conducted, “across all three locations, the most commonly produced agriculture output are dates”. Moreover, farmers across the three cities see dates as the crop that provides the highest yield.

| | The vocational training and/or the business coaching sessions have increased your technical and educational knowledge. | Are you using the skills and knowledge provided in the courses in your work/business? | The toolkits provided by IOM have helped to open/improve your work/business | After the project, your confidence in the ability to financially support yourself (and your family) has improved | The project has given you necessary skills to access the job market and it will help in your future work/business |
|------------------------|--|---|---|--|---|
| Agree | 96 | 68 | 44 | 79 | 82 |
| Partially agree | 10 | 28 | 44 | 15 | 20 |
| Disagree | 1 | 7 | 4 | 2 | 4 |
| N/A | | 4 | 15 | 11 | 1 |

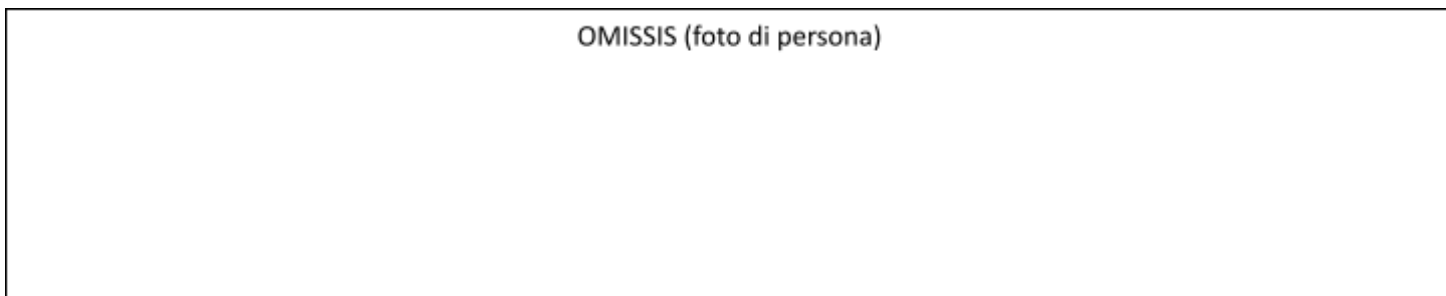


Description of the grant implementation is outlined here:

1. [omissis] – Business management training:

This project aimed to support livelihoods in [omissis] by building the capacity of local entrepreneurs in improving their business practices through a training workshop and practical mentorship. To ensure sustainability of previous intervention, 21 (12 males and 9 females) entrepreneurs supported by IOM in 2018, were selected to receive additional individual and professional guidance and toolkits to revitalize their businesses. During the final ceremony on 5 November, all participants received a toolkit and the three best business plans received a cash award. [omissis], one of the winners said: *“The COVID-19 outbreak was a very difficult period for small entrepreneurs like us. I was almost closing my shop, but this project gave me hope and the necessary tools and skills to restart. Today I met some possible customers and during the training I learnt how to use social media to reach more people and advertise my products. I’m very satisfied”*.

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2. [omissis]– Vocational training:

This project aimed to improve livelihoods in [omissis], [omissis], [omissis], and [omissis] through vocational training workshops, business management courses and with toolkits to allow for immediate implementation of newly gained skills. In total, 125 community members including 105 youth between 16-28 years and 20 adults between 28-35 years (63 males and 62 females) were trained in different sectors. In [omissis], a two-week training workshop on air conditioner maintenance for men and mobile phone maintenance for women was organized in early September 2020. Between October and November, in [omissis], [omissis] and [omissis] participants were trained on mobile phone maintenance, food preparation and packaging, air conditioning and refrigeration repair, allowing for a diverse contribution to local markets. During the closing ceremony, all participants received toolkits to enable them to start work immediately and set up their businesses.

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3. [omissis] – Entrepreneurship: This project aimed to increase the capacity of youth from [omissis], [omissis], [omissis] and [omissis] to engage in entrepreneurial enterprises and improve skills and knowledge needed for employment opportunities. The CSO implemented an incubator-style training programme with in-person and online courses, followed by job experience and mentorship. 50 participants (12 females, 38 males) selected from the four regions were trained in-person on soft skills and business skills and were able to submit business plans to be evaluated. 10 out of 50 participants were declared winners of the competition and they were provided with in-kind support in the form of financing for purchase of equipment to commence their businesses. Besides in-kind support, [omissis] is also mentoring all participants on their businesses and this mentorship will continue beyond the duration of the project.

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4. [omissis] – Women’s economic empowerment: This project aimed to contribute to improved livelihood of women through vocational and business management training paired with the provision of toolkits. In addition, the CSO contributed to social cohesion by including women from different tribes, ethnicities, and groups, working together toward common goals. After the first training session implemented in [omissis] from 16 – 22 August 2020 for 16 women from south and west Libya, in November, successful women business owners were then

invited to exchange and share advice with the participants and guide them to create their own small business. Participants also received in-kind support to develop their businesses. In the second phase of the project, which took place in October 2020, 13 out of the 16 women presented their business plans in a competition in [omissis] and a panel of judges selected eight winners in different sectors such as a bakery, two beauty salon, two handcrafts initiatives, a skin center, a painting studio, a homemade food shop who will have their projects funded.

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II.3. Migrant Resource and Response Mechanism

The Migrant Resource and Response Mechanism (MRRM) is a modality of service delivery through mobile teams which seeks to support migrants through a comprehensive approach which aims to bring together through one mechanism a wide range of services and needs based assistance to vulnerable migrants

II.3.1. Outcome 1: The MRRM provides improved protection and assistance to vulnerable migrants

This project was instrumental in allowing IOM to establish MRRM intervention in two locations – [omissis] and [omissis]. The MRRM component has successfully translated the resources into tangible and quality outputs and outcomes in accordance with the stated plans. The project enhanced the migrants' access to basic services including life-saving services and the capacities of local government officials and stakeholders to understand migration related issues, including migration governance.

The activities were successfully implemented, thus allowing to reach intended results, although IOM was forced to adapt some awareness sessions due to COVID-19. The activities were designed and implemented to address the most pressing needs among migrants especially with the evolvement of COVID-19 pandemic. In addition, the project had effective partnerships in place to reach a large number of migrants and communities. The team established communication with the community leaders, migrants focal points, and local stakeholders including crisis committees, municipalities, border police, civil society organizations and others, which contributed to build strong and systematic coordination mechanism among different groups involved in migrants and migration management issues in these areas to ensure proper and timely response is provided as needed based on the available resources.

II.3.1.1. MRRM integrated assistance

MRRM teams were composed of a team leader, one female and another male case workers, a nurse and a medical doctor. The team in [omissis] had two female case workers to facilitate their mobile outreach due to the cultural standards in the city. MRRM activities were mainly implemented through two mobile teams in various areas of [omissis], [omissis] with high concentration of migrants, and at MRRM base in [omissis] and [omissis] on specific occasions and situations. The medical team was joining the outreach visits based on weekly schedule. The schedule is prepared in coordination with the whole MRRM team, where the team leader takes the lead and shares the weekly outreach plan. These schedules were also coordinated with Migration Health Department (MHD), Displacement Tracking Matrix (DTM) and community leaders to identify the most suitable and feasible locations, for the maximum benefits of migrants from the outreach intervention.

