

**Final External Evaluation of “Promoting  
Rights-Based Solutions for Vulnerable  
Migrants through a Migrant Resource and  
Response Mechanism” (MRRM)  
Programmes**

**External Evaluation Report**

**International Organization for Migration  
(IOM)**

**June 14<sup>th</sup>, 2021**

**SREO Consulting Ltd.**

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## ABOUT SREO

SREO Consulting is an independent monitoring & evaluation and research consultancy committed to serving humanitarian, stabilization and development actors operating in the most challenging environments around the world by providing unbiased and actionable data, analysis and research. Our international team combines local insight with interdisciplinary expertise to deliver information from those in need to those who need it most.

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## ABOUT IOM

Established in 1951, IOM is the leading inter-governmental organization in the field of migration and works closely with governmental, intergovernmental and non-governmental partners. With 174 member states, a further 8 states holding observer status and offices in over 100 countries, IOM is dedicated to promoting human and orderly migration for the benefit of all. It does so by providing services and advice to governments and migrants. IOM works to help ensure the orderly and human management of migration, to promote international cooperation on migration issues, to assist in the search for practical solutions to migration problems and to provide humanitarian assistance to migrants in need, including refugees and internally displaced people. The IOM Constitution recognizes the link between migration and economic, social and cultural development, as well as to the right of freedom of movement. IOM works in the four broad areas of migration management: i) Migration and development, ii) Facilitating migration, iii) Regulating migration, iv) Forced migration. IOM activities that cut across these areas include the promotion of international migration law, policy debate and guidance, protection of migrants' rights, migration health and the gender dimension of migration.

## ACRONYMS

<b>AICS</b>	Italian Agency for Development Cooperation
<b>ARB</b>	Arabic language
<b>CFM</b>	Common Feedback Mechanism
<b>ENG</b>	English language
<b>EU</b>	European Union
<b>FR</b>	Field Researcher
<b>FRE</b>	French Language
<b>IOM</b>	International Organization for Migration
<b>KII</b>	Key Informant Interview
<b>MHPSS</b>	Mental Health and Psychosocial Support
<b>MRRM</b>	Migrant Resource and Response Mechanism
<b>NCE</b>	No Cost Extension
<b>NFI</b>	Non Food Items
<b>PSS</b>	Psychosocial Support
<b>PWD</b>	People with disabilities
<b>SREO</b>	SREO Consulting Ltd.
<b>SSI</b>	Semi-structured Interview
<b>ToC</b>	Theory of Change
<b>ToR</b>	Terms of Reference
<b>VHR</b>	Voluntary Humanitarian Return
<b>WFP</b>	World Food Programme

## EXECUTIVE SUMMARY

IOM coordinated two MRRM Programmes in Tripoli implementing activities across protection, NFI, Hygiene, Health, MHPSS sectors in addition to assistance on Voluntary Humanitarian Return (VHR) programmes and awareness-raising sessions on the risks of irregular migration, available services and alternative solutions, starting from October 1, 2019 with the Swiss-funded Intervention and November 1, 2019 with the Netherlands-funded intervention. The response also included a social cohesion component to improve relations between host communities and migrants as well as capacity-building for relevant government officials on migration management. SREO Consulting conducted a final evaluation to assess the extent to which the two projects have achieved their planned short, medium- and long-term objectives and the extent to which the activities and the modalities adequately addressed the needs of the affected population. SREO Consulting strived to highlight the differences, similarities and complementarities between the Swiss-funded and Dutch-funded projects.

The evaluation took a mixed methods approach involving desk review, 40 semi-structured interviews with beneficiaries and 25 key informant interviews with implementers and stakeholders underpinned by a Qualitative Impact Assessment Protocol (QuiP) approach. The evaluation assessed the performance of the project against the OECD-DAC criteria of relevance, effectiveness, coherence, efficiency, impact and sustainability. The evaluation also assessed the extent to which the project integrated cross-cutting issues including gender and human rights, in addition to delving into the project overall logic and implementation processes to determine how the project was adequate to local needs.

Overall, the projects increased migrants' protection by providing consultation upon registration and referring them to IOM-provided services or external services provided by other humanitarian actors available in Tripoli. The migrants' awareness about the risks of irregular migration, health risks, available services and alternative solutions increased through awareness raising sessions, brochures and videos provided on this topic. Most beneficiaries and informants noted a lack of interaction between local communities and migrants, thus highlighting the difficulty for MRRM intervention to tangibly improve social cohesion.

The activities addressing different sectors such as Health, Protection, food and NFIs, showed strong relevance to the local context. With many primary health care facilities in Tripoli closed along with the shortage of healthcare workers and equipment, IOM's provision of mobile clinic, consultation, free medication, and referral to hospitals addressed the urgent healthcare needs among communities. The protection interventions helped beneficiaries cope with the difficult circumstances they faced, and they were particularly appreciated by women beneficiaries. The projects aligned with The Migration Governance Framework, with IOM national and regional strategies, and with IOM project development guidelines in a way that addressed local priority needs. Despite the emergency response nature of the food distributions, the sustainability is questionable without further livelihoods synergies and cluster support. IOM must consider effective ways to address this concern in collaboration with partners at the local and cluster level while keeping the Libyan labour laws and market context in mind. The intended results of both projects also aligned with and supported government officials building of capacities through trainings enhancing their understanding of migration related issues including migration governance.

Given the large population of migrants in Tripoli, IOM's awareness raising initiatives about irregular migration were pertinent and effective. Beneficiaries were informed about the realities and risks of irregular migration, the impact of which will be sustainable as they make more informed and safe decisions in the future. The Voluntary-Humanitarian Return programme was also well-received by migrants who were relying on it to safely return to their countries of origin. The program was

particularly popular among the Sudanese community with several Sudanese community representatives noting that the number of voluntary return trips increased since the beginning of IOM's assistance. However, there were a few beneficiaries who were not aware of the VHR programme, hence the need to better disseminate information about the programme.

The provision of food, as well as NFIs and hygiene kits were the best-known IOM assistance within the community with the migrants highlighting that they could not have afforded these items if not for IOM's distributions. There were concerns about the food distribution being irregular and unable to meet the recurring needs of beneficiaries, but they all agreed that the assistance addressed their urgent needs. MRRM teams established partnerships with external actors including embassies, local government actors, community leaders and other humanitarian actors in Tripoli which were very effective in setting up processes to identify and assess migrant needs and referring them to relevant services. However, four community leaders raised concerns about the effectiveness of the coordination and communication channels with IOM who often took a long time to respond to requests for assistance, thus delaying response to some urgent medical and protection cases. This demonstrates that the MRRM internal coordination could be done in a more efficient way to ensure maximization of resources and timely implementation. Additionally, while it was noted that collaboration with leaders from some communities was high, others reported that it could be improved. A successful referral mechanism was set up by IOM teams to ensure that migrants are able to reach and access MRRM services (food, non-food items and primary health care). Migrants' access to basic services has increased during the project activities, although some services were not very well-known among beneficiaries (e.g. Voluntary Humanitarian Return programme). A large number of the beneficiaries interviewed were also not aware of the feedback and complaints mechanisms available to them.

IOM recently signed an MoU with the World Food Programme (WFP) in support of the inter-agency Common Feedback Mechanism system to collect migrants' feedback and needs and refer them as needed. IOM is also financially contributing to hotline operators that speak the most commonly languages among migrants. The MRRM projects focused on migrants in urban settings and complemented other IOM interventions assisting migrants in detention. A sound collaboration has been established with other stakeholders such as the Libyan Red Crescent and NRC to support humanitarian activities through the referral mechanism. A key added value of the MRRM projects was to bring together in one mechanism humanitarian aid, a wide range of services and needs based assistance to migrants living in urban areas as well as vulnerable cases from the host community through the deployment of mobile teams during the conflict and the COVID-19 pandemics. Overall, the MRRM projects successfully translated the resources into tangible and quality outputs and outcomes in accordance with the stated plans. Both projects enhanced the migrants' access to basic services and the capacities of government officials to understand migration related issues, including migration governance. The activities were well implemented, thus allowing to reach intended results, although IOM was forced to adapt some awareness sessions due to COVID-19.

Finally, several aspects of the project have a long-term impact on migrants' lives as well as on coordination and management of mixed migration flows. The transfer of knowledge to relevant local authorities is improving their technical capacity to effectively respond to migration flows and human trafficking and smuggling of migrants. Many beneficiaries reported that the project instilled a sense of hope in them and changed their attitudes towards irregular migration. They also went on to inform their family members and friends about these issues, thus contributing towards more informed and safer decision-making in the larger community. The activities were adapted to changing external conditions due to COVID-19 pandemic by providing COVID-19 awareness sessions. While most community leaders and embassy focal points stated that IOM was doing its best to improve the conditions for migrants for the long term, some were doubtful if the impact would be sustained citing

that there needs to be an improvement in the security and political context for more concrete positive changes. Although few (n=5/40) beneficiaries reported improved relations between migrants and the host community, the rest of the beneficiaries and all the informants noted there was not much interaction between the two groups. In order to effectively contribute towards social cohesion, there needs to be more emphasis on community-based dialogues among migrants and the local community. Nevertheless, the design of MRRM intervention followed a conflict sensitivity approach, especially with regard to social cohesion, capacity building and awareness raising.

The MRRM response was designed and implemented to be a needs-based assistance prioritizing the most vulnerable among migrant communities, particularly unaccompanied and separated children, women-headed households, victims of trafficking, people with disabilities and the elderly. While both projects considered cross-cutting issues such as gender, age, disability and other vulnerabilities in their design and implementation, there were some aspects related to staff training and assignment that were not implemented as planned. Only one staff member had received training on PSEA and gender sensitivities and only two had signed a code of conduct as part of their employment. Further, IOM staff did not confirm whether they had assigned a woman staff member to attend to the hotline for migrants in need. The health and protection teams included women staff and there were no gender-related barriers identified. All beneficiaries felt that they could access services equally regardless of their gender. The projects incorporated protection principles such as safety and dignity, no discrimination and accountability. Rights and dignity of beneficiaries were upheld throughout the implementation.

