



Humanitarian Situation Report No. 3

Reporting Period
1 January to 30 September

Two students from Asma Alsadeq school taking part in UNICEF event to celebrate the World Environment Day 2022.

Libya

HIGHLIGHTS

4,800,000 people including +12 children, were reached with public health and social measures messages including safety and efficacy of COVID19 vaccines.

Almost 72,000 children and women were reached through enhanced primary health care services and supplies; some 78,000 people were reached with WASH supplies; over 17,000 children and caregivers with psychosocial support; over 18,000 children with non-formal education.

UNICEF, in coordination with the Bureau of Statistics and other partners conducted the first nutrition SMART survey where 4,788 households were surveyed including migrants and IDPs, which will generate reliable quality data on the nutrition status of children and women in Libya.

UNICEF joined and operationalized the interagency Common Feedback Mechanism (CFM) as an essential step towards strengthening Accountability to Affected Populations

SITUATION IN NUMBERS



803,574
People in need of humanitarian assistance¹



321,430
Children in need of humanitarian assistance



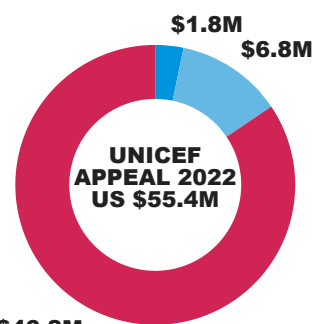
667,440
Registered migrants in the country²

UNICEF RESPONSE AND FUNDING STATUS*

	Nutrition	IYCF	19%
		Funding status	46%
	Health	new born care	64%
		Funding status	46%
	Water, sanitation	drinking water	16%
		Funding status	13%
	Child protection,	MHPSS access	6%
		Funding status	8%
	Education	education access	11%
		Funding status	8%

* UNICEF response % is only for the indicator, the funding status is for the entire sector.

FUNDING STATUS (IN US\$)**



\$46.8M Humanitarian Resources
\$1.8M 2021 carry over
\$6.8M Funding gap

** Funding available includes: funds received in the current year; carry-over from the previous year; and repurposed funds with agreement from donors

FUNDING OVERVIEW AND PARTNERSHIPS

In 2022, UNICEF's humanitarian programmes in Libya aim to assist the most vulnerable children and families in collaboration with government ministries, national and international non-governmental organisations and UN agencies. UNICEF is appealing for US\$55.4 million to provide emergency and lifesaving services to 294,753 vulnerable children, including conflict-affected children and their families. As of September 2022, the appeal was funded at 16 per cent, with a US\$ 6.8 Million carryover from 2021 and US\$ 1.7 million in funding received in 2022, with a critical funding gap of 84 per cent across all sectors. Education and Child Protection are the most underfunded sectors, with funding gaps of over 92 per cent each. The sectors of Water, Sanitation, and Hygiene (WASH) and Social Protection are also severely underfunded. To date, UNICEF's humanitarian preparedness and response for Libya is being generously supported by the Education Cannot Wait Fund, the European Union, the Governments of Germany, Japan, France, Sweden, and the United States of America.

SITUATION OVERVIEW AND HUMANITARIAN NEEDS

At the end of 2021, the Humanitarian Country Team in Libya agreed to extend the Humanitarian Response Plan for an additional five months covering programming requirements until 31 May 2022 and further extended in June 2022 until the end of the year. This decision was based on the findings of the Humanitarian Needs Overview (HNO) and Multi-Sectoral Needs Assessment which verified improvements in the overall humanitarian situation, following a period of relative political and economic stability in the country. The HNO further assessed that 803,000 people remain affected and in need of some form of continued humanitarian assistance with 30% or 241,000 of them being children.³

The COVID-19 pandemic continues in the country, with the total cumulative cases reaching 507,010 and the number of total deaths reaching 6,437 by the end of Sept 2022.⁴ The COVID-19 vaccinations are still ongoing; the National Center for Disease Control reached 2,308,724 people or 34 per cent of the population with at least the first dose, 1,229,888 people or 18 per cent receiving both doses and 177,468 people or 2 per cent receiving the booster.⁵ The NCDC has also conducted vaccination campaigns for migrants across the country, a total of 12,158 migrants had been vaccinated as of 25 June 2022. Out of them, 3,292 migrants 26 PER CENT had received two doses and 640 OR 5 per cent received three doses.⁶

Libya has a high community transmission, with Alpha, Beta, Delta, and Omicron variants of concern. Testing capacity is limited nationally, especially at the municipality level. As a result, the actual number of infections is estimated to be higher than the confirmed cases.