Due to the COVID-19 evolvement in March 2020 and its consequences on migrants' situation, IOM scaled up its intervention and increased the team capacity by hiring additional case workers to support the delivery of services to migrants. Due to the high needs reported by the migrant community leaders and corresponding municipalities' officials, MRRM teams were also able to reach locations far west toward [omissis] (nearly 30 km from [omissis]), and [omissis] and [omissis] located more than 60 km south of [omissis] center.

Through this integrated service delivery model, IOM managed to mitigate many of the difficulties faced by migrants living in urban areas of [omissis], [omissis] and [omissis] and neighbourhood areas with high concentration of migrants. MRRM facilitated their access to basic services to help them survive the daily difficult situations they may confront due to the volatile security and economic situation in Libya, especially after the evolving epidemic of COVID-19.

II.3.1.2. Needs Assessment

IOM has been utilizing the Displacement Tracking Matrix (DTM) Migrant Reports, which are published every two months, as one of the references to inform the MRRM intervention by taking into consideration the overall needs per locations. For example, at the beginning of 2020, DTM Round 28 Migrants' Report⁸, identified substantial humanitarian needs and vulnerabilities especially among unemployed migrants, recent arrivals and female migrants, while limited access to essential public services was reported as a cross-cutting issue affecting the majority of Libya's migrant population. Particularly, access to health services emerged as a critical constraint with 74 per cent of the interviewed migrants reporting limited or no access to health services. Also, food security assessment conducted during April and May 2020 found that migrants who are: i) unemployed or rely on daily casual labour, ii) those who have been in Libya less than a year, or iii) those living in urban centres in Western Libya and along the main migratory routes are more likely to suffer from

⁸ Migrant Report Rounds 28 (Oct-Dec 2019), IOM DTM, Libya, 2020, URL: <https://migration.iom.int/reports/libya-%E2%80%94-migrant-report-28-oct-dec-2019>

high levels of inadequate food consumption⁹, especially after the evolvement of COVID-19 pandemic. Of a total 1,350 surveyed migrants, i) 56 per cent of migrants reported having to compromise food intake mainly to save money to meet other critical needs such as health and rent, ii) 34 per cent were considered marginally food secure, and iii) 32 per cent had inadequate food consumption levels.

In addition, for more concrete and ongoing needs assessments, MRRM teams conducted mapping exercises to assess the targeted groups' situation and provided them with assistance services, as per the on-site needs' assessment and on referrals from other units inside IOM or other humanitarian stakeholders. Hence, before distributing assistance items such as non-food items (NFIs), clothing or food kits, MRRM staff conduct field visits and talk to migrants who are usually concentrated near each other in urban settings. This allowed the team to find out what the migrants' main needs are. To respond to the differences in needs, MRRM has adopted the modality of distributing customized NFIs rather than pre-set packages, in order to support people with exactly what they need, as some need mattresses, others would need hygiene kits, etc. Through this process, including the mobile outreach activities and the coordination meetings with the stakeholders, MRRM team has improved the mapping and identification of migrant needs for better response.

Moreover, the volatile security situation in some districts of [omissis] and bordering areas of [omissis] during the project activities implementation had affected the conditions of migrants living there and the implementation of activities. The IOM had to cancel outreach activities to specific areas on several occasions, due to the ongoing conflict and high risk during several days of 2020. IOM worked with migrants' community leaders to target migrants in distress living in remote unsafe locations and provide them with assistance based on the available resources.

During the challenging conditions of COVID-19 pandemic and its negative effects on migrants in Libya, MRRM teams were able to reach many migrants who were facing a difficult reality in Libya and struggling to secure their basic needs, just like the cases of [omissis] and [omissis] (Please see *Annex M3 Story1 Relief after captivity* and *Annex M4 Story2 Dignity* for the baring for a full account of Alpha and Maimai stories). With the generous support granted under this Fund project, the IOM-MRRM project was able to support migrants and provided them with basic services such as health, food, and NFIs.

OMISSIS (mappa)

II.3.1.3. In-kind assistance

MRRM field teams were able to assist **12,648 migrants with NFIs** among them more than 693 household and another **3,388 migrants** with food kits among them 322 households, during the project period. As mentioned above, the food and NFIs distributions were based on an on-site needs' assessment conducted by the team during outreach or through referrals from other units inside IOM or other agencies and stakeholders such as local and international organizations, or migrant community leaders. The distributions supported migrants to cover their food, nutrition and other

⁹ [IOM Libya – Migrant Emergency Food Security Report \(May 2020\)](#)

needs, contributed to the improvement of their health and living conditions, and helped migrants to allocate resources towards meeting other basic living needs. The NFIs included: summer and winter clothing kit, hygiene kit, mattress, plastic sheet, kitchen set, sanitary pads, winter and summer blanket, diapers, and solar lamp, while the food kit was composed of: 1 Kg white flour, 1 kg Pasta, 1 kg Rice, 3 x 400 g canned chickpea, 3 x 400 g canned red beans, 3 x 400 g canned green peas, 3 x 400 g canned beans, 1 Litre bottle veg oil, 2 x 400 g canned tomato paste, 5 x 160 g canned Tuna , 0.5 kg sugar, 0.5 kg halwa, 2 tea packets, 0.5 kg salt and 1 pack date biscuit.

Beneficiaries were targeted based on a combination of soft and specific vulnerability criteria, and included women, single headed households, unaccompanied minors, new arrivals, medical cases, and protection cases. That also included Libyan beneficiaries, as IOM has been implementing the activities following the do-no-harm approach to mitigate the potential unintended negative effects by supporting only migrants and neglecting other cases with vulnerability from the host community living in the same districts.

OMISSIS (foto di persona)

II.3.1.4. Health care service provision

The MRRM medical teams started the delivery of services in September 2019 after receiving an induction session and the required equipment, medicines and supplies. The medical team consists of a medical doctor and clinical nurse. The teams have been arranging and conducting mobile outreach clinics in selected communities of different localities in [omissis] and [omissis] municipalities. During the project period, health consultation and assistance was provided to **7,379 migrants (5,224 men and boys, 2,155 women and girls)** in the communities.

On specific situations, depending on the criticality of the cases, while at MRRM office, the medical doctor and nurse received migrants and provided the medical assistance required in terms of medical consultations, surgical consultations, minor surgical management, regular dressings, health awareness and promotion, and referral to secondary and/or tertiary health centres. The teams were provided with all the required medicines, consumables and supplies that are required to support the primary health care needs; and are replenished on needs basis. Similarly, any additional equipment is added on need basis and out of order equipment is repaired or replaced to ensure continuity of services.