The design and implementation of ongoing and future programming can benefit from the lessons and recommendations in this report, including but not limited to:

### ***Relevance***

- Promote tailored and contextually-nuanced shelter solutions for migrants as part of the project or in coordination with other IOM programmes to mitigate legal and cultural obstacles faced by non-Libyans when seeking safe and dignified housing solutions. Such approach could complement and strengthen the host family placement activity under the Dutch project.

### ***Effectiveness***

- Align dialogue transfer models with intended impacts at individual, relational and structural levels in order to guide MRRM programme design.
- Prioritize the involvement in social cohesion activities of community leaders with strong enthusiasm and dedication to project objectives over others who may have larger reach and experience but less motivation to guarantee the momentum and energy of key actors implementing the project and assuring timely project progress.
- Conduct meetings between IOM and partners on a more regular basis to discuss changing needs, challenges and adaptive ways of working together.
- Include the local population in awareness-raising sessions on migration and social inclusion.
- Set a more sustained strategy for local partner capacity-building and tailored support to ensure that they are able to appropriately carry out their role as expected and advance strengthening and upskilling of local CSOs (Multakana, Libyan Red Crescent, etc.).

### ***Efficiency***

- Optimize coordination and referral mechanisms internally and between partners so as provide timely assistance, especially for urgent medical and protection assistance.

- Prioritise dissemination of information regarding the VHR programme and improve coordination between VHR team and MRRM team so migrants receive timely and accurate information.

### ***Impact***

- Mobilize the media in a context-appropriate and culturally-sensitive manner to increase the visibility of dialogues between migrants and host communities.
- Connect dialogues between migrants and host communities with large visibility, high participation and tangible initiatives that help improve the local quality of life (sanitation infrastructure, waste management, sport playgrounds, etc.) to help materialize spaces of interaction and collaboration.
- Partner with Al Bayan centre for women and children to expand the provision of MHPSS services in Tripoli. Al Bayan centre is already collaborating with UNDP and IMC to support GBV survivors through individual and group sessions.
- Liaise with AICS, UNDP and UNICEF in the framework of their “Baladiyati” (“My Municipality”) programme.

### ***Sustainability***

- Support migrants with trainings on technical skills needed in the Libyan labour market to improve their prospects of sending remittances resulting in reduced vulnerabilities.
- Advocate at national level for reforms in the banking and financial services sector aimed at improving migrants’ access to safe and reliable money transfer services and at facilitating their inclusion into the formal economy.
- Pilot regular labour mobility programming in collaboration with relevant government counterparts and respective embassies to promote migration of skilled workers to Libya as per the Libyan labour market demand for skills via targeted information campaigns in the country of origin.

### ***Cross Cutting Issues***

- Improve accountability measures by increasing capacity to attend to the hotline number in addition to informing all beneficiaries about the available feedback and complaints mechanisms.
- Conduct regular follow-up calls/visits with beneficiaries who received relevant services through referrals to ensure their needs were met.

### ***Monitoring and Evaluation***

- Introduce separate M&E mechanisms for the two funds to allow for independent monitoring and assessment of the performance and progress of each project.
- Design a stronger project framework with a layered Theory of Change and SMART indicators to help better measure project impact and change, and structure project progress effectively.



## 1. INTRODUCTION

In March 2021, SREO Consulting was commissioned by IOM to conduct a final external evaluation of its Migrant Resource and Response Mechanism (MRRM) programmes in Tripoli, Libya. SREO Consulting and IOM conducted the Inception Meeting on 25 March 2021. On 12 April 2021, the Inception Report was submitted, along with the data collection tools for IOM's review. The data collection tools were translated to Arabic and French, and the designed tools were deployed for data collection on 22 April 2021. The data collection was conducted between 22 April 2021 and 26 May 2021.

The remainder of **Section 1. Introduction** presents the socio-political and humanitarian context motivating IOM's intervention. The logic of the intervention is assessed in more depth in later sections.

**Section 2. Methodology** details the evaluation design and approach including the data collection plan. It also explains the feasibility and scope of the evaluation.

**Section 3. Findings** organizes the main findings by OECD-DAC criterion.

**Section 4. Conclusion and Recommendations** presents the main conclusions substantiated by analysis and findings; and provides recommendations geared towards IOM and their two donors. These are meant to inform future similar interventions.

**Annexes include:**

- **Desk Review Document List**
- **Bibliography for Secondary Source**
- **Evaluation Matrix**
- **Two Page Evaluation Brief**

## 1.1 Context

For decades, Libya has been a key destination and transit point for migrants and refugees from the region. Since the fall of the Gaddafi regime in 2011 and the protracted conflict that followed, irregular migration flows to and within Libya have become more pronounced and often characterised by risky journeys. Through its Displacement Tracking Matrix, IOM has identified over 575,000 migrants from over 41 countries across Libya, with the vast majority from neighbouring countries such as Niger, Chad, Sudan and Egypt. The impact of the infectious disease COVID-19 has heightened protection concerns and other needs across Libya, especially for at-risk population groups. In Tripoli, a period of intense fighting in May and early June 2020, resulted in the Government of National Accord (GNA) retaking control of the whole of Tripoli, with the Libyan National Army (LNA) withdrawing towards the east. Following this, internally displaced persons (IPDs) originally from the southern suburbs of Tripoli, who had settled inside the city during the conflict, began returning to their homes.

Migrants and refugees were particularly vulnerable to the economic consequences of the COVID-19 crisis due to their reliance on temporary work or daily labour. Refugees and migrants commonly cited being in need of cash, followed by other basic needs, such as food, water and shelter<sup>1</sup>. The percentage of migrants sending remittances fell from 52% in January 2019 to 26% in July 2020, indicating that the dual crises related to armed conflict in western Libya and the COVID-19 pandemic affected migrants' ability to send remittances from Libya. A decrease in the amounts sent was also recorded among those who still managed to transfer remittances. The amount of remittances sent was estimated to have dropped by 15 per cent from an average remittance of 146 US dollars per month reported in 2019 to 123 US dollars reported in 2020.<sup>2</sup> The 2021 Libya Humanitarian Needs Overview (HNO) estimated that around 304,000 migrants and 44,000 refugees face extreme vulnerability, representing 28% of the total population in need inside Libya.<sup>3</sup> Migrants and refugees are particularly vulnerable to extortion, violence, unemployment or slave-like work conditions, while those held in detention centres may experience sub-par living conditions due to overcrowding and deprivation of basic needs, sexual abuse, forced labour and torture.

Consistent with last year's trend, most migrants were found to be living in urban centres around Tripoli (15%), Ejdabia (12%), Misrata (10%), Benghazi (7%), Azzawya (7%) and Murzuq (6%).<sup>4</sup> Tripoli was severely hit during the hostilities which included attacks on hospitals and most notably, a deadly airstrike on the Tajoura detention centre in 2019 that killed and injured many migrants. Moreover, many migrants attempting to cross the Mediterranean were intercepted and released from disembarkation points in Tripoli, leaving them with no accommodation, health and other services. Despite a general reduction in conflict-related violence since the October 2020 ceasefire, this year has witnessed an increase in the number of migrants intercepted/rescued at sea while attempting the journey to Europe through the Central Mediterranean Route. In the first three months of 2021, some 4,600 refugees and migrants crossed the sea from Libya to Europe, a 53% increase compared to the same period in 2020<sup>5</sup>. As in previous years, many of those taking this route had international protection needs or other specific needs on account of their personal circumstances or experiences during the journey, including in Libya, due to having been victims of trafficking, gender-based violence, or being unaccompanied children. In addition, 4,800 refugees and migrants who departed from Libya by sea were also disembarked in Libya in the first three months of 2021, mostly following interceptions or rescues by the Libyan Coast Guard.

<sup>1</sup> REACH Libya, Protection Monitoring During COVID-19 Crisis (31 May - 2 June 2020)

<sup>2</sup> IOM DTM Libya, Labour Migration to Libya, Remittances Amidst Conflict and Pandemic (March 2021)

<sup>3</sup> UNOCHA Libya, Humanitarian Needs Overview (January 2021)

<sup>4</sup> IOM DTM, [Libya's Migrant Report: Round 35](#) | January - February 2021 (April 2021)

<sup>5</sup> UNHCR Libya, Situation Report, Arrivals to Europe from Libya: Regional Bureau for Europe (March 2021)



Libya's infrastructure for health and social services remains fragmented and unable to respond to the dire needs of not only hundreds of thousands of migrants but also the Libyan population. Given the extreme vulnerabilities and risks faced by migrants, their needs are rarely met due to a range of reasons including discrimination, fear of being detained or deported, lack of awareness, lack of specialised services and so on.

## 1.2 IOM Response

To address the humanitarian crisis faced by the migrants in Libya, IOM established the **Migrant Resource and Response Mechanism Programme**, covering the migratory route in Zwara, Sabha, Tripoli, Qatroun and Bani Waleed. The programme provides humanitarian aid and a wide range of services and needs-based assistance to migrants and vulnerable cases from the host community. Migrants are provided with comprehensive assistance and referral support, through the deployment of mobile teams, which includes a mobile medical unit to respond to medical emergencies and secondary health care needs, mental health and psychiatric care. In case of an emergency or when in need, migrants can reach the mobile units through a hotline number.

IOM established an MRRM base in central Tripoli in the IOM Hai Andalous Office to respond to the increasing number of migrants and their needs in the city, particularly in light of recent conflict-related violence and instability. It supports migrants in distress by prioritising critical interventions in Tripoli, and the Hai Andalous Office is well known to the migrants as the VHR processing has been taking place there for several years.

The MRRM projects in the Tripoli area, funded by the governments of Switzerland and the Netherlands, aim to strengthen coordination on and management of mixed migration flows in Libya, through providing enhanced protection and assistance measures including alternatives to onward movement.