The number of migrants in Libya continues to rise every quarter. The latest figures published by IOM Libya's Displacement Tracking Matrix (DTM) programme⁷ which state that there are currently 667,440 migrants residing in the country, including 80,092 children of whom almost 4,004 are unaccompanied children in the 100 Libyan municipalities. Migrants, and refugees in Libya continued to be detained arbitrarily in official and unofficial detention centres by State and non-State actors. Conditions of detention continued to be dire and inhumane, with a lack of basic needs like food, water, ventilation, and sanitation and Frequent power cuts at detention centers which causes challenges in access to water and sanitation

inside detention facilities contributing to the spread of diseases. It was also reported that due to the over crowdedness in detention centers, there's an additional risk of sexual and gender-based violence⁸.

SUMMARY ANALYSIS OF PROGRAMME RESPONSE

Nutrition

In the first half of 2022, 7,487 primary caregivers of children 0-23 months (all female) received counselling on Infant and Young Child Feeding (IYCF) practices in UNICEF supported PHC facilities. Additionally, 65 mother support groups were established for information and knowledge exchange to promote optimal IYCF practices, with 1,690 mothers continuing to receive breastfeeding and complementary feeding counselling through this group.

UNICEF, in coordination with PHCI, initiated activities for mobile health teams to target vulnerable children, including migrants, refugees, and children on the move. This included implementation of nutritional assessments in detention centers, with 76 screenings conducted in the reporting period, as well as provision of nutritional supplements for malnutrition.

In June, UNICEF, in coordination with the Bureau of Statistics, PHCI, and ACF agreed on the conduction of nutrition SMART survey. In August, the training of master trainers workshop conducted in Tunis focused on the SMART methodology followed by cascade training of 226 field numerator and team leaders from 6 health regions. In September the SMART survey field data collection started, and by end of September 4,788 households were surveyed out of 5,583 targeted families, included migrants, internally displaced people, and other vulnerable populations, targeted children under five, pregnant and lactating women, and women of child-bearing age. There is a lack of reliable quality data on the nutrition status of children and women in Libya and this survey will generate much needed up-to-date nutrition data for Libya.

Health

In this reporting period 71,749 people (20,733 girls, 19,948 boys, and 31,068 women) accessed primary healthcare services in UNICEF supported facilities and 4,350 newborns (2,218 girls and 2,132 boys) received lifesaving care.

To ensure continuity of COVID-19 vaccination services in the country, UNICEF procured 950,000 Pfizer syringes. UNICEF continues to monitor the vaccine availability at health facility level and supported the procurement, arrival, and distribution of 0.5 million doses of oral polio vaccine (OPV) nationwide. These vaccines are filling a gap in the national vaccine stock as OPV has been out of stock in Libya since December 2021.

Libya reported in September the stock out of several vaccines, mainly, BCG, Hexavalent, OPV, MMR, Pentavalent and PCV 13 due to bureaucratic delays on financial flows from the central bank of Libya. UNICEF is also advocating with the Government of Libya to support the procurement of vaccines and make the availability more reliable.

The first national cold chain inventory assessment in Libya was completed, with the following main findings, 11% vaccination sites require major rehabilitation, 83% of vaccination sites using supervisor's private cars or another employee's car for

transportation of vaccines from vaccine warehouses, 60% vaccination sites had no alternative source of energy other than the general electricity company. More than half of the cold chain equipment was older than five years, 73.7% of vaccination sites had no cold boxes, 16% vaccination sites had no temperature monitoring devices. The total number of non-functional monitoring devices was 13.5%. One quarter of the vaccination staff had no capacity building in the last three years. These findings will strengthen evidence-based programming to improve the safety of the national quality of vaccination services in the country. Consequently, national-level coordination efforts were supported by organizing a National Immunization Technical Advisory Group (NITAG) meeting, with the objective of discussing priorities related to vaccinations in the country.