Health activities became ever more important once COVID-19 was declared a pandemic in March 2020. In addition to the existing primary health care services, screening for symptoms of COVID-19 and risk communication activities were added. During the evolvement of the virus and due to the border closure between [omissis], hundreds of [omissis] migrants were stranded at the Libyan border and have suffered of the situation being with no resources. Regular outreach visits were arranged to [omissis] border (50 Km west of [omissis]) during the COVID-19 full curfew, to provide assistance and health care to stranded migrants whereby multiple cases with trauma and injuries were treated, many cases were provided with simple surgical dressing and stitching, others with medical problems were provided with medical examination and medications.

Based on the weekly schedule, outreach medical clinics were arranged in urban settings having significant migrant population. These visits were scheduled by MRRM team leader and coordinated with Migration Health Department, DTM and migrant's community leaders, and follow a mapping exercise that was conducted at the launching of MRRM activities, which targets the points of migrants' gatherings, urban migrant communities, and houses of migrants workers etc. Joining the MRRM outreach mobile team, the medical teams, equipped with medications, medical dressing consumables, and medical examinations tools, inspect the migrant's communities and examine migrants with any medical conditions. The medical examination guided the clinical decisions, whether the sick migrant is provided treatment or management on site or referred for higher services, whether diagnostics or management.

During the project period, the outreach medical visits targeted multiple points in [omissis] and [omissis] and reached to remote areas to meet the big number of requests for assistance coming from the different localities. The outreach teams also provided health education to the migrants in the communities, including advice on prevention of COVID-19, as part of awareness raising activities.

II.3.1.5. Referral to Hospitals

Through the contribution of this project, a significant number of cases were referred to secondary and tertiary health care facilities. Many of those referrals were urgent and lifesaving, and some of them sick children, pregnant ladies for antenatal, natal and postnatal care, psychiatric cases and highly suspected TB cases. The referrals were both for diagnostic purpose and inpatient care. In order to facilitate such referrals, IOM used its already established mechanism of agreements with hospitals and ambulance service, which ensured swift and smooth referrals and remained instrumental in preventing mortality and disabilities.

During the project period, **338 cases** were referred for further follow up internally within IOM before expanding MRRM services to include health assistance and among them, 79 were referred externally to hospitals and other health facilities for specialized care.

II.3.1.6. Protection

Basic principles for migrant protection and assistance are core elements of MRRM. These include self-determination and participation, non-discrimination, respect and protection of human rights, informed consent, age, gender and diversity (AGD) mainstreaming, data protection, accountability to affected populations (AAP) and protection from sexual exploitation and abuse (PSEA). Throughout the implementation of the project activities, MRRM team has established synergies with other units including the IOM Protection unit and established a referral mechanism to assist migrants of special needs for further case study and counselling. During the project period, **26** cases were referred to the Protection unit (including cases of child protection, cases for alternatives to detention (ATD) and other cases with specialized needs) for further counselling and support. On the other side, the protection unit has referred several protections cases to receive assistance through MRRM services.

II.3.1.7. Cooperation with partners and referrals

MRRM teams have established cooperation with other units within IOM and with external stakeholders including migrant community leaders, local government entities and other humanitarian agencies to receive referred cases seeking to benefit from MRRM services and to exchange information to improve the management of migration flows in [omissis] and [omissis]. Along with the outreach activities, MRRM teams have been coordinating with relevant stakeholders to exchange updates about the ongoing activities, share information about issues of concern related to migrants' needs and discuss possible synergies during the delivery of services to migrants. In addition, these meeting have helped to receive updates on new arrivals to ensure appropriate assistance is provided to them as needed. Throughout the implementation of activities, MRRM

conducted regular meetings with migrant community leaders. For other migrant communities which have no representatives, the teams have been coordinating with focal points or directly through the door-to-door outreach. The meetings focused on discussing and planning referral mechanisms to MRRM and migrant needs in the community, in particular due to the COVID-19 epidemic. MRRM also conducted a meeting with the Common Feedback Mechanism (CFM) team working with [omissis] – an Implementing Partner for [omissis] - whereby an information session was organized to provide details about IOM MRRM activities to facilitate the feedback and referral mechanism through the CFM programme. Moreover, during MRRM outreach activities, MRRM teams distributed IOM helpline cards to more than 4,000 migrants to ensure they can reach MRRM teams when needed.

Also, MRRM in [omissis] and [omissis] registered and referred 299 cases seeking to return home to the Voluntary Humanitarian Return (VHR) programme. Although referred to other programmes within IOM, these migrants were also provided with assistance from the MRRM programme as needed. In addition, 22 cases were referred internally to IOM MHPSS unit for further follow up and consultation.

On the other side, as part of MRRM partnership with other stakeholders to enhance the management of the migration flows in urban settings and the provision of services to those in needs, IOM collaborated with the [omissis] in [omissis] and [omissis] office in [omissis]. This partnership has consequently contributed to provide direct assistance including food baskets and NFIs to 1,807 migrants.

II.3.2. Outcome 2: Migrants understand the risks of irregular migration and are informed on available services

MRRM designed Informed Migrants (IM) Campaign that aims to raise awareness about the dangers of irregular migration. The campaign key messages focused on: the risks associated to irregular migration, health-related risks, IOM services and alternative pathways available for migrants in Libya, and promoting IOM-Libya helplines.

The campaign Information, Education and Communication (IEC) materials included: pocket guide, flyers, posters, comic book, rollups, helpline cards, social media platforms and an animation video¹⁰. The designed materials illustrated the diversity of migrants in Libya, representing different nationalities, gender, and age groups. Additionally, the campaign materials were available in English, Arabic, and French which are the major languages spoken among migrant communities in Libya. The language used in the IEC materials was simplified and supported by visual illustrations to suit different literacy levels.

IM campaign strategy (Annex M1 – Informed Migrant Info Campaign - Dissemination Strategy) detailed various tools and channels for dissemination of the campaign content to ensure a comprehensive outreach. The campaign video was available in Arabic and English, and they were disseminated starting February 2020 through IOM Libya social media accounts¹¹. Online platforms



Figure 12: IM Campaign IEC Material

¹⁰ IM Campaign materials are available on this [link](#).

¹¹ IM campaign video Facebook outreach can be viewed [here](#).

such as Facebook and twitter were used, however not all migrants have smart phones or regular access to Internet. Alternatively, printed IEC materials were the main source of information which migrants can also keep with them after the sessions. In total 8,875 printed IEC materials were distributed in [omissis] and [omissis].

MRRM teams organized direct awareness sessions at MRRM base and as a side activity to other activities implemented during outreach. During these sessions, migrants received the #InformedMigrant booklet in their respective language. Nevertheless, sometimes this was logistically challenging, due to large numbers, space, and COVID-19 precautions. Alternatively, booklets were distributed to migrants and referring to hotline numbers, in case migrants are inquiring more information. The evolving situation of COVID-19 limited the implementation of awareness activities to big groups especially through cultural events. IOM has increased the team capacity to reach out to more migrants and achieve the project target through IM campaign activities including direct awareness and social media.¹²

II.3.2.1. Direct Awareness Sessions and IEC Distributions

throughout the project, 7,507 migrants attended the direct awareness sessions and a cultural event which were organized at the MRRM base and through outreach field visits in [omissis] and [omissis]. Figure 13 illustrates the gender breakdown of migrants who attended the direct awareness sessions. Due to COVID-19 precaution measures, the session size was limited to 10-15 attendees. During these sessions, each migrant received an IM pocket guide in their respective language. The table below summarizes the numbers of migrants attended awareness sessions and distributed IEC materials.