IOM provided a comprehensive approach towards humanitarian assistance which included:

- Organization of outreach visits to the migrants' locations in urban settings and demographic profiling and screening of migrants to identify their vulnerabilities and support needs.
- Provision of non-food items (NFIs) and/or hygiene kits and emergency food assistance.
- Basic health care through mobile teams and medical referrals.
- Mental health and psychosocial support (MHPSS).
- Protection services.
- Registration and processing of cases for the Voluntary Humanitarian Return (VHR) programme.
- Facilitation of community events to bring together migrants and host communities and implementation of a local development project that benefit both groups.
- Capacity building for government counterparts on migration management-related matters as well as organisation of awareness raising sessions and events which will contribute towards a better understanding of safe practices.

## 1.3 Projects Descriptions

**Table 1: IOM MRRM Dutch-Funded and Swiss-funded project descriptions**

<b>Project Title</b>	PROMOTING RIGHTS-BASED SOLUTIONS FOR VULNERABLE MIGRANTS THROUGH A MIGRANT RESOURCE AND RESPONSE MECHANISM (MRRM) IN TRIPOLI, LIBYA	PROMOTING RIGHTS-BASED SOLUTIONS FOR VULNERABLE MIGRANTS THROUGH A MIGRANT RESOURCE AND RESPONSE MECHANISM (MRRM) IN TRIPOLI, LIBYA
<b>Geographical Coverage:</b>	Tripoli, Libya	Tripoli, Libya
<b>Duration:</b>	Nov 1, 2019 – April 30, 2021 including no-cost extension	October 1, 2019 – March 31, 2021
<b>Primary Sectors:</b>	Protection, NFI, Hygiene, Health, MHPSS	Protection, NFI, Hygiene, Health, MHPSS
<b>Donor:</b>	The Netherlands Ministry for Foreign Trade and Development Cooperation	The Swiss Confederation
<b>Executing Agency:</b>	IOM	IOM
<b>Beneficiaries:</b>	The project will support migrants in Libya and specifically those in Tripoli. The Government of Libya (GoL) will benefit from the proposed action which supports their efforts to effectively respond to migration flows in the country and ensure adequate protection for migrants.	The project will support migrants in Libya and specifically those in Tripoli. The Government of Libya (GoL) will benefit from the proposed action which supports their efforts to effectively respond to migration flows in the country and ensure adequate protection for migrants.



<b>Partner(s):</b>	Local Non-Governmental Organizations (NGOs), Civil Society Organizations (CSOs), and community-based local crisis committees to coordinate about the response provided, and avoid any duplication of response; relevant government ministries and entities i.e. Ministry of Interior, Department for combatting Illegal Migration (DCIM) to facilitate the work of MRRM team especially the mobile team etc., municipality and traditional/tribal leaders in the target area, migrant community leaders to help identifying the migrants locations and facilitate the coordination and channel of communication with the migrants, and Governments of migrants' countries of origin through their embassies.	Local Non-Governmental Organizations (NGOs), Civil Society Organizations (CSOs), and community-based local crisis committees to coordinate about the response provided, and avoid any duplication of response; relevant government ministries and entities i.e. Ministry of Interior, Department for combatting Illegal Migration (DCIM) to facilitate the work of MRRM team especially the mobile team etc., municipality and traditional/tribal leaders in the target area, migrant community leaders to help identifying the migrants locations and facilitate the coordination and channel of communication with the migrants, and Governments of migrants' countries of origin through their embassies.
<b>Budget:</b>	USD 2,451,905	CHF 1,500,000

IOM proposed to establish the Migrants Resource and Response Mechanism (MRRM) programme in Tripoli to directly support approximately 12,000 migrants in distress through a comprehensive rights-based approach towards humanitarian assistance. The project's main goals, activities and indicators are summarized below:<sup>6</sup>

**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.

**Outcome 1:** Vulnerable migrants affected by the conflict benefit from increased protection.

**Output 1.1:** Migrants and host Community have improved access to humanitarian services.

- Activity 1.1.1: Registration and profiling of all migrants and host community beneficiaries targeted through MRRM (by sex, age group and nationality).
- Activity 1.1.2: Provision of basic health care services and specialized assistance for identified vulnerable migrants, including short term hospitalization and referrals to appropriate health service providers for follow up. In addition, vulnerable host communities in the targeted areas will also benefit from health care services through the deployment of a mobile clinic.
- Activity 1.1.3: MRRM will facilitate the registration and referral to the VHR programme as part of offering migrants an alternative option to onward movement through safe sustainable returns programme that helps beneficiaries without international protection concerns to reintegrate in their country or area of origin in a safe and dignified manner.
- Activity 1.1.4: Provision of specialized protection services.

<sup>6</sup> Project goals, activities and indicators are copied directly from the project proposal provided by IOM.

- Activity 1.1.5: Provision of mental health and psychosocial support, including psychosocial needs assessment and referrals to psychiatric treatment. A hotline number will be established to enhance the communication with migrants and local communities to ensure that the assistance is provided in a timely and transparent manner.

**Outcome 2: Migrants have increased awareness on the risks of irregular migration, health risks, available services and alternative solutions.**

**Output 2.1: Migrants have better access to information on the risks of irregular migration, including associated health risks and preventative measures to take to reduce these risks. Migrants are better aware of the situation in the labour market in Libya.**

- Activity 2.1.1: Migrants will be informed of the risks encountered through irregular migration while raising awareness of the safe migration channels, VHR support and further alternative options. For this purpose, IOM will strive to engage all key actors, including community leaders, authorities and local population in awareness raising activities.
- Activity 2.1.2: Creation and dissemination of information campaign materials on the dangers of irregular migration, alternatives to such migration as well as associated health risks and preventative measures that migrants may take to reduce them, including where to access health care services.

**Outcome 3: Local authorities, communities and migrants benefit from improved social cohesion.**

**Output 3.1: Relevant local authorities have improved technical capacity to effectively respond to migration flows and human trafficking and smuggling of migrants.**

- Activity 3.1.1: Organization of a joint meeting/workshop with local government entities to enhance their knowledge and their capacity on management of migration and migration related matters. i.e. migrants' rights, vulnerabilities, legal framework and principles of humanitarian actions.

**Output 3.2: Host and migrants communities enhance their channels of communication to build a cohesive environment taking in consideration both communities needs respectfully especially with the limited resources in the country due to the ongoing conflict.**

- Activity 3.2.1: One community-based project for local development and social cohesion will be developed in Tripoli. Host and migrants' communities shall participate in dialogues to foster social cohesion among each other.

**The additional activities only present in Dutch-funded project proposal are as follows:**

- In 2017, IOM introduced a network of host families, where the most vulnerable migrants are hosted while awaiting long term solutions, such as return to their countries of origin or reunification with family members in third countries. Host families are identified with the support of migrants' embassies as well as migrant community leaders and are supported with non-food items and a monthly allowance to provide accommodation and food to migrants. The most vulnerable cases, including unaccompanied and separated children and women at risk, will be referred to host families for support and temporary shelter through IOM Protection Unit, or where appropriate to other partner organizations including DRC, Cesvi and UNHCR. Under this project, IOM intends to support 70 migrants to be referred to the host family programme. IOM case workers conduct regular monitoring visits to the host families, and if needed accompanied by MHPSS or medical staff to ensure tailored assistance is provided.



- Production of a short documentary on the risks and realities in Libya regarding employment, working conditions, where and how to get help in finding legal employment, labour law, public conduct, do's and don'ts related to cultural sensitivity, housing, security and safety both at residence and workplace, trafficking and gender issues.



## 1.4 Programmatic Changes

There were no major changes to the original objectives and planned outcomes of the Swiss and Dutch projects. There was a slight change in the Dutch proposal to move some leftover funds from the documentary production towards increased distribution of NFIs targeting more beneficiaries. The Swiss proposal also involved a few budget reallocations between the MRRM activities.

Several activities in Ain Zara and Old City locality were delayed due to access constraints. The MRRM teams also faced some challenges with local authorities in facilitating project implementation that had to do with providing documents targeting each municipality. There were also changes and delays due to COVID-19 as IOM adapted some awareness-sessions. The VHR programme faced some delays as the flights were delayed due to COVID-19.

## 1.5 Purpose and Scope of Evaluation

The evaluation covered the entire period of implementation of the two projects:

- Swiss-funded project (implemented from 1 October 2019 till end of March 2021)
- Netherlands funded project (implemented from 1 November 2019 to April 2021)

The geographic scope of the evaluation was limited to the Tripoli region, where the intervention was held. The overall goal of the evaluation is to understand the extent to which the stated objectives and results were achieved, the overall impact (positive/negative, intended/unintended) and who benefited from the interventions. It also involves a cross-comparison analysis to study and compare the effects of the two projects. SREO's assessment reviewed the two projects' design and implementation to document lessons and good practices that are mutually beneficial. The findings and recommendations from this evaluation will be used to inform further programming either through scaling up or through the development of a follow up phase to maximize the momentum created through both projects. The users of this evaluation include IOM Libya, particularly the project team including management, field and support teams interested in integrating recommendations, lessons, good practices into on-going programmes and future resource mobilization initiatives. The recommendations and findings also target the donors interested in understanding the effectiveness and efficiency of the projects.