Child protection, GBViE and PSEA

In the past three quarters, UNICEF and its partners provided 17,122 children, parents/caregivers (7,473 girls, 7,405 boys, 1,757 women, 382 men) with mental health and psychosocial support (MHPSS) services through static centers i.e. Baity Centres, mobile outreach teams in the west, east and south regions, with access to GBV prevention and response. The interventions include GBV risk reduction/awareness-raising sessions and focused group activities through women's and girl's safe spaces in Tripoli, Misrata, Sebha, and Benghazi. A total of 6,471 people (1,553 girls, 886 boys, 4,032 women) benefited from GBV risk mitigation, prevention, and response activities.

UNICEF and partners also provided 1,390 children (660 girls, 730 boys) with specialized case management procedures and referrals to services that included healthcare and legal aid. Moreover, UNICEF provided training in child protection approaches to 744 actors (587 women, 157 men) from service providers and government institutions in Tripoli, Misrata, Benghazi, and Ejdabia.

PSEA focal points conducted Protection Against Sexual Exploitation and Abuse (PSEA) awareness-raising sessions for a total of 17,122 People (6,677 girls, 6,537 boys, 2,116 women, 1,792 men) in Tripoli, Benghazi, Sebha, and Misrata. These sessions focused on establishing community-based Sexual Exploitation and Abuse (SEA) complaint mechanisms.

Furthermore, UNICEF and its partners in the next six months will be implementing EORE TOT training for community volunteer members and teachers in Tripoli and Benghazi. UNICEF provided EORE in schools and communities around Greater Tripoli, with a focus on areas previously impacted by conflict reaching a total of 7,889 people (2,327 girls, 2,841 boys, 937 women, 1,784 men).

Education

In the last three quarters, 4,114 children (2,060 girls and 2,054 boys) accessed education activities in the Baity centres, including non-formal education for out of school children and remedial classes for children at risk of dropping out of school. Among them, 3,475 children (1,787 girls and 1,688 boys) received education supplies. The Baity centres have been operational in Tripoli (3, managed by CESVI, Intersos and Multaqana), Misrata (CESVI), Zwara (CESVI), Benghazi (Future Makers), Ajdabiya (Friends of Cancer Patients) and Sabha (Intersos).

As enrollment for the 2022-23 school year opened, 29 out of school children were supported to obtain the documents required to enroll in school, of which 9 were girls. This activity was led by UNICEF in cooperation with Baity centres and other Education Sector's actors.

Moreover, to respond to the learning loss caused by COVID-19 school closure, UNICEF worked with the Ministry of Education and the Education Sector to deliver remedial classes during the summer months for children who are missing basic literacy and numeracy skills despite being enrolled in school. The remedial classes conducted by the Ministry took place in the municipalities of: Alkofra, Algharefa, Brak Alshati, Zawiya West, Ain Zara, Ghat, Al Khoms, Misrata, Abuslim, Shkika, Tarhuna, Tobruk, Ajmel, Ghryan, Zintan, Tajoura, while Terre des Hommes covered the municipalities of Ain Zara, Tarhuna, and Misrata. A total of 22,740 children were reached through these remedial classes focusing on basic literacy and numeracy.

To improve the quality of education provided in Libyan schools and in community centres, 2,866 teachers have been trained on child-centred pedagogy and inclusive education both through the MoE and through NGO partners, including Baity centres. The training conducted by MoE and delivered by Aflatoun International consisted in six-month ToT for 353 trainers which ended in February 2022, after which the trainers carried out cascade trainings in schools throughout the country. Moreover, 3,146 children benefitted from renovated school facilities and 24,014 children benefitted from supplies delivered by UNICEF to schools to improve the learning environment.

Water, sanitation and hygiene

UNICEF WASH section in the last three quarters of 2022, provided 77,457 people with critical WASH services and supplies, including hygiene kits, and disinfection materials. 9,400 people out of a targeted 58,800 have been reached with safe drinking water and 2,108 people out of a targeted 42,000 reached with hand washing behavior change campaign.