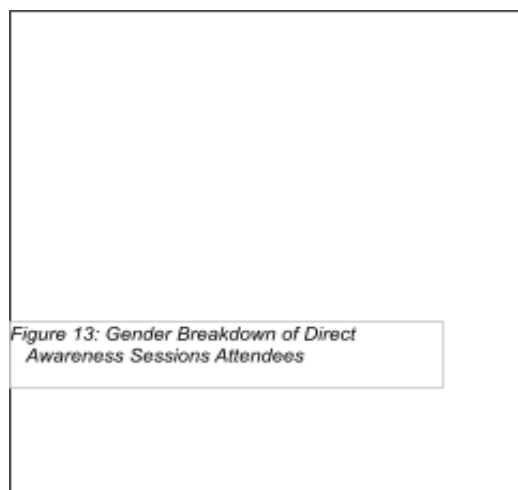


Figure 13: Gender Breakdown of Direct Awareness Sessions Attendees

| Location | Total # of sessions | Total # of Migrants | Gender Breakdown | | | | IEC Materials | | | |
|-----------|---------------------|---------------------|------------------|---------|------|-------|---------------|---------------|---------|----------|
| | | | Males | Females | Boys | Girls | Flyers | Hotline Cards | Posters | Booklets |
| [omissis] | 273 | 4575 | 2149 | 914 | 772 | 740 | 3 | 2916 | 35 | 2068 |
| | 232 | 2932 | 2326 | 393 | 163 | 50 | 2 | 1431 | 17 | 2403 |

Figure 14: Summary of Direct Awareness Sessions

MRRM Field teams were briefed on the guidelines developed to explain the main questions and steps to be taken while conducting interviews and awareness sessions for migrants. During the briefings, information and awareness messages were also discussed with a strong emphasis on sensitivities to ensure the respect of migrants' cultural backgrounds. IOM medical teams took part in the dissemination of health awareness information related to COVID-19 and the precautionary measures that can reduce related risks using materials provided by the Ministry of Health in Libya.

OMISSIS (foto di persona)

Moreover, one cultural event was conducted in [omissis] in celebration of the International Migrants Day. The MRRM team used this opportunity to conduct awareness-raising activities as well as recreational activities, including a film screening for children and psychosocial group sessions for 28 migrants including 16 children from [omissis], [omissis], [omissis], [omissis] and [omissis].

Overall, the programme raised awareness in the migrant community about the risks of irregular migration through awareness raising sessions, brochures and videos. Consequently, many migrants have expressed to the teams that the information received were useful, easily understandable, and they noted that they were sharing the information they learned with other migrants, especially the ones who were considering migrating irregularly, and migrants' access to humanitarian services has improved due to the information shared. Nevertheless, even though these sessions provided the knowledge and awareness of high risks involved in irregular migration and contribute towards encouraging migrants to make informed and safe decisions regarding migration, and also in encouraging their peers to do the same, it is not possible to say that it was sufficient to deter migrants from irregular migration, as knowledge on its own is not sufficient to trigger behaviour change. IOM will continue the dissemination of awareness raising materials to target migrants' communities especially new arrivals to ensure that the right information is received about the risks of irregular migration, and the alternatives including the legal pathways, voluntary humanitarian return and other services available to support migrants living in distress.

II.3.3. Outcome 3: Local authorities and stakeholders have improved capacity to effectively respond to migration flows and the knowledge on migration management and related laws

In addition to the partnership with local stakeholders to enhance their capacity to respond to the migrants needs, IOM has organized two capacity building trainings for MRRM staff and one training - Certificate in Migration Governance (CMG) - to local authorities and stakeholders. In collaboration with the Centre for Migration and Refugees' studies in [omissis] and IOM [omissis], the CMG training was organized for six days during 5-10 December 2020 at [omissis] in [omissis], covering the following topics (*Annex M2 - Certificate in Migration Governance Libya Agenda*):

- o Introduction to migration and migration governance.
- o Migration and development.
- o International migration law and international refugee law.
- o Trafficking and smuggling of migrants.
- o Labour migration and human mobility.
- o Global Compact for Migration (GCM), Migration Governance Framework (MiGoF), and migration in Sustainable Development Goals (SDGs).

This training was in line of the [omissis], and IOM efforts to strengthen the capacity of governmental and non-governmental actors who are working on migration related issues in Libya on improved migration management practices in dealing with migrant communities and individuals.

Due to the COVID-19 pandemic and subsequent travel bans and other restrictions imposed by the government which prevented the training facilitators to travel to Libya, the sessions were facilitated virtually by thematic experts working with IOM and [omissis], with the support of IOM Libya staff in Libya.

OMISSIS (foto di persona)

Out of the total 26 participants attended this training, six of them were females. The trainees came from [omissis], [omissis], [omissis], [omissis], and [omissis] affiliated to following organizations:

- [omissis];
- [omissis];
- [omissis];
- [omissis];
- [omissis]; and
- [omissis].



In the overall evaluation, 96 per cent of the participants agreed that the training is aligned with their learning needs, and the training content was relevant, engaging, and sufficient and that the facts and statistics included within the training were new to their knowledge. The majority of the trainees were satisfied with the facilitators' expertise in the delivered topics and their responses to the participants inquires. While 88 per cent of the participants agreed that facilitators used interactive techniques, other participants requested to use more activities and group discussions and suggested to focus more on the Libyan context, and have a session introducing the principles and basics to host refugees in European countries. Additionally, all participants were able to reflect the training content into practice at their day-to-day job and they recommend others to attend as they will benefit from the case studies and the international agreements and accords presented within the training sessions and they stated that it is important for their colleagues to know the different concepts of migration and its development.

OMISSIS (foto di persona)

Regarding the training duration, 88 per cent of the participants said the duration was convenient. While 96 per cent of them marked the program as well-sequenced. In terms of organization and facilitation, overall, the participants were satisfied by the performance and professionalism of the facilitators and the organizing team. Aside from the training topics, participants liked best the sessions which were facilitated through small group discussions and activities.

IOM built on this successful experience to replicate the training for government officials and other stakeholders based in [omissis] as part of the MRRM [omissis] project funded by both the [omissis] donors.

II.4. Progress Made towards Incorporating Cross-cutting Themes

Rights-Based Approach

IOM's approach to outreach and provision of assistance through MRRM mobile teams helped to minimise the safety risks faced by vulnerable migrants affected by the security situation, COVID-19 pandemic and its consequences including the food insecurity. For example, healthcare services, NFIs and food items were delivered directly to migrants at fixed locations and through door-to-door assistance, reaching individuals in urban and remote locations who had limited access to health facilities or to the markets. Home visits to target households were a means of accessing vulnerable persons who were unable to access public sites, given that women and children have been increasingly confined indoors since the advent of the COVID-19 crisis. The project has assisted IOM to maintain and expand MRRM services reaching widows, female-headed households, minors, people with disabilities, elderly, and survivors of people smuggling.