## 1.6 Evaluation Criteria

**Table 2: Evaluation questions**

Criteria	Definition	Evaluation Questions
Relevance	Extent to which the intervention objectives and design respond to the needs of the targeted population.	<ul style="list-style-type: none"> <li>- Was the project's design adequate to address the problems at hand?</li> <li>- Do the intended results align with and support government officials building of capacities?</li> <li>- Has the project targeted beneficiaries – especially migrants - in the most effective way?</li> <li>- Is the project aligned with and supportive of IOM national, regional and/or global strategies and the Migration Governance Framework?</li> <li>- Are there any identifiable ways that the approach should be revised in future, or is it evident that additional or complementary activities or projects will need to be implemented?</li> <li>- Is the project well designed according to IOM project development guidelines in a way that addresses local priority needs?</li> </ul>



<p><b>Effectiveness</b></p>	<p>Extent to which the intervention achieved or is expected to achieve its objectives, and its results, including and differential results across groups.</p>	<ul style="list-style-type: none"> <li>- To what extent has the project successfully translated the resources (inputs) into tangible and quality outputs and outcomes in accordance with the stated plans?</li> <li>- To what extent has the project and its outputs enhanced the migrants' access to basic services and the capacities of Government officials and actors involved on understanding of migration related issues including migration governance?</li> <li>- Were the activities sufficiently well implemented to reach intended results? Would other activities have been more effective in reaching the results?</li> <li>- To what extent has the project and its outputs met stakeholder expectations, both government and participants?</li> </ul>
<p><b>Efficiency</b></p>	<p>Extent to which the intervention delivers, or is likely to deliver, results in an economic and timely way.</p>	<ul style="list-style-type: none"> <li>- To what extent were resources (time, funds, expertise) used wisely and adequately to address the most compelling priorities and achieve the outputs? Is the cost worth it?</li> <li>- Is the MRRM internal coordination done in the most efficient way, to ensure maximization of resources and timely implementation?</li> <li>- How does this project align with and complement other related initiatives, whether implemented by IOM, the government, or other national and international actors?</li> <li>- What is the added value, if any, of this project compared to those other efforts?</li> <li>- Were the project activities undertaken as scheduled and were outputs delivered on time and in expected quantity? If not, what were the reasons?</li> </ul>
<p><b>Impact</b></p>	<p>Extent to which the intervention has generated or is expected to generate significant positive or negative, intended or unintended, higher-level effects.</p>	<ul style="list-style-type: none"> <li>- What long-term changes (whether intended or unintended, positive or negative) can be observed, if any? To what extent can they be attributed to the project interventions?</li> <li>- What long term impact the MRRM approach has on coordination and management of mixed migration flows in Libya?</li> <li>- Does the MRRM intervention respect a conflict sensitivity approach?</li> </ul>
<p><b>Sustainability</b></p>	<p>Extent to which the net benefits of the intervention continue or are likely to continue.</p>	<ul style="list-style-type: none"> <li>- To what extent were the project and its results supported by local institutions and embedded in institutional structures that are surviving beyond the life of the project?</li> <li>- What, if any, migration management/referral mechanisms put in place by the project that show signs of resilience to continue after the project has ended?</li> </ul>
<p><b>Cross-cutting Issues</b></p>	<p>Extent to which the intervention(s) integrated issues like gender, protection mainstreaming, durable solutions, accountability to the affected population and Complaint Response Mechanism, protection mainstreaming, human rights etc.</p>	<ul style="list-style-type: none"> <li>- To what extent were gender mainstreaming issues considered in design and implementation?</li> <li>- To what extent were differences, needs, roles and priorities of women, men and specific vulnerable groups considered during planning and implementation?</li> <li>- Were any barriers to equal gender participation identified in design or implementation, and was anything done to address these barriers?</li> <li>- To what extent were the rights and dignity of beneficiaries upheld by the project and its partners throughout the implementation?</li> </ul>

## 2. METHODOLOGY

### 2.1 Evaluation Approach

Based on IOM's preferred approach for a qualitative study, SREO adopted a mixed methods evaluation underpinned by the **Qualitative Impact Assessment Protocol (QuIP)**. The goal of the evaluation is not only to understand the immediate impact of the MRRM activities on direct beneficiaries, but also the intervention's overall contribution towards an enhanced protection environment for migrants and stronger coordination and management of mixed migration flows at the community and institutional levels. The QuIP approach aims to gather evidence of a project's impact through narrative causal statements from direct beneficiaries, implementers and other stakeholders in the form of in-depth interviews. Using interview guidelines that are both open-ended but thematically structured, QuIP allows for comparison of cases or groups of similar / divergent cases between each other and to the program's intended objectives. It also aimed to understand key insights for cross-comparison of the two projects. To implement this approach, SREO designed qualitative interview guides for beneficiaries and key informants that consisted of mostly open-ended questions, supplementary prompts and some closed-questions framed around the OECD-DAC criteria. The interviews with beneficiaries covered various domains of their life including health, safety, knowledge/attitudes/perceptions on migration and their overall well-being. While adhering to the OECD-DAC criteria, the questions were framed around outcomes rather than inputs in order to collect information more broadly about what has changed in their lives and to capture outcomes, both intended and unintended. Using an inductive coding approach, the data was analysed to identify common themes, repetitions and patterns in the responses. In line with the QuIP approach, narrative analysis was used to extract, analyse and summarise 'stories' or narratives from the qualitative interviews to provide illustrative exemplification of particular findings. While evaluating the results of the project according to the OECD-DAC criteria, the researchers identified and grouped together more specific causes or drivers of positive and negative change by outcome domain, whether attributable to the project or not.

### 2.2 Theory Of Change

The final evaluation explores the intended roll-out of MRRM's project based on the implicit theory of change (ToC) as established by the project proposal and results matrix:

**IF**, on one hand, vulnerable migrants affected by conflict benefit from increased protection and have increased awareness of the risks of irregular migration, health risks, as well as available services and alternative migration paths, and on the other hand, local authorities, communities, and migrants benefit from improved social cohesion,

**THEN** coordination and management of mixed migration flows in Libya is strengthened.

The assumptions behind this ToC, as interpreted by evaluators, are:

- Access to humanitarian assistance services for registration, health services, essential hygiene, food, and NFI items, and key referrals contributes to protecting migrants against harmful external risks and negative coping mechanisms
- Knowledge gained through awareness activities contributes to deterring migrants from relying on irregular migration as a main form of migration
- Local development projects and the creation of local communication platforms contribute to improving social cohesion in the community

More specifically, using the QuIP methodology, evaluators examined the following mechanisms of change underlying the project ToC:

- ToC 1: IF migrants have access to the appropriate humanitarian assistance, THEN migrants are protected against harmful external risks and negative coping mechanisms
- ToC 2: IF migrant have knowledge and awareness of high risks involved in irregular migration, THEN migrants will be deterred from irregular migration
- ToC 3: IF local communities create communication channels between local authorities, host communities, and migrants, THEN local trust and social cohesion can improve.
- General ToC:
  - IF migrants have their basic needs and information needs met, and IF the community has improved communication mechanisms with migrants, THEN migrants will be less inclined to rely on negative and risk migration behaviours that undermine the coordination and management of mixed migration flows in Libya.

**The inception phase** involved a thorough desk review of project documents and secondary literature followed by collective data collection tool development as well as training of field researchers on methodologies, research standards, and study-specific sampling. **The data collection phase** included conducting semi-structured interviews with 40 direct and indirect beneficiaries, and 25 key informant interviews (KII), modelled on the **Qualitative Impact Assessment Protocol (QuIP)** approach. The QuIP approach to sampling is to select cases through rigorous purposive sampling, rather than seeking a large representative sample. Hence, SREO worked with IOM to select a diverse set of participants covering different project components as well as beneficiary demographics including gender, age, country of origin and duration of displacement. The data translation, cleaning, and analysis phase included translation and review of data for completeness and quality according to SREO's data cleaning protocols. SREO also analysed IOM's internal M&E survey data that complemented the qualitative data collected by SREO's field team.

Key evaluation questions were framed around the five OECD-DAC criteria of relevance, effectiveness, coherence, efficiency, impact and sustainability. As well as cross-cutting issues relating to sensitivity towards human rights, gender, disability and specific vulnerabilities.

### 2.3 Desk Review

SREO began the evaluation with a thorough desk review of available documents and relevant information to familiarize the research team with the context and scope in which IOM's two MRRM projects are to be implemented. This included:

- Project proposals, results matrices
- Funding agreements, No Cost Extension - NCE documentation
- Donor updates
- IOM-conducted M&E data and analysis reports
- Participants list
- Training material/curriculum
- Libya Humanitarian Needs Overview
- Relevant reports and analyses on mixed/irregular migration in Libya

### 2.4 Key Informant Interviews

Key informant interviews (KIIs) are individual interviews conducted with people, who are particularly knowledgeable and reliable sources on specific topics. The key informants were purposely selected by SREO in concert with the IOM team to ensure a variety of stakeholder perspectives are included. SREO

conducted **25 KIIs** in total. The key informants included IOM staff, local partner staff, Libyan government representatives, embassy representatives, community leaders and other humanitarian actors. The full list can be found in the annex.

## 2.5 Semi Structured Interviews

Semi-structured Interviews (SSIs) operate similarly to KIIs but are conducted with individuals who are directly or indirectly impacted by an intervention/event/phenomenon. Researchers design semi-structured interview guides in the same way to allow the facilitator to guide the discussion but also explore other topics as needed. They explore the “why” and “how” of discussion topics, offering a richer picture of the intervention that represents a specific individual or group’s experience. Each interview will run a maximum of 60 minutes to prevent participant fatigue. They are audio-recorded with each participant’s verbal informed consent. SREO conducted **40 SSIs** in total. They were conducted in Arabic (20), English (12) and French (8).

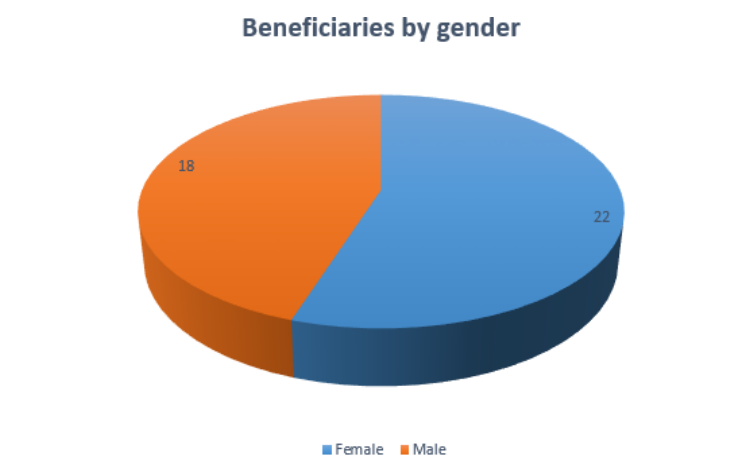
During the tool design stage, SREO aimed to divide the beneficiaries equally between beneficiaries from the two projects based on IOM-provided beneficiary lists, ensuring gender and different countries of origin are adequately represented. The beneficiary lists were divided according to the services the beneficiaries received, however, the number of beneficiaries per activity was not equally distributed. The beneficiaries serviced by Dutch and Swiss funded projects were not divided equally in the beneficiary list. Furthermore, many of the beneficiaries could not be reached due to unavailable phone numbers.