UNICEF launched the second phase of the Safe Back to School initiative, through the Libyan Society Organization of National Reconciliation and Charity Works (LSO), through which the distribution of cleaning and disinfection materials and personal protective equipment was conducted. 39,000 children and teachers in more than 60 schools benefitted from this initiative in the Western region: Zultun, Regdalin, Ajaylat, and Al-jamil.

UNICEF's work in IDP camps is also a key area of UNICEF's WASH response. Through its WASH interventions, UNICEF established a partnership with LSO to provide immediate response and distribution of WASH supplies reaching 3,500 IDP families or 17,500 people in multiple locations all over the country with cleaning and disinfection kits.

In addition, UNICEF has responded to the WASH needs of 400 migrants in Alkurah DC through its partner Migrace to address the issues of preventing diseases related to lack of hygiene. In addition to the installation of the collapsible water tank to increase the capacity of water storage in the DC.

UNICEF provided tarpaulin to 34 IDP families in Ateeb IDP camp in Tarhouna after a fire erupted in the camp and caused damage to several households. Furthermore, there was a distribution of standalone soap bars for hand hygiene in Tripoli that reached 3,475 people. In the south, 1,305 families were provided with cleaning and disinfection kits which benefitted a total of 6,525 people. For the first time this year, UNICEF distributed cleaning and disinfection kits to 2,000 families in Twargha which has impacted the life of 10,000 returnees.

In the eastern region, 2,500 families were provided with cleaning and disinfection kits in 10 IDP camps which benefitted a total of 12,500 people. Recently UNICEF has distributed 116 HKs to IDP families in Tripoli as per request from the Ministry of Social Affairs.

Social protection

Until End of June, UNICEF with support of our partner has provided humanitarian cash transfers to 613 households with school-aged children to cover school transportation expenses.

In July, UNICEF started the preparation of a Cash for Education project which will be directly implemented by UNICEF. The project will address economic barriers to education through humanitarian cash transfers which enable households to cover their basic needs as well as education needs. The assistance is transferred through prepaid cards which are issued by a national financial service provider. In line with UNICEF's Cash 'Plus' approach, non-economic barriers will be addressed through education case management which will facilitate school enrolment and retention as well as enrollment in the national social protection system. In order to prepare the project, UNICEF recruited an international Cash and Social Protection Specialist, who is setting up the necessary systems and procedures, and delivers capacity-strengthening sessions to relevant UNICEF staff in Libya.

Moreover, UNICEF contributed to the finalization of the "Strategy for Linkages between Cash Assistance and Social Protection" which was published by the Cash and Market Working Group Libya. The strategy heavily builds on the "Social Protection Systems for Children" assessment, commissioned by UNICEF and UNHCR and finalized with the Ministry of Social Affairs and the Social Solidarity Fund with the support of REACH, and the "Mapping of Libya's social protection sector" finalized jointly with NESDB, UNDP and IPC-IG.

In addition, UNICEF organized jointly with WFP and UNHCR two capacity-building workshops in English and Arabic on Humanitarian Cash Transfers which were facilitated by trainers from the CALP Network. These workshops increased the capacity of the country office and national partners on HCT. Seven UNICEF staff from Emergency, Social Policy, Education, Child Protection, and Finance were trained.

Finally, UNICEF together with UNDP, WFP, the World Bank, and IPC-IG strengthens the humanitarian-development nexus by supporting the development of the national social protection policy by the National Economic and Social Development Board.

Cross-sectoral (HCT, C4D, RCCE and AAP)

UNICEF RCCE continued its support to the National Demand Risk Communication and Community Engagement (DRCCE) activities designed to increase trust and acceptance of COVID 19 vaccines. In the beginning of the year, UNICEF developed an accelerated COVID-19 RCCE strategic plan, endorsed by NCDC and the RCCE TWG. Consequently, UNICEF rolled out interventions estimated to have reached over 4.6 million people nationwide. Key interventions included conduction of series of capacity building workshops on RCCE since February 2022 for 422 key media focal persons and health promotion staff from line ministries and partners in 34 municipalities. The goal of these workshops is to strengthen the capacity of trainees, who are trusted sources of information, to address low risk perception and to support individuals in making informed decisions.