IOM also uses a rights-based approach in its programming to provide support to vulnerable and stranded migrants with return and reintegration under the Assisted Voluntary Return and Reintegration (AVRR) framework.

Gender Mainstreaming and Protection

A significant portion of female are generally less employed in Libya. Therefore, female headed households are usually at a disadvantage with regard to income generating opportunities, and they show higher levels of vulnerability and humanitarian needs across multiple indicators than male. Hence, women were prioritised as beneficiaries for the livelihoods activities and assisted accordingly. For example, for the livelihoods trainings implemented by Libya 2020, women were more than 50 per cent of total beneficiaries and the most successful – they scored very high in the post test and they said that thanks to IOM activities were able to open their business and to support their families.

IOM interventions are implemented in multiple locations with varying gender and cultural beliefs. In some locations, women are comfortable participating in mixed gender activities, such as meetings and decision-making processes, while in others, there is a general hesitation to include, or be included in mixed gender settings.

As part of an inclusive approach, incorporating the needs and wants of women, IOM has taken specific ways in which women's voices have been included along the project timelines and across all outcomes. An example of this is during the organization of awareness sessions and in meetings with focal points where women were encouraged to attend, and were extended invitations as representatives of their community during such activities. Women have been a vibrant component of the programme with their participation and engagement in the proposed activities. Community was open to support women's empowerment activities, and we see a space to push forward women engagement. For example, during the social cohesion initiatives implemented by [omissis] and [omissis] CSOs, women have been a vibrant component and were interested to engage and discuss

with local authorities; activities have also improved their confidence for example a participant of the theatre training conducted by [omissis] CSO said: *“I’m passionate about theatre since many years but I never had the chance to participate in a professional course. After this project all has changed, my family saw me performing and they were happy. I feel more confident and able to follow my dreams.”*

In the next project phase, IOM is aiming in increasing women’s empowerment initiative, mediation, and peacebuilding training opportunities that have been highly effective in encourage them as active members of the community and across divides.

During this project period, MRRM teams in [omissis], [omissis] and Subratha assisted around **280 female headed households** through MRRM services.

Accountability to Affected Population (AAP)

A crucial element of CS programming is to ensure that the needs of the most vulnerable are addressed, ensuring that the intervention creates an environment where social capital can grow, which requires a carefully designed ‘do no harm’ and conflict sensitivity length strategy. For this reason, IOM produced rapid feasibility and conflict sensitivity assessments (CSA) analysis in the in [omissis], [omissis], [omissis] and [omissis] in 2018 prior the implementation of activities. These assessments provided essential information on demography, social and economic issues, public services status of the new areas, conflict dynamics and have been used as entry points for CS programming. To ensure evolution of local context and conflict dynamics will be taken into consideration for the next project phase, IOM is updating the analysis and conducting new analysis in the possible areas of expansion of [omissis], [omissis] and [omissis] (Abusliem muhalla).

For the CS component, IOM is using a community-driven approach to consult communities for the identification, selection, handover, and endorsement of the Community Improvement Projects. This process allowed IOM to get the consensus of all stakeholders and communities to decide which projects respond to their most urgent needs and through the handover of CIPs contributed to increase ownership of the projects. Through the CIPs, IOM addressed the lack of basic health services and absence of social space for interaction and meanwhile working in coordination with local authorities and communities. Under the next grant phase, activities are continuing in these locations to cover additional needs and IOM is exploring an expansion in new areas in Fezzan applying a similar methodology.

From the beginning of the project, IOM engaged the local authorities, respective government entities and migrants community leaders in the planning and coordination of project activities through official communication or focus group discussions to ensure reliability and effectiveness of the delivered services. Also, throughout the implementation of activities, MRRM team has distributed more than 4,000 helpline cards which include IOM helpline number for any follow up, feedback or request to be addressed by the targeted beneficiaries.

Principled Humanitarian Action

While MRRM services are basically targeted to assist migrants in urban settings, as part of IOM’s do-no-harm approach and to prevent any unintended negative effects or conflict, MRRM teams have supported **38 Libyans** (19 men and boys, 19 women and girls) including five households, living in the same area as migrants, with food kits, NFIs, hygiene kits, and healthcare.

III. Progress Achieved Compared with the Indicators in the Results Matrix

| Component - VHR | Indicators | Baseline | Target | Data Source and Collection Method | Progress made during reporting period | Cumulative progress |
|--|---|-----------------|---|--|--|--|
| Objective: Returnees and beneficiaries of VHR demonstrate resilience and self-sufficiency | Increase number of voluntary returnee gainfully employed and self-sufficient 6 months after reintegration | | | | | |
| Outcome 1: Returnees are empowered to meaningfully engage in personal and community development initiatives in home or communities of return VHR | # of beneficiaries who report that their reintegration was successful and are engaged in development initiatives in the communities disaggregated by age and sex. | | 20% of the migrants entitled to receive reintegration assistance have responded to a monitoring survey and reported that their reintegration was successful | End of project evaluation Survey interviews with migrants. | | 83% of those assisted with reintegration support have operational projects which enable them to earn a monthly income that assists them in their daily expenses and supports their family needs. |
| Output 1.1: VHR mechanism are put in place to assist migrants stranded and detained in Libya | Number of vulnerable migrants returned # of migrants assisted with VHR, disaggregated by age and sex. | | 5,215 migrants safely return to their countries of origin. 20% of the overall returnees received reintegration assistance under this fund | Return log/records, Family Tracing Log, Final Manifest, Reintegration assistance and assessment record | | 8,928 migrants (7,162 male, 1,766 female) migrants safely returned to their countries of origin. 1,574 (1442 males 132 female) assisted with reintegration |
| Activities 1.1: <ul style="list-style-type: none"> • Conduct outreach, provide individual counselling, screen for vulnerabilities and determine needs for reintegration assistance based on vulnerability • Organize transportation to the country of origin, including pre-departure assistance within Libya and during transit • Provide, follow up and monitor reintegration support given in the country of origin, and conduct interviews with reintegrated migrants. | | | | | | |

| Component - CS | Indicators | Baseline | Target | Data Source and Collection Method | Progress made during reporting period | Cumulative progress |
|---|---|-----------------|---|---|--|--|
| <p>Objective: To support the stability and resilience of conflict-affected communities in Libya</p> | <p>% of surveyed residents of areas of intervention who express improved perceptions of their local authorities, other tribes, and migrants, including IDPs and returnees and the economic wellbeing of their community</p> | | | | | <p>96% of beneficiaries said that the activities helped them to connect with people outside my own community (Outcome 1). 90% said that activities helped to create a more peaceful environment and 90% feel that authorities have been responsive to their needs through the project (Outcome 2). 78% feel to have better livelihoods opportunity in the future after participating in the project. (Outcome 3)</p> |
| <p>Outcome 1: Improved community social cohesion enables the successful and mutually-beneficial integration of migrants.</p> | <p>% of surveyed respondents indicating positive experience in being engaged with other community groups</p> | | <p>60 % of surveyed respondents indicating positive experience in being engaged with other community groups</p> | <p>Survey reports containing baseline and end line data from research conducted by IOM staff and Libyan</p> | | <p>90% of surveyed respondents indicating positive experience in being engaged with other community groups (average between</p> |