Due to this, the SSIs were divided between Dutch and Swiss funded project beneficiaries as follows:

- Swiss funded: 7
- Dutch funded: 23
- Dutch & Swiss funded: 10

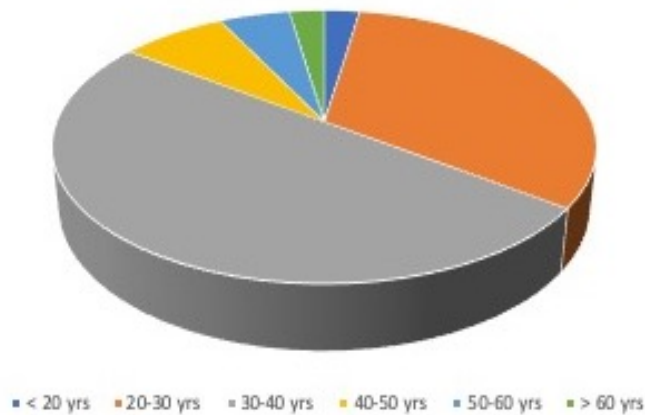
The participant profiles for interviewed beneficiaries are detailed below to provide an overview of the evaluation sampling :

**Figure 1** - The SSIs participants breakdown by gender



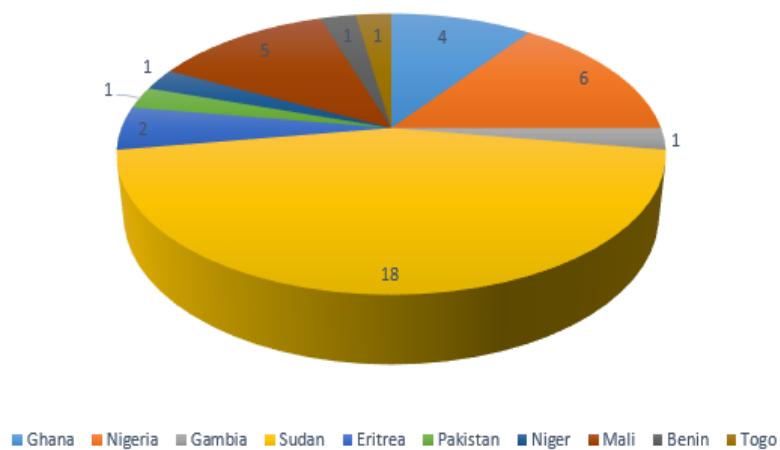
**Figure 2** - The SSI participants breakdown by age group

**Beneficiaries breakdown by age group**



**Figure 3 - The SSI participants breakdown by nationality**

**Beneficiaries' breakdown by nationality**



## 2.6 Study limitations

In adopting a heavily qualitative approach, it is important to note that the findings cannot be taken as generalizable nor representative and they do not measure the magnitude of impact. Rather, it aims to gather evidence on the projects' performance and understand the main changes that came about as a result of the intervention through narrative accounts from diverse stakeholders in line with the objectives of the evaluation. Risk of responder bias, researcher bias, and bias towards positive responses is high as stakeholders commissioning the evaluation were involved in informant and beneficiary selection. The findings of this report need to be considered with this limitation in mind. For the comparative analysis of the Dutch and Swiss projects, there was limited data to separate the two interventions as the beneficiary participants could not be equally divided between the two funds as initially planned due to the unavailability of several beneficiaries from the initial sample. Further, the donor reports and IOM's internal monitoring data were combined for both funds, limiting comparative analysis of the two projects during desk review.

## 3. FINDINGS

### 3.1 Relevance

The two IOM projects were designed in line with the needs identified in the Libya Humanitarian Needs Overview (HNO) 2021<sup>7</sup>. The 2021 Humanitarian Needs Overview (HNO) highlighted extreme levels of vulnerability and needs among refugees and migrants, representing 28% of the total population in need inside Libya<sup>8</sup>. According to the HNO, the need for health services were the highest, followed by food security, mine action, protection, WASH, SNFI, education, child protection, GBV services. In addition to ongoing conflict and insecurity combined with the economic and governance crisis, Libya also struggled to cope with the COVID-19 pandemic. Alkufra, Benghazi, Ejdabia and Tripoli mantikas were identified to be the most affected with the highest acute severity on average, with Tripoli being severely hit by recent conflict.

The two MRRM projects provided a comprehensive approach towards humanitarian assistance, implementing activities across protection, NFI, Hygiene, Health, MHPSS sectors in addition to assistance on Voluntary Humanitarian Return (VHR) programmes and awareness-raising sessions on risks of irregular migration, available services and alternative solutions.

According to the project update report covering the period between 1 October 2020 – 31 December 2020<sup>9</sup>, MRRM teams reached a total of 7,672 migrants (5,575 men, 2,087 women) from 27 different nationalities. Direct assistance was provided to migrants affected by the pandemic including those who had lost jobs and single-headed households with no source of income.

#### **Health**

The HNO 2021 found the most pressing issues to be:

- Lack of open and functioning health care facilities
- Suspended operations in many hospitals due to high rates of COVID-19 infection among staff and patients
- Unavailability of specialised services (such as reproductive health care, mental health, services for children under five years of age and treatment for patients with non-communicable diseases)
- Lack of medical staff
- Lack of medical equipment and supplies

In order to address these needs, both the Dutch-funded and Swiss-funded projects established a mobile clinic, and activities including provision of basic health care services and specialized assistance, including short term hospitalization and referrals to appropriate health service providers.

According to the interview with the doctor in the MRRM project, there were two medical teams, each consisting of a doctor and nurse in addition to a medical supervisor. The teams provided medical assistance starting from the examination inside the clinic, then provided medicines according to the need. Cases that needed advanced treatment and analysis were referred to general hospitals, private centres, or other organizations providing health services such as **Libyan Red Crescent**. Along with

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<sup>7</sup> OM's internal needs assessments, and actor mapping were not shared with SREO

<sup>8</sup> UNOCHA Libya, Humanitarian Needs Overview (January 2021)

<sup>9</sup> December 2020 MRRM Update Report (1 October 2020 – 31 December 2020)



visiting the patients in their homes, the mobile clinic also provided COVID-19 awareness sessions. People with disabilities (PwDs), and those living in remote locations were visited by the mobile clinic as well, they received examination and medication.

*“IOM provided medical care and medications (medication for high blood pressure and diabetes). The doctors take the desires of the sick person into consideration and they communicate with them periodically to check if they need anything, even when they want to come to the organization IOM provides transportation for them.”*  
*-A community leader in Tripoli*

The health services provided by IOM demonstrated strong relevance to the local context. It was reported that health care and medication were already difficult to secure due to the security situation, and the increased migration flows further burdened the already strained healthcare services in Tripoli. With many primary health care facilities in Tripoli being largely unavailable due to the conflict, government hospitals lacking the medical staff and equipment, and the majority of the migrants and locals being unable to afford treatments in private hospitals, **it was highlighted that the presence of mobile clinics was very relevant and appreciated, especially in the context of COVID-19.** IOM mobile clinics provided COVID-19 awareness sessions during their home and community visits.

IOM’s provision of medication, such as those for **high blood pressure and diabetes**, was very needed in the community due to their shortage and limited supply. The mobile clinics were also beneficial for **PwDs as well as pregnant and lactating women**, who were usually unable to leave their homes for medical assistance. During beneficiary interviews, the women participants noted that the security situation made it difficult for them to leave their homes to access health services.

**IOM’s assistance for childbirth for pregnant women** was highlighted during the majority of the interviews with the beneficiaries, as well as the key informants. Pregnant women were able to contact IOM directly, or contact them through their community leaders, in order to request assistance for free childbirth provided in the hospital.

*“The organization’s doctors were very cooperative, and they did medical examinations for my children and provided the medications they needed. otherwise, I wasn’t able to take my children to the doctor to get medications.”*  
*-A woman beneficiary*

However, there were some areas that required improvement, especially regarding the delay in providing the medical assistance. During the interview with the community leaders, 50% (n=5/10) highlighted that the medical assistance was delayed for cases which needed immediate attention. It was noted that the patient’s condition worsened during the time it took for IOM to examine, treat or refer the case to specialized services.

Moreover, three women beneficiaries interviewed mentioned that when they were consulted by IOM regarding childbirth, they were told that IOM would reimburse their hospital fees, however they reported being unable to get a response from IOM when they contacted them.

### **Protection**

The HNO 2021 found the most pressing issues to be:

- Lack of legal documentation
- Increased need for mental health and specialized protection services due to prolonged periods of confinement during COVID-19 pandemic



- Gender based violence
- Subjection of migrants and refugees to torture, sexual violence, abduction for ransom, trafficking in persons, forced labour and unlawful killings
- Lack of child protection mental health and psychosocial support and GBV support services
- Explosive hazard contamination
- Unsafe attempts to cross the Mediterranean to Europe (Irregular Migration)
- Interconnectedness of smuggling and trafficking networks with detention centres and a lack of sustainable alternatives to detention in the country

The HNO 2021 highlighted that the inaccessibility of mental health support was concerning given the increased risk of stress and anxiety stemming from the pandemic and the ongoing security issues. Both the Netherlands and Swiss funded projects provided mental health and psychosocial support (MHPSS).

IOM implemented a community-based MHPSS approach in promoting resilience and psychosocial well-being of individuals and their community, following adversities. This approach aimed to strengthen family and community support and care networks, and improve access to MHPSS services. IOM MHPSS team provided a varied set of services and activities to migrants and IDPs in different urban locations in Tripoli and Zwara, including disembarkation points following rescue/interception operations at sea. IOM's MHPSS team provided individual counselling and psychological first aid, psychosocial awareness sessions, art-based psychosocial activities, support group sessions, facilitation of recreational activities for children and adults, psychoeducation sessions, psychosocial assessments, remote counselling and PSS through the IOM MHPSS helpline for migrants, and referrals to Protection, Direct Assistance and specialized mental health care services if needed. In addition to direct MHPSS services, IOM focused on capacity building, mainstreaming MHPSS and supporting national coordination.