UNICEF rolled out a national RCCE campaign, in collaboration with MoH and NCDC, targeting 25 municipalities identified with low COVID-19 vaccination uptake and high hesitancy. Activities included training of 95 social mobilisers, 15 supervisors and 11 RCCE municipality focal persons to reach communities, including local authorities, religious leaders, and key influencers. 20,090

vaccination fact sheets and other Informational, Educational and Communication (IEC) materials were disseminated to increase knowledge and awareness on importance and benefits of COVID 19 vaccines thus increasing uptake of COVID 19 vaccination. 9,600 of knowledge, attitudes, and practices (KAP) surveys were completed to get timely data on factors that influence intent and motivation to vaccinate.

Five key messages encouraging vaccine uptake and preventative measures during the Holy month of Ramadan broadcasted through the NCDC Radio, estimated to have reached 2 million people in the western and central regions. In Tripoli, Misratah, and Benghazi, the same messages were displayed on 19 electronic indoor and outdoor screens at the biggest and busiest malls, estimated to have reached 660,000 people.

Roll out of 30 days/June Accelerated COVID-19 Initiative, June 2022, incorporating different RCCE products and materials – flyers, videos, social media posts, SMS messages - reaching an estimated 1,800,000 people. In addition, 7 Public Transportation buses were covered with the message "Make Vaccination Your Next destination" traveling within Tripoli and from Tripoli to Misratah, Benghazi, Sabha, and Tunisia.

AAP:

UNICEF has taken several steps to prioritize and scale up AAP efforts in the Libya Country Office. UNICEF has worked to ensure that AAP is mainstreamed in main planning documents including the Country Programme (2023-2025), Programme Rationales, and the Situation Analysis.

UNICEF also conducted a mapping exercise that took place in January 2022 exploring current practice in AAP in the work of the UNICEF Libya Country Office (LCO), which was based on an extensive review of documents and conversations with staff; and provides the basis for shaping the direction of efforts for strengthening AAP. Along with this, an AAP Strategy and Action Plan has been established for the Country Office. UNICEF has also set up AAP focal points in each section to ensure that AAP is mainstreamed into programmes, and monthly knowledge-sharing meetings have been established starting in October 2022.

An important step taken towards AAP is that a Community Feedback Mechanism (CFM) has been operationalized in October 2022 to (i) obtain effective feedback and complaints on UNICEF interventions as part of regular programme monitoring to inform programme design and make course corrections, (ii) provide information on UNICEF programmes to provide safe, inclusive and accessible opportunities for vulnerable, and (iii) effectively manage sensitive complaints (including SEA cases).

HUMANITARIAN LEADERSHIP, COORDINATION AND STRATEGY

WASH:

UNICEF continued to lead and hold both WASH sector and IPC WG meetings. The WASH sector published the WASH Severity Classification (WSC)-link and conducted a WASH needs assessment at the national level, assessing needs in communities, schools, and health facilities by Action Against Hunger (ACF). The WASH sector in close collaboration with REACH Initiative launched this assessment and discussions started in February 2022. The assessment intends to provide a detailed understanding of the water situation in Libya, focusing on the availability and

accessibility of water. In addition, UNICEF continues to co-lead the Infection Prevention and Control Working Group (IPC WG) with the WHO. In collaboration with MOH, NCDC, the Ministry of Water Resources, other water institutions, and relevant NGOs, the IPC WG continues implementing national plans in response to the COVID-19 pandemic.

RCCE:

UNICEF continued its co-lead role to the national RCCE Technical Working Group and supported the convening of 6 technical and general meeting during this period, highlighting and streamlining activities planned for 2022 and providing updates for activities conducted. With an estimated membership of 15 agencies from the UN, NGOs, and INGOs, this working group is crucial to providing overall coordination and leadership for all the RCCE activities in the country.

Child protection:

During the period under review, UNICEF provided leadership to the Child Protection Area of Responsibility (CP AoR) in Libya through a dedicated Coordinator (IUNV). The coordinator came on board in July 2022 following a contractual break between February and June. However, even during this absence, UNICEF maintained leadership through a double-hatting CPIE specialist in close collaboration with the co-coordinator.