International Organization for Migration (IOM)

| Component - CS | Indicators | Baseline | Target | Data Source and Collection Method | Progress made during reporting period | Cumulative progress |
|---|---|---|---|---|--|---|
| | | | | research contractors. | | interviews collected under Outcome 1) |
| <p>Output 1.1: Capacity of local government's/NGOs are enhanced to provide basic PSS and Health services to targeted communities</p> | <p># of community members who participated in community stabilization and cohesion promotion activities</p> <p># of community outreach and information campaigns conducted</p> <p># of Community Management Committee inception meetings held</p> | <p>5 promotion activities were conducted between 2016-2017</p> <p>2 meetings with inception CMC</p> | <p>100 community members, will participate</p> <p>8 campaigns</p> <p>4 meetings</p> | <p>Activity attendance sheets. Photos. Sign-in sheets. Invitee lists. Event reports from field staff with time-stamped and geotagged photos. CMC member contact lists. CMC meeting minutes. Lists of priority projects from CMC meetings. Event reports from field staff with time-stamped and geotagged photos. Training plans. Trainee sign-in sheets and trainee contact forms. Attendance reports. Scheduled and ad hoc reports from IOM project staff. Interviews with trainees. Pre-tests and</p> | | <p>4,493 (3,668 men and 825 women) community members participating in community stabilization and cohesion promotion activities</p> <p>30 community outreach and information campaigns (10 community events and 20 outreach events)</p> <p>19 Community Management Committee (CMC) meetings</p> |

International Organization for Migration (IOM)

| Component - CS | Indicators | Baseline | Target | Data Source and Collection Method | Progress made during reporting period | Cumulative progress |
|--|--|---|--|---|--|-----------------------------------|
| | | | | post-tests. Signed certificates. Activity attendance sheets. Photos (for crowd size). Sign-in sheets. Reports from PSS practitioners. | | |
| <p>Activities 1.1:</p> <ul style="list-style-type: none"> • Conduct community outreach initiatives and information campaigns, including traditional authorities and representatives of host, migrant and IDP communities • Conduct inception meetings with the newly formed CMCs in [omissis] and [omissis]h • Identification and capacity building of local municipal/local authorities, NGOs/CSOs to support social cohesion promotion and peace building activities • Provision of psycho-social support (PSS) training to health practitioners and CSOs in [omissis]h and [omissis] • Provision of material and equipment for PSS activities in the four areas of intervention | | | | | | |
| <p>Outcome 2: Communities affected by conflict and mass migration have their needs for basic services met by capable local government actors</p> | Increase in access to essential services according to sex, age, provided by local governments | | At least 15 QIP are functional and are accessible to IDPs and host communities | Survey reports containing baseline and end line data from research conducted by IOM staff and stakeholders | | 35 QIPs functional and accessible |
| <p>Output 2.1. Common infrastructures are rehabilitated to provide essential services to IDPs and host communities</p> | # of quick impact projects (QIPs) implemented for infrastructure rehabilitation or provision of basic services | 60 QIP has been implemented between 2016-2017 | At least 20 QIP will be implemented (5 in each area) | Survey reports containing baseline and end line data from research conducted by IOM staff and stakeholders | | 35 QIPs functional and accessible |

International Organization for Migration (IOM)

| Component - CS | Indicators | Baseline | Target | Data Source and Collection Method | Progress made during reporting period | Cumulative progress |
|--|---|--|---|-----------------------------------|---------------------------------------|--|
| Activities 2.1: <ul style="list-style-type: none"> Quick impact maintenance and rehabilitation of common infrastructure and or provision of equipment for essential services delivery | | | | | | |
| Outcome 3: Libyans and migrants in communities affected by conflict and mass migration have stable and dignified livelihoods. | % Increase in numbers of beneficiaries with sustainable livelihoods | | At least 80% of of in kind grants are engaged in stable livelihood activities | | | 50% of beneficiaries have improved their economical situation after the project. 74% of beneficiaries feel more able to financially support themselves and their family. 90% of beneficiaries have improved technical livelihoods capacity |
| Output 3.1: Livelihood opportunities for IDPs and host communities are improved through provision of capacity building activities | # Small scale of business management training courses conducted. # of in-kind micro-enterprise grants provided to micro-enterprise owners who complete the full training course. | 2 trainings conducted in [omissis] and [omissis] | 4 trainings 120 in-kind grants to be provided(30 in each project locations) | | | 4 livelihoods initiatives (including training component) have been completed and 205 people (105 men and 99 women) trained on vocational skills Toolkits and/or coaching guidance and grants offered to 156 beneficiaries |
| Activities 3.1: <ul style="list-style-type: none"> Small-scale business management trainings (development of sound business plans, and financial management), on-the-job capacity building, and vocational skills strengthening Provision of equipment and capital for start-up and existing business initiatives | | | | | | |

| Component - MRRM | <i>Indicators</i> | <i>Baseline</i> | <i>Target</i> | <i>Data Source and Collection Method</i> | <i>Progress made during reporting period</i> | <i>Cumulative progress</i> |
|---|---|--|--|--|--|--|
| <p>Objective: To strengthen coordination on and management of mixed migration flows in Libya through the provision of enhanced protection and assistance measures and alternatives to onward movement.</p> | <p># of migrants outside of the detention reached with various services</p> | <p>Database records, reports, pictures, videos</p> | <p>9,400 individuals</p> | <p>Database records, reports, pictures, videos</p> | | <p>30,052 migrants reached with various services</p> |
| <p>Outcome 1: The MRRM provides improved protection and direct assistance services to vulnerable migrants.</p> | <p>% of identified migrants assisted with various services</p> | <p>Database records, reports, pictures, videos</p> | <p>50% of identified migrants assisted with various services</p> | <p>Database records, reports, pictures, videos</p> | | <p>19,554 migrants outside of the detention reached with various services (referrals, NFI's, clothing kits, food kits). 7,379 migrants received health care services. This is 65% of the reached migrants.</p> |