In the week leading to International Migrants Day (IMD) on 18 December 2020, IOM organized MHPSS workshops for women and adolescents from different nationalities. The workshops were focused on promoting and enhancing migrants' resilience, acknowledging participants' capacities' to overcome challenges, and strengthening coping mechanisms, such as family and community support and care networks. Furthermore, IOM's MHPSS team organized several activities to acknowledge migrants' contributions to the community during the pandemic. The team organized three different psychosocial activities on 17 December at the IOM centre in Hay Alandalus, where migrants from different nationalities shared their experiences, challenges, hopes and contributions to the community during COVID-19.

MHPSS was provided during the MRRM projects with 5 teams working in Libya with one in Tripoli, as stated by the MHPSS assistant. The team consisted of 5 members, and they conducted field visits, implementing activities for COVID-19 awareness, activities for children, for men and women. There were activities provided to groups and on an individual basis. The services were provided during field visits or at the MRRM centre. The teams were also tasked with registering beneficiaries during field visits and referring them to services according to their needs. **According to the MHPSS assistant, COVID-19 contributed to depression and stress in the community, as they were unable to work as they did before COVID-19.** The community's access to assistance and services decreased during this time and this increased the psychological stress.

The MHPSS team referred cases to the medical team and their psychological counsellor for the cases who required medication. The MHPSS team collaborated with IOM's protection and health teams by conducting referrals according to the need after obtaining approval from the migrant. The dedicated hotline for MHPSS was active and the interviewed MHPSS assistant said they were constantly working on developing it.

The key challenge to implementing MHPSS in Tripoli was the lack of hospitals providing specialized psychological services. There was only one hospital in Tripoli offering this service (Al Razi Hospital) and accessing this service was challenging for migrants due to high demand. Another key challenge reported was the lack of specialized staff for children's mental health.

The provision of mental health and psychological support were very relevant to the needs on the ground. During the interviews with key informants, **it was highlighted that protection assistance was one of the most urgent needs for migrants in Tripoli.** The migrant community leaders emphasized that migrants left their countries and migrated to Libya in search of better living conditions. However, during their travels to Libya, they were often attacked, assaulted and traumatized. Once they arrived in Libya, the majority of the migrant population had difficulties finding accommodation, jobs, and the lack of available health and other support services worsened their mental health. Moreover, when asked about the priority needs of the community, six interviewed beneficiaries specifically mentioned 'psychological support for migrants'.

*"When it comes to the needs of the migrants, I think PSS is the first priority, as many migrants have psychosocial problems. Migrants arrive at Tripoli exhausted and suffer from psychological problems, so, IOM provided PSS in a very good manner, and that is very important to migrants."*  
-An Embassy focal point in Tripoli

The PSS services provided by IOM were well-accepted by the community, and **especially the interviewed women beneficiaries noted the importance of these services.** Many women participants explained that they were exposed to sexual abuse. Single women, or women with missing or deceased husbands were particularly vulnerable, and some expressed during the interview that this made them afraid to leave their houses. The psychological support available for migrants were in line with the ToC as these services were very relevant to the context and needs, with the beneficiaries noting that it was useful for their wellbeing, which will make them less inclined to rely on negative coping mechanisms.

*"I received psychological support. I went three times in one week. I benefited a lot from it. As women we are exposed to sexual abuse and we need psychological support to protect ourselves. This is the most useful service I received."*  
- A woman beneficiary

It was also mentioned by some community leaders and beneficiaries that the Migrant's Day activities were well received by the community.

*"I received psychological support from IOM once during Migrant's Day. I am a single mother with children and my husband is missing. The psychological support gave me hope. I want to repeat this assistance."*  
- A woman beneficiary

IOM's two projects also focused on increasing awareness on the risks of irregular migrations and alternative solutions by providing awareness sessions, creation and dissemination of campaign materials on the dangers of irregular migration, and Voluntary Humanitarian Return (VHR) support.

Additionally, the Dutch funded project expanded on the awareness-raising component by producing a short documentary on the risks and realities of migrants in Libya regarding employment, working conditions, where and how to get help in finding legal employment, labour law, public conduct, do's and don'ts related to cultural sensitivity, housing, security and safety both at residence and workplace, trafficking and gender issues.

While migrating to Libya, or attempting to migrate to Europe from Tripoli, many migrants suffered from attacks, theft, kidnapping and human trafficking. The interviewed local government officials highlighted that during the last year, there were many cases of human trafficking through promises of taking migrants to Europe through sea.

*“During the last period, there was a focus on human trafficking, some people care only about collecting money, not about the spirits of humans or their health, those people are out of the country’s control (we called them militia), such people take a group of the migrants through the sea and link them with traders and drug dealers, so women and children are the most affected group in this case”*

- Andalus municipality in Tripoli

**IOM’s awareness raising initiatives regarding irregular migration were very relevant to the needs, given the situation in the city.** IOM included the migrant community leaders in these discussions so they could convey these messages to their respective communities. There was information about the risks of irregular migration on billboards in the city, brochures were distributed, videos were shown to beneficiaries.

**The voluntary humanitarian return programme (VHR)** was offered to migrants who wanted to return to their own countries safely. IOM worked closely with community leaders in order to inform them about the VHR programme. The community leaders relayed the information they learned from IOM about VHR to their respective communities. However, there still seemed to be a lack of knowledge about this programme, as some interviewed beneficiaries weren’t aware of IOM providing this assistance. Furthermore, it was highlighted that the VHR assistance had been slow during the COVID-19 due to flights being cancelled.

In order to improve the protection services in Tripoli, the MHPSS assistant noted that the promotion of MHPSS in the community and the training of community leaders on that specific topic was important. The community leaders mentioned that migrants need awareness sessions once they arrive, in order to learn how to plan their future in Tripoli, avoid illegal and dangerous activities and be informed of the services available for them. It was reported that the concerned local authorities were not very responsive to community leaders’ requests, and there was a lack of coordination and communication necessary in order to identify the migrants’ needs.

The Migration Governance training was beneficial for the participants and the interviewed local authorities who attended the training noted that it was useful as they learned information they weren’t aware of before.

*“Psychosocial support is very important so that migrants have hope and help in case people want to return home. When migrants arrive in Libya, some are traumatized; some have been assaulted, so the host communities provide them with their needs and help them feel better.”*

- A Community leader in Tripoli

### **NFI and Food Security**

The HNO 2021 found that migrants and refugees have lost their livelihoods due to the temporary or daily nature of their work making it more difficult to afford essential non-food items and were disproportionately affected by movement restrictions further impacting their access to markets and livelihoods. Many vulnerable households also highlighted needs for different non-food items. These included items such as generators, cooking fuel, blankets or heating systems, computers, mattresses, cooking stove and water storage containers. Major concerns have also been raised by households in

needs related to hygiene items, particularly due to COVID-19 pandemic, and that as a result have been particularly affected by price increases.<sup>10</sup>

The HNO 2021 also highlighted that the instability and COVID-19 restrictions — closing air, land and sea borders, imposing curfews and social distancing measures — have had a significant negative impact on food security. The availability and the cost of food was affected. In order to address this food insecurity, IOM provided food assistance to migrants affected by the pandemic including those who had lost jobs and single headed households without earning members. Food assistance included white flour, pasta, rice, chickpeas, red beans, green beans, tomato paste, sugar, jam, coffee, tea bags, salt, oil and water.

SREO was provided with the IOM-conducted beneficiary satisfaction survey data along with the monitoring report. IOM conducted 556 satisfaction surveys between November 2020 and March 2021 with the beneficiaries benefiting from NFI, hygiene kit and food basket distributions. During this period, 10,385 beneficiaries were supported by the Swiss-funded project and 9,573 beneficiaries were supported by the Dutch-funded project. According to the data collected, hygiene kits and food baskets were the items that were the most distributed as 36.69% of the surveyed beneficiaries received hygiene kits, while 25.54% received food baskets. The rest reported they received kitchen sets, winter blankets, winter clothing kits, summer blankets, mattresses.

**The provision of food, as well as NFI and hygiene kits were the best-known IOM assistance within the community.** Many community leaders confirmed working with IOM during the distributions of such kits.

In order to address the accommodation shortage on the ground, IOM provided assistance to host families by giving them a monthly allowance depending on the number of migrants they hosted and providing them regularly with food and NFI kits.

IOM conducted the Migration Governance training between March 6<sup>th</sup> and 11<sup>th</sup> 2021, in collaboration with the Centre for Migration and Refugees' studies in the American University of Cairo (AUC) and IOM Egypt<sup>11</sup>. A total of 21 participants attended the training, and the participants were from Ministry of Foreign affairs, Ministry of Local Governance, Ministry of Labor, Ministry of Justice, Hay-Andalous Municipality, Janzour Municipality, Abu Saleem municipality, Tripoli center municipality (Old city locality), Libyan Red Crescent, Libyan Coast Guards and IOM / MRRM field staff. The training covered several topics in the field of Migration such as: Historical background and migration governance, International Migration Law/International Refugee Law, Labour Migration and Human Mobility, Trafficking and Smuggling of Migrants, Labour Migration and Migration Development, The Global Compact for Safe, Orderly and Regular Migration (GCM). 67% of the participants stated that the training sessions were very useful to and related to their field work, and the facts and statistics included within the training were new to their knowledge; and 53% of the participants found the topics of the training very interesting and they recommend others to attend as they will benefit from the case studies and the international agreements and treaties presented within the training sessions. During the interviews with the government officials, they noted that the training was relevant as they didn't have sufficient information about Migration Governance before, and they requested to increase the number of such trainings.