The AoR activated area-based child protection focal points for the three coordination regions of Libya with Tdh for West Libya, ACTED for East Libya and INTERSOS for South Libya. The focal points are mandated by the AoR to enhance child protection services and coordination at the area-level including by coordinating with local actors and Ministry of Social Affairs (MoSA) as necessary.

During the period under review, the AoR provided training on child protection mainstreaming to WASH and Education sector members. It also organized a training on the prevention of sexual exploitation and abuse (PSEA) to the AoR members.. The CP AoR finalized contingency planning for various emergencies. The contingency plan includes planned response along the lines of psychosocial support to affected children and families in the areas affected the emergency; identification & registration of separated and unaccompanied children and provision of interim care arrangements, scale-up of advocacy, communications and awareness raising activities around prevention and response to abuse, exploitation, violence and neglect, including GBV in the areas affected by the emergency and child protection case management.

Education:

UNICEF continued playing a leadership role also in the Education Sector, with an international and a national coordinator on board until July 2022, and a national coordinator from August 2022. Coordination meetings have continued regularly once per month, and thematic meetings on education access for out of school children and non-formal education have been added for Sector members working on education access or non-formal education. The MoE has started joining the Sector meetings regularly and has taken the lead on the topic of non-formal education in relation to curriculum development and coordination of partners on remedial classes activities.

In August 2022, in coordination with the MoE, the Sector started conducting a joint education needs assessment on the formal school system as well as the migrant community schools that will provide the needed evidence to develop an Education Sector strategy for 2023 in line with declining humanitarian needs.

HUMAN INTEREST STORIES AND EXTERNAL MEDIA

Osman* is a six-year-old Sudanese child who came to Libya in 2020 with his family and settled in Zuwara, Western Libya.

Osman and his siblings started attending CESVI activities at the UNICEF-supported Zwara Baity Centre after learning about the centre from the community mobilizers who regularly conduct outreach in this neighborhood to encourage children's engagement at the Baity Centre.

As part of the multi-sectoral approach to case management, the family was referred to IOM for the provision of food baskets and essential non-food items such as clothing and hygiene kits. They also received cash assistance for 3 months' rent, to assist the family in moving into safe and more comfortable housing.

Osman received individual Mental Health and Psychosocial Support (MHPSS) services from the centre's psychologist as well as family therapy to support his well-being and development.

Through the support of these interventions, Osman was diagnosed with autism spectrum disorder, which facilitated referral to a special needs school for Osman to receive the targeted educational support he needs.

When Osman attended the centre, he was hyperactive, unable to maintain attention in group activities, and not confident in speaking with other children or CESVI staff.

Over time, through the support provided to him and his family, Osman opened up, and become more comfortable communicating with his family and other children. He was actively engaged in group psychosocial support sessions. "Baity is like a safe shelter for us.", his mother stated.

*Name changed to maintain confidentiality

- Multi-sectoral family support, creating safe spaces for children to thrive
https://www.instagram.com/unicef_libya/?hl=en

HAC APPEALS AND SITREPS

- Libya Appeals
<https://www.unicef.org/appeals/libya>
- Libya Situation Reports
<https://www.unicef.org/appeals/libya/situation-reports>
- All Humanitarian Action for Children Appeals
<https://www.unicef.org/appeals>
- All Situation Reports
<https://www.unicef.org/appeals/situation-reports>