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| Component - MRRM | Indicators | Baseline | Target | Data Source and Collection Method | Progress made during reporting period | Cumulative progress |
|---|--|--|--|--|--|--|
| <p>Output 1.1: The MRRM improves migrants' access to humanitarian services</p> | <p># of cases referred and assisted by VHR and medical assistance</p> | <p>Database records, reports, pictures, videos</p> | <p>500 cases referred and assisted by VHR and medical assistance</p> | <p>Database records, reports, pictures, videos</p> | | <p>523 migrants referred to IOM's programmes: VHR, MHPSS, Protection, Health, and 162 health cases were referred to receive additional health services externally.</p> |
| <p>Activities 1.1 Activity 1.1.1: Provision of assistance package and other critical services for migrants in distress including: registration and profiling of migrants; initial assessment of vulnerabilities; provision of NFI/hygiene kits and food bags; basic health care and psychosocial first aid; facilitation of contact with embassies or families; referral to support services such as secondary/tertiary healthcare, UNHCR, foster families and humanitarian repatriation/VHR. Activity 1.1.2: Screening for particular vulnerabilities, such as those of UMC, victims of trafficking and abuse, migrants with health and psychosocial-related needs, as well as persons in need of international refugee protection, in partnership with national authorities and UNHCR.</p> | | | | | | |
| <p>Output 1.2: The MRRM is strengthened in partnership with key stakeholders.</p> | <p># of joint meetings/information sharing sessions # of cooperation agreements with local partners</p> | <p>Mission reports, pictures, videos</p> | <p>3 joint meetings/information sharing sessions 2 Implementing Partners agreements</p> | <p>Mission reports, pictures, videos</p> | | <p>1 training conducted for 26 participants representing governmental institutions and other stakeholders. In addition, 2 capacity building training were conducted for MRRM teams. Other coordination and information sharing meetings were regularly held with migrants community leaders and focal points and other</p> |

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| Component - MRRM | Indicators | Baseline | Target | Data Source and Collection Method | Progress made during reporting period | Cumulative progress |
|--|--|---|---|---|--|---|
| | | | | | | stakeholders overall the project period. 2 partners agreements established to support migrants in [omissis] (Safe House Organization for Development and Migrants Affairs) and Subratha (Libyan Red Crescent) |
| Activities 1.2 Activity 1.2.1: Coordinate joint meetings and/or information sharing sessions with partners in Libya to discuss good practices, lessons learnt and recommendations. | | | | | | |
| Outcome 2 Migrants understand the risks of irregular migration and are prepared to deal with this issue. | # of materials prepared, published and disseminated related to the information campaign on the risks of irregular migration and on the humanitarian services | Campaigns materials (photos, videos, blog posts, WhatsApp messages, fliers, posters, etc.). Completed Migrants Assessment forms, photos, human interest stories | 8 different tools/materials related to the information campaigns | Campaigns materials (photos, videos, blog posts, WhatsApp messages, fliers, posters, etc.). Completed Migrants Assessment forms, photos, human interest stories | | 8 tools/materials related to the #informedmigrant information campaign were produced (Video, Pocket Guide, Comic Book, Posters, Banners, helpline cards, Flyers, social media platforms) |
| Output 2.1 Migrants are aware and have access to information on the risk of irregular migration | # of different types of activities organized | Mission reports, pictures, videos | 4 different types (brochures; video screening; discussion groups; individual counselling) | | | 505 informed migrants awareness sessions conducted through group discussions/awareness sessions, video |

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| Component - MRRM | <i>Indicators</i> | <i>Baseline</i> | <i>Target</i> | <i>Data Source and Collection Method</i> | <i>Progress made during reporting period</i> | <i>Cumulative progress</i> |
|--|--|-----------------|---|--|--|--|
| | # of migrants reached by the different initiatives | | <p>At least 4 special campaign and awareness activities organized throughout the project</p> <p>4,400 migrants reached by different activities related to the awareness of the dangers of irregular migration</p> | | | <p>screening and individual counselling</p> <p>Due to COVID19 restrictions, no big campaign is organized during this period</p> <p>More than 8,000 migrants reached with information campaign</p> |
| <p>Activities 1.2:</p> <p>Activity 2.1.1: Organizing meetings/trainings for partners/service providers/mobile teams on migration and migrants in Libya, awareness raising methodologies and tools.</p> <p>Activity 2.1.2: Production of videos and distribution of brochures/pocket guide related to the information and awareness raising topics.</p> <p>Activity 2.1.3: Facilitating the group discussion.</p> <p>Activity 2.1.4: Provision of individual counselling on VHR and other protection services.</p> <p>Activity 2.1.5: Organizing social events involving migrants and local communities to promote awareness related messages.</p> | | | | | | |

IV. Challenges Encountered and Actions Taken

| Challenges | Actions Taken |
|--|---|
| VHR | |
| <p>The VHR component over the course of the project faced a number of challenges related to government authorities granting access or allowing VHR flights to take place.</p> <p>During the first year of the project for example, IOM faced the challenge of DCIM not allowing access to IOM and international organizations as a whole to detention centres, even in order to receive medical help.</p> | <p>To mitigate the unpredictable challenges with regard to the Libya government's predisposition to VHR, IOM always dedicated extreme efforts to keep a cooperative relationship with all relevant authorities and to continuously talk to them and engage them. Often, this nurtured liaison has been useful in unblocking difficult situations.</p> |
| <p>During the third year of the project, following the shelling and closure of the Mitiga airport (27 October 2019) movement was suspended for two months.</p> | <p>IOM assessed the capacity and security of the areas around three airports and identified [omissis] as an alternative departure point. IOM moved migrants to the new departure points by land with the support of [omissis] who offered security escorts to facilitate access to the different check points.</p> |
| <p>The COVID-19 outbreak and closure of international airports in Libya has suspended movement.</p> | <p>IOM engaged in talks with the authorities and has requested exemption from the flight ban in order to be able to continue. However, flights only re-started in the end of August 2020. This was part of the reason for the request for a no-cost extension of this project. Once the flights resumed, IOM was able to operate one more flight under this project.</p> |
| CS | |
| <p>All CSOs faced challenges to meet the financial and M&E requirements of IOM. IOM's requirements are based on internal regulations which are in place in order to ensure transparency and accountability, but they can be very demanding on local organization who do not necessarily have full time and sufficiently qualified staff responsible for resource management and procurement. This caused delays in the implementation and in the payment instalment.</p> | <p>Prior the implementation, the CSOs completed two additional sessions on financial, monitoring and evaluation requirements which IOM organized in order to support the CSOs in their ability to meet IOM's requirements. IOM prepared a set of documents in English and Arabic, including monitoring and evaluation templates and technical Power Point slides as well as finance and logistic guidelines with the aim to enable the CSOs to better meet project requirements and coach them to improve their internal capacity. IOM provided coaching services as well as guidance to the CSOs during the process.</p> |