Sixteen of the interviewed beneficiaries stated that they learned about the availability of IOM services and projects directly from IOM or from their friends. Rest of the beneficiaries learned about the project

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<sup>10</sup> 2021 Humanitarian Needs Overview Libya, Issued December 2020

<sup>11</sup> IOM Certificate in Migration Governance Second Edition Training Report

when IOM reached out to them directly through the visits to their workplaces or church. After being registered by IOM, they were consulted regarding their needs. IOM targeted the beneficiaries through discussions with the community leaders as well. The community leaders served as a link between IOM and their respective communities, and most of them were involved in the project activities such as distributions and information dissemination about the VHR programme.

When it comes to the awareness raising about risks of irregular migration, IOM used materials such as billboards, brochures and videos in order to reach out to beneficiaries. Videos seemed to be the most effective and memorable way for beneficiaries to understand the information given, as well as the brochures, as beneficiaries could read them once they reached their homes. However, the information sharing regarding VHR programme could be improved. The community leaders mentioned that the services were delayed and some of them did not know the reason, while some beneficiaries asked SREO's field researchers during their interviews regarding availability of voluntary return assistance.

IOM's Migration Governance Framework (MiGOF) consists of three principles and three objectives<sup>12</sup>:

- **Principle 1:** Adherence to international standards and fulfilment of migrants' rights.
- **Principle 2:** Formulating policy using evidence and a "whole-of government" approach.
- **Principle 3:** Engagement with partners to address migration and related issues.
  
- **Objective 1:** Advance the socioeconomic well-being of migrants and society.
- **Objective 2:** Effectively address the mobility dimensions of crises.
- **Objective 3:** Ensure that migration takes place in a safe, orderly and dignified manner.

The project activities aligned with all the above principles and objectives of IOM's Migration Governance Framework. During the interviews, the beneficiaries and the key informants all expressed high satisfaction with IOM's professionalism and respect. They stated that they felt comfortable, respected and safe during the project activities. In order to achieve principle 2, IOM provided capacity building training to 21 participants about Migration Governance. There were community-based activities to improve the relationship between migrants' and host communities, awareness raising sessions regarding irregular migration, and meetings were conducted with community leaders in order to involve them in the project. IOM collaborated with Al Mutakana, Libyan Red Crescent, NRC, as well as UNHCR active in Tripoli. The project activities were addressed to achieve the three objectives.

The major external factors influencing the achievement of the project's expected outputs and outcomes were the COVID-19 pandemic and the security challenges on the ground. There were some delays due to COVID-19, including the flights being delayed, which affected the VHR programme. IOM also reported facing a challenge in procurement as they only received two proposals from local stakeholders despite the extended period of the advertisement. Due to this, IOM decided to move forward with the activities to be directly implemented by the IOM team instead of a partner. The coordination with the government counterparts to receive the relevant approvals for potential activities were delayed due to the different parties involved and the absence of clear structure within the different entities. Nevertheless, IOM was able to identify solutions and started a new procurement process accordingly, by mid-December 2020.<sup>13</sup> There were no major changes to the original objectives and planned outcomes identified.

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<sup>12</sup> IOM's Migration Governance Framework ([https://www.iom.int/sites/default/files/about-iom/migof\\_brochure\\_a4\\_en.pdf](https://www.iom.int/sites/default/files/about-iom/migof_brochure_a4_en.pdf))

<sup>13</sup> Inception Questionnaire



The data collected shows that the projects were well designed and relevantly implemented, according to the local priority needs as well international standards governing migration response. However, there were some priority needs that the project did not put sufficient emphasis on, such as addressing migrants' shelter needs.

*“Providing shelter for the migrants must be a priority, recently we noted that there are migrants who sleep on the seashore and in the gardens, this gives opportunities to human traffickers and some people can exploit the migrants, this affects negatively on the migrant and the country. So, there should be dedicated programs for this issue.”*

*- Andalus Municipality*

Strengthening the shelter component either under MRRM projects or through additional interventions are necessary to improve this urgent need and better contribute to the project ToC. Other additional activities that could be implemented in order to improve the approach could be found in the 'Conclusion and Recommendations' section of this report.



## 3.2 Effectiveness

According to the IOM Final M&E Report from March 2021, the beneficiaries expressed satisfaction with the usefulness of the items provided by IOM. Beneficiaries were 'very satisfied' (46.76%) and 'mostly satisfied' (44.06%) with the usefulness of the items. The food items provided to beneficiaries lasted two weeks according to 45.31% of the surveyed beneficiaries, however, 37.50% responded that it lasted less than 1 week, while the rest (17.19%) said it lasted them more than 2 weeks.

The satisfaction of the beneficiaries with the quality of items they received was high. The beneficiaries were mostly satisfied (48.20%) and very satisfied (37.23%) with the quality. IOM staff's assistance and professionalism were another point where the surveyed beneficiaries were 'very satisfied' (55.58%) and 'mostly satisfied' (36.69%) with. Overall, the beneficiaries were satisfied with IOM services as 92.09% responded that they would recommend IOM assistance to others.

When it comes to the usefulness of items received to cope with COVID-19 crisis, 32.49% were 'very satisfied' while 28.53% were 'mostly satisfied'. 19.21% of the beneficiaries were not satisfied, 16.95% were averagely satisfied and 2.82% were dissatisfied. However, it must be highlighted that the items distributed were not meant specifically to address COVID-19 pandemic.

The distribution of food, hygiene and NFI kits were very effective in order to address the most urgent needs of the migrants, especially during COVID-19. With many migrants losing jobs because of the pandemic, it was reported that the majority of migrants in need were unable to pay for food, hygiene items, and NFI such as mattresses, blankets, etc. This also contributes to the project ToC as the migrants whose urgent needs are addressed will be protected against harmful external risks and will be less likely to rely on negative coping mechanisms. During the interview with the community leaders, it was emphasized that IOM was able to reach out to people in need who didn't have a source of income.

*"We were able to cover a large segment of the Sudanese community during the past year and a half (e.g. we were able to cover more than 10000 Sudanese people with distributing food, clothing, and hygiene materials). COVID-19 period was very bad for the widows who have children, due to the lack of job opportunities within Libyan Market, but with the help of IOM team, we were able to provide food kits for the widows or the elderly breadwinner who couldn't work during this period, we implemented the plan and all women in this community were satisfied, we thank IOM organization for the provided assistance."*

- A Community leader in Tripoli

The interviewed beneficiaries who received food and NFI kits expressed that the support came at the right time and addressed their priority needs. However, there were some beneficiaries and community leaders who highlighted that the provision of kits was not regular with some beneficiaries reporting having received it only once, while others received it more than once. At the same time, there were some beneficiaries who stated that the quantity of kit contents was not sufficient because of the large number of people in their household or because of the irregular distributions. Furthermore, due to the high number of people in need, it was difficult for IOM to reach out and cover all of them with the distributions. Without clear information regarding the availability of food kits and frequency of the food kits, beneficiaries were unable to plan ahead.

*"I am a migrant without my husband, I received food, medical help... They provided support for me, such as blankets in the cold days, mattress, food, detergents. There is no better organization as IOM."*

- A woman beneficiary

Regarding IOM’s assistance in health services, the interviewed local government members reported the weak health system in Tripoli and IOM’s efforts regarding Primary Healthcare Centers (PHC) were very effective to improve the existing PHCs.

*“Until this moment, IOM made a huge effort with us regarding PHCs. They were up to the responsibility, as we were needing a sponsor to carry out this matter, especially with the unstable situation of this country, and authorities weren’t interested in the project. We were just receiving promises from those authorities. IOM was very responsive, and they came here to see the situation and do assessments, and they are still doing well and I still communicate with them.”*

*- KII with Health Coordinator, cooperating between IOM and primary health care centers within the region*

The MHPSS services were appreciated by the community, and the beneficiaries who received PSS services expressed that the services made them hopeful, helped them with their fears, and improved their mental health. When it comes to raising migrants’ awareness on the risks of irregular migration, health risks and alternative solutions, as well as the Voluntary Humanitarian Return programme, the community leaders expressed that the information the beneficiaries received were useful. During the interviews with the beneficiaries, SREO asked if their views about irregular migration changed after they received IOM’s awareness sessions or materials, such as receiving brochures.

(Out of 40 participants, 24 said yes, 13 did not reply or said they didn’t know, while 3 said their views did not change.)

**Figure 4 – Change of opinion about irregular migration**

### Did your opinion about irregular migration change after IOM's awareness sessions/materials?



The beneficiaries who attended the awareness raising sessions reported that the sessions were easily understandable, and they noted that they were sharing the information they learned with other migrants, especially the ones who were considering migrating irregularly. There were also some beneficiaries who reported that they previously considered taking such risk journeys, however the information sessions helped them change their mind. Additionally, there were some beneficiaries who arrived in Tripoli through irregular migration, and since they knew about the risks already, after having experienced them, they said they would not do it again. On the other hand, there were two women beneficiaries who noted that despite knowing about the risks of irregular migration, and despite receiving information from IOM, they were still considering migrating irregularly due to their difficult living situation in Tripoli. Even though these sessions provided the knowledge and awareness of high



risks involved in irregular migration, 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.

The Voluntary Humanitarian Return (VHR) programme unfortunately faced some difficulties with the flights being delayed and cancelled due to COVID-19. The community leaders expressed that the process took long due to the delayed flights. The interviewed beneficiaries who were registered in the VHR programme noted that they were waiting for a call from IOM.

*“There was a change for the better where some migrants have agreed to voluntary return and others who learned the risks of migrating through the sea (e.g. if we changed the way that 5 out of 25 people think, this percentage will eventually affect more people and convince them to change their faulty ideas).”*

- A Community leader in Tripoli

Despite the delays in the VHR programme due to the aforementioned reasons, this assistance was very effective and multiple community leaders noted that it should be continued. The programme was particularly effective within the Sudanese Community—one of the largest migrant communities in Tripoli—with the community representatives noting that the number of Sudanese migrants returning to their country increased in the last year thanks to the VHR programme.