NEXT SITREP: 31-01-2022

ANNEX A SUMMARY OF PROGRAMME RESULTS

Sector		UNICEF and IPs response				Cluster/Sector response		
Indicator	Disaggregation	Total needs	2022 targets	Total results	Progress	2022 targets	Total results	Progress
Nutrition								
Primary caregivers of children aged 0 to 23 months receiving infant and young child feeding counselling	Total	-	40,000	7,487	0%	-	-	-
Children aged 6 to 59 months receiving multiple micronutrient powders	Total	-	25,500	-	0%	-	-	-
Pregnant women receiving preventative iron supplementation	Total	-	13,600	-	0%	-	-	-
Health								
Children and women accessing primary health care in UNICEF-supported facilities	Total	-	120,000	71,749	0%	-	-	-
Health care facility staff and community health workers trained in infection prevention and control	Total	-	500	-	0%	-	-	-
Number of new-borns receiving essential lifesaving care	Total	-	6,800	4,350	0%	-	-	-
Water, sanitation and hygiene								
People accessing a sufficient quantity of safe water for drinking and domestic needs	Total	-	58,800	9,400	1%	-	-	-
People reached with hand-washing behaviour-change programmes	Total	-	42,000	2,108	0%	-	-	-
People reached with critical WASH supplies	Total	-	126,000	77,475	1%	-	-	-
Child protection, GBViE and PSEA								
Children and parents/caregivers accessing mental health and psychosocial support	Total	-	269,253	17,017	1%	-	-	-
Women, girls and boys accessing gender-based violence risk mitigation, prevention and/or response interventions	Total	-	27,771	6,471	1%	-	-	-
People who have access to a safe and accessible channel to report sexual exploitation and abuse by aid workers	Total	-	3,098	17,122	113%	-	-	-
Children in areas affected by landmines and other explosive weapons provided with relevant prevention and/or survivor-assistance interventions	Total	-	129,404	5,168	1%	-	-	-
Education								
Children accessing formal or non-formal education, including early learning	Total	-	166,811	18,001	8%	-	-	-
Children receiving individual learning materials	Total	-	76,204	27,489	1%	-	-	-

Sector			UNICEF and IPs response			Cluster/Sector response		
Indicator	Disaggregation	Total needs	2022 targets	Total results	Progress	2022 targets	Total results	Progress
Schools implementing safe school protocols (infection prevention and control)	Total	-	996	105	0%	-	-	-
Social protection								
Households reached with UNICEF funded multi-purpose humanitarian cash transfers	Total	-	2,000	1,781	58%	-	-	-
Cross-sectoral (HCT, C4D, RCCE and AAP)								
People reached through messaging on prevention and access to services	Total	-	4.8 million	1.1 million	0%	-	-	-
People engaged in risk communication and community engagement actions	Total	-	60,000	13,099	3%	-	-	-

ANNEX B FUNDING STATUS

Sector	Requirements	Funding available		Funding gap	
		Humanitarian resources received in 2022	Resources available from 2021 (carry over)	Funding gap (US\$)	Funding gap (%)
Health and nutrition	7228000	261458	3092310	3874232	54%
Water, sanitation and hygiene	8215200	169460	895938	7149802	87%
Child protection, GBViE and PSEA	12468842	357463	654708	11456671	92%
Education	16912852	473282	928327	15511243	92%
Social protection	3000000	61458	299061	2639481	88%
Cross-sectoral (HCT, C4D, RCCE and AAP)	6480000	351178	444749	5684073	88%
Cluster coordination	600000	61458	341751	196791	33%
Evaluation	514855	61458	168383	285014	55%
Total	55,419,749	1,797,215	6,825,227	46,797,307	84%

Who to contact for further information:

Michele Servadei
 Representative, Libya Country Office
 T 218 912000471
 mservadei@unicef.org

Cristina Brugiolo
 Deputy Representative Programmes , Libya Country Office
 T +218 91 250 8642
 cbrugiolo@unicef.org

Suad Al Marani
 Communications Specialist, Libya Country Office
 T +218 912 508 648
 salmarani@unicef.org

ENDNOTES

1. OCHA 2022 Humanitarian Needs Overview <https://reliefweb.int/report/libya/libya-humanitarian-needs-overview-2022-december-2021-enar>
2. IOM migrant Report Round 42 .<https://dtm.iom.int/reports/libya-%E2%80%94-migrant-report-42-may-june-2022>
3. OCHA 2022 Humanitarian Needs Overview <https://reliefweb.int/report/libya/libya-humanitarian-needs-overview-2022-december-2021-enar>
4. .Covid19 vaccination coverage in EMR
5. .Covid19 vaccination coverage in EMR
6. Libya — Migrant Report 42 (May - June 2022) | DTM (iom.int)
7. IOM DTM Report Round 42
8. Implementation of Security Council resolution 2598 (2021)Report of the Secretary-General