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| <p>Some of the CIPs were affected by increases in prices of goods and services. The unavailability of certain goods in the local markets have also caused high costs of certain items related to specific CIPs (medical equipment, pumps, high specs generators etc.). There were times where the timelines of certain activities were impacted by the security situation which caused delays and resulted in an overall NCE</p> | <p>IOM was constantly monitoring the security situation and prioritized delivery of goods based on needs/available budget.</p> |
| <p>Due to social norms in some locations that prevented mix activities, it was challenging to involve women in some of the project's activities.</p> | <p>IOM implemented activities to challenge social norms in the community and implemented some specific women-focused initiatives, such as livelihood projects specifically targeting women through vocational and business management training paired with the provision of toolkits under CSO grant [omissis]. Furthermore, social cohesion initiatives implemented by [omissis] [omissis] and [omissis] CSOs, also included women-focused initiatives such as facilitating discussions with local authorities on youth and women needs; women's group representatives also attended CMC meetings, with the result that suggestions for creating a civil society space for women to engage in public life were considered a priority on both occasions.</p> |
| <p>MRRM</p> | |
| <p>The MRRM component, particularly in year one and two of the projects, experienced some challenges related to recruitment of staff, either due to unexpected reasons or due to lack of appropriate staff (particularly challenging was the recruitment of doctor, nurse and female case worker positions), some recruitment was initially delayed with impacted the speed with which the operations started at the beginning of the project.</p> | <p>IOM re-advertised on all mentioned occasions and re-worded the vacancy announcement to allow more candidates to apply. However, other than going over the regular recruitment process, there was little mitigation that could be done. Nevertheless, this did not have a long-lasting impact on the project implementation.</p> |
| <p>With regard to COVID-19, the standing difficulty of transferring cash to the field teams has affected IOM's immediate response to support urgent complicated health cases that require further follow up treatment because public hospitals only accept cash payments, and many times they refuse to treat migrants for free.</p> | <p>MRRM team has been coordinating with the Resource Management Unit on a feasible modality to facilitate the cash transfer for operational emergency use.</p> |
| <p>Introduction of preventive measures including curfew by the Libyan government as a response to COVID-19 and overall movement restrictions has affected the mobile team</p> | <p>IOM has coordinated with the authorities to receive movement exemption to respond to migrants' needs. The team of essential staff</p> |

| | |
|--|---|
| <p>movements and ability to reach migrants in the field as usual. In addition, due to COVID19 epidemic, IOM had to delay the implementation of other components which require more engagement with the local authorities i.e. capacity building training to government officials.</p> | <p>were able to receive a full-time movement exemption clearance to resume the activities. IOM was exploring the possibility to organize the training sessions online, but this was not a workable solution for a variety of reasons. IOM finally implemented the training within the additional project duration granted with the no-cost extension. MRRM staff focused on organizing awareness sessions to smaller groups at their homes and collection points to deliver the campaign materials.</p> |
| <p>On occasions, IOM teams would find themselves questioned and/or apprehended by police or military check points.</p> | <p>Immediate reporting of security incidents to security department and senior management, so analysis and coordination is done with the respective governmental entities to avoid such situations.</p> |
| <p>During the first months of 2020, military conflict in the western area was continuing and halted access of MRRM team to some migrant-dense areas east of [omissis] and in [omissis], which made the emergency response to medical cases the predominant pattern of the activities. On many occasions, the team was at risk and had to cancel the activities plan.</p> | <p>IOM coordinated with migrant community leaders to facilitate the delivery of assistance to vulnerable migrants. In addition, for health cases, the team managed to establish an emergency transportation mechanism for some migrants who were living nearby the conflict which made access to migrants who need medical assistance more practical and feasible.</p> |

V. Conclusion

This project was implemented from 1 September 2017 until April 2021. While originally the project was for 3 years (36 months); two four-month no-cost extensions due to challenges related to COVID-19 were needed, which extended the project by another 8 months. In 2019, the project which originally had been for a budget of 18 million EUR received a top-up of 2 million EUR.

A large part of this project aimed at supporting vulnerable migrants and providing them with safe, dignified and durable solutions through the VHR programme – IOM’s most essential tool to provide protection to migrants. The VHR programme is based on the IOM institutional comprehensive approach on migration management aiming at orderly, safe, and humane return and reintegration of migrants. With this project IOM was able assist 8,928 migrants to return to their countries of origin and supported 1,574 of them with reintegration assistance, which included not only a financial package but also reintegration planning, support and counselling from IOM staff in order to support each migrant to meaningfully restart their life back home. It is important to mention that migrants who did not receive reintegration support under this project received the same services funded by another project. It is also crucial to stress that as part of the pre-departure procedure IOM conducted assessments and ensured voluntariness of return once requests for assistance had been received. Voluntariness of return is important to ensure migrants are not returned unwillingly to situations that they fled from.

Such long-term financial commitment is incredibly positive in terms of IOM's ability to plan and implement programming that is well planned, targeted to the needs of the populations it serves and impactful. Longer term projects are particularly important and needed for far-looking programming such as community stabilization and this was very noticeable during the implementation of this project. The long implementation period gave IOM the opportunity to carefully conduct assessments and nurture relations with the local community which allowed the organization access and trust. Over the course of the implementation of the CS component of this project, IOM emphasized community engagement and the process of creating the conditions for communities to co-exist peacefully, resolve tensions through non-violent means, restore trust in local leadership and regain the agency, within crisis affected groups to drive recovery processes. With this project, IOM implemented CS programming in four locations with an approach that included on the one hand a hard component of restoring basic service delivery infrastructure in order to ensure that communities do not descend into additional conflicts over access to basic services (35 CIPs) but also and perhaps even more importantly, a soft component whereby IOM worked to strengthen social cohesion and implemented a number of activities aiming at bringing people together – different community members who otherwise would not be interested or willing to interact and cooperate for the benefit of the community. A small livelihood aspect also contributed to not only individuals in these communities gaining new skills that would make them more employable or able to start their own micro-business but also would benefit the community as a whole with the services they would be able to offer.

This project was crucial with regards to IOM Libya scaling the organization's operations in all three components in 2017. It allowed the organization to set-up new MRRM operation in [omissis] and [omissis], covering also Subrata, where previously IOM did not operate such mobile modality that would allow reaching migrants in urban settings with a variety of assistance. With this project IOM was able to provide more than 30,000 migrants living in migrant-dense urban locations over the years with various types of needed assistance - from NFIs, such as mattresses, blankets and clothing kits, to hygiene items, to food baskets, to deployment of health personnel to provide primary health care consultations to migrants in the areas where they live and when needed, to support their referral to hospital for further treatment, conducting awareness raising sessions in order to share with migrants information about the possible alternatives to onward irregular migration, such as VHR but also information about available services they can benefit from. MRRM is considered a very effective and flexible intervention modality and this project has allowed it to really develop and perfect itself over the years. IOM will build on its presence and team capacity in [omissis] and [omissis], to continue reaching out to migrants living in distress in urban settings especially with the continuing challenging situation to migrants due to the COVID-19 pandemic and the volatile security situation which is often disproportionately affecting migrants.

IOM would like to extend gratitude to the [omissis] for the generous support provided through the Africa Fund (now Migration Fund) towards protection and assistance to migrants in Libya.

VI. Expenditures and Resource Utilization

Please see the attached financial report.

Annexes

Annex CS1 - CMC Standard Operating Procedures

Annex CS2 - Social cohesion and community engagement grants to CSOs

Annex CS3 - Monitoring and Evaluation guidelines for CSOs

Annex CS4 - Finance and logistic guidelines for CSOs

Annex CS5 - Description of Community Improvement Projects

Annex CS6 - Agricultural Assessment Report

Annex M1 - InformedMigrant Info Campaign - Dissemination Strategy

Annex M2 - Certificate in Migration Governance Libya Agenda

Annex M3_Story1_Relief after captivity

Annex M4_Story2 Dignity for the baring

Annex G1 - Visibility Annex

Please check that all annexes have been omitted properly.