According to the project update report covering the period between 1 October 2020 – 31 December 2020, there was a successful referral mechanism in place. In order to ensure that migrants are able to reach and access MRRM services, teams distributed helpline cards. Migrants were referred to MRRM seeking direct assistance (food, non-food items and primary health care). Migrants’ access to basic services seems to have increased during the project activities, as the majority of the beneficiaries noted that they benefited from more than one type of assistance. For example, beneficiaries receiving food kits often also received health consultations, medications, or protection assistance. The beneficiaries often learned about other services from IOM themselves during consultations, or from their friends and neighbours. However, some services were not very well-known among the beneficiaries – for example, except from the beneficiaries who were already registered in the Voluntary Humanitarian Return programme, there seemed to be a lack of knowledge about this assistance.

When it comes to the training provided to build capacities of local authorities, the interviewed community leaders and local government employees who attended the training expressed that the training was very useful. The contents of the training taught them new perspectives to deal with migration and raised their awareness on topics they were previously not informed on. IOM conducted pre and post evaluation and according to the training report, 85% of the training participants had ranked themselves to have initial and moderate knowledge of the training topics before the training. In the post evaluation, 42% of participants ranked their knowledge of the training module as having improved to the highest through the training sessions.

*“I wasn’t aware of migration related issues before; the training was very useful.”*

- Janzour Municipality

Overall, the services were appropriate and well-implemented to reach intended results, however, there were some areas needing improvement. In order to effectively respond to migration flows and the risk of human trafficking, kidnapping, etc. a stronger collaboration with the local government is necessary. Key informants from community leaders as well as the local government noted that these issues could not be addressed simply with humanitarian assistance, because the government did not implement sufficient measures, and some community leaders stated that the government did not consider the migration issues as one of the priorities. IOM could organize recurring information

sessions and trainings with various local government entities, and attempt to involve them in the process of providing solutions to irregular migration.

The project and its outputs seemed to have met stakeholder expectations, as they noted that IOM's assistance was well-received in the community. However, the interview participants from the local government noted that they wanted stronger collaboration between them and IOM. They requested additional workshops in order to improve their capacity to respond to migration flows, as well as periodic meetings with the project team. The community leaders reiterated that IOM should work with the government to intervene on issues related to migrant detention, missing migrants and kidnappings. They also noted that even though the awareness sessions were useful, the irregular migration would not likely stop anytime soon, and the risks that came with it would not cease unless the government itself interfered.

*“IOM can contact the government and see how to help, we have a lot of migrants in the prison and they need medical assistance and help. Some of them want to go back home... we have lots of pregnant women, women are really suffering in the prison. Some of them are there with their newborn babies (7 or 8 women), we really need help here especially with the women side. If we work with the government hand in hand, we can find a way in my opinion.”*

*- A Community Leader in Tripoli*

Overall, the MRRM projects successfully translated the resources into tangible and quality outputs and outcomes in accordance with the stated plans. Both projects enhanced the migrants' access to basic services and the capacities of government officials to understand migration related issues, including migration governance. The activities were well implemented, thus allowing to reach intended results, although IOM was forced to adapt some awareness sessions due to COVID-19.

### 3.3 Efficiency

Both the Swiss and Dutch projects were planned and implemented well for the most part from the donor and implementer perspective without major changes to overall outputs and timelines. While some activities were delayed due to COVID-19 and access constraints in some locations, the overall timeline was met. Activities under both funds were designed and implemented to address the most pressing needs among migrants and they complimented each other in many aspects. The Dutch project's had additional activities including the host family program, mobile clinics, enhanced MHPSS assistance, and the production of a documentary on employability and related conditions in Libya, which built on the Swiss project's activities under the same sectors. For activities that overlapped, they were implemented by the same programme teams to ensure a coordinated approach. The success of this approach is reflected in responses from project participants and stakeholders expressing high levels of satisfaction with the project activities. They also attributed many positive changes in migrants conditions and local capacities to the project. It was also observed that funds within both projects were reallocated efficiently, when needed, to meet urgent needs. For example, after producing the documentary, the remaining funds under the Dutch project were used to provide more NFI kits to beneficiaries. Similarly, there were minor budget reallocations under the Swiss project to focus on more urgent needs. Hence, resources were used wisely and efficiently to address the most compelling priorities and achieve outputs.

The project had effective partnerships in place to reach a large number of migrants and communities. The team communicated with the embassies, churches, and religious groups. There was an established communication between the embassies and IOM, though Beninese and Gambian community leaders noted that they didn't have an embassy in Tripoli and their coordination with IOM could be improved.

The embassies informed IOM of the number of migrants they have and the assistance they need, the IOM team verified their conditions and provided assistance to them. IOM communicated with other departments as well to assess the number of migrants in certain regions in order to assist them. However, some concerns were raised about IOM's internal coordination by embassies and community leaders, who noted that IOM sometimes took too long to respond. One of the embassy focal points suggested having one focal point across all activities which would make communicating with partners and coordinating with different departments easier. Since IOM has several departments in each project, often there was miscommunication between the departments which caused delays. Others also felt that IOM's internal communications and referral mechanisms could be improved to ensure maximization of resources and timely response to urgent protection and medical cases. This was voiced by a few beneficiaries as well.

*"IOM is taking too much time to respond to emergencies. When it concerns somebody's life, the issue becomes very important. As I went to that hospital and it didn't work, I said then that the IOM is our last hope, and even after going to them, they are just putting me on hold."*

- A Male beneficiary

*"I was born and brought up here, and things are really not easy for us. I am trying my best to see how to get help from IOM. They need to focus on people who really need help, especially people who need medical assistance. Not everyone can afford an operation in a private hospital. And in the governmental hospitals they don't have enough medical staff. That's why we reach out to IOM to see how to get help, but it really takes a long time before getting the help we are asking for."*

- A Community Representative in Tripoli

Voluntary returns were delayed due to the pandemic, as an effect of the delayed flights... The MHPSS assistant and the M&E enumerator both confirmed that the project activities were undertaken as scheduled and outputs were delivered on time. On the other hand, few KIs mentioned that IOM assistance faced some delays during the implementation due to the security situation. The MHPSS assistant noted that they are very close to the health team, they continuously worked with the available doctors and most of the referrals were done in the field. They worked closely with the protection team, when conducting an interview or a consulting session with migrants, they systematically reported the need for protection assistance and took the approval of migrants before referring them. Additionally, the IOM doctor mentioned that the health centres and the mobile team had adequate medical supply but commented that the team could help with additional staff to cover the needs of the beneficiaries.

While some community leaders and embassies mentioned that there were regular meetings with IOM, others noted that the collaboration and communication was not sufficient. For example, the representative of the Ivory Coast noted that there has been cooperation with IOM since 2011. The meetings were fruitful where the embassy members provided suggestions about the migrants' problems and exchanged information to achieve the biggest benefit to the migrants. The Sudanese community representative also confirmed having periodic meetings and strong collaboration with IOM. However, the Beninese and Burkina Faso community leaders thought the collaboration could be improved by including the community leaders in the project design, informing them about the ongoing activities regularly, or conducting monthly meetings.

MRRM also had referral pathways with other humanitarian agencies to receive referred cases seeking to benefit from MRRM services. MRRM regularly referred cases to and from the International Rescue Committee (IRC), CESVI, Norwegian Refugee Council (NRC), Médecins Sans Frontières (MSF), Libyan Red Crescent (LRC) and others. The interviewed informant from NRC noted that NRC communication center started operating in August 2020 and the referral mechanism between them and IOM was fairly

new, but it was functioning well. This indicates a delay in establishing a referral mechanism with NRC given that the project started at the end of 2019. NRC mostly received referrals from IOM legal assistance, while they referred beneficiaries to IOM for a variety of services. The referrals between Libyan Red Crescent (LRC) and IOM were mainly for health assistance. The LRC informant noted that they had a meeting with IOM about the referral mechanism; but the meetings were not regular, and that the communication and coordination between LRC and IOM could be improved. He also noted that LRC has not referred any beneficiaries to IOM; instead they received beneficiaries referred by IOM for health assistance.

IOM contracted with hospitals<sup>14</sup> to ensure that the referred patients are receiving the needed treatments, according to the IOM doctor. The medical team, who referred the case, followed up from the beginning until the treatment was complete, to ensure the case had received the health assistance in full. The interviewed beneficiaries who reported being referred to health services by IOM confirmed that IOM kept in touch with them in order to make sure they received the help they needed.

There were periodic meetings with IOM but there was no signed MoU, according to the Ministry of Local government informant. There was one person who followed the organization's affairs and had meetings every three months in the Libyan Ministry of Foreign Affairs and several parties from other ministries such as the Ministry of Interior, the Ministry of Justice, the Ministry of Labor and the Ministry of Local Government attended, and in these meetings, they discussed the current situation and provided recommendations. The Ministry of Local Government added, *"It is better to inform us about all their activities to avoid any overlap. Referrals are not within the jurisdiction of the ministry, although the municipalities are affiliated with us, but what is related to deportation procedures are internal matters and IOM is directly responsible for them."*

According to the inception questionnaire, within MRRM daily activities' implementation, MRRM teams faced several challenges in the field with the local authorities in facilitating project implementation in some municipalities, delaying several activities in these locations. The changing security context also hindered access to some locations. In addition, the coordination with the government counterparts to receive the relevant approvals for potential activities has been delayed due to the different parties involved and the absence of clear structure within the different entities. Nevertheless, IOM was able to identify different ideas and started a new procurement process accordingly, by mid-December 2020.

IOM recently signed an MoU with the World Food Programme (WFP) in support of the inter-agency Common Feedback Mechanism system to collect migrants' feedback and needs and refer them as needed. IOM is also financially contributing to hotline operators that speak the most commonly languages among migrants. The MRRM projects focused on migrants in urban settings and complemented other IOM interventions assisting migrants in detention. A key added value of the MRRM projects was to bring together in one mechanism humanitarian aid, a wide range of services and needs based assistance to migrants living in urban areas as well as vulnerable cases from the host community through the deployment of mobile teams during the conflict and the COVID-19 pandemics.

### 3.4 Impact

The two projects under the MRRM programme provided life-saving services that included Food and NFI assistance, Health and protection services including the voluntary humanitarian return (VHR) programme, and awareness raising sessions on irregular migration, safe migration channels and services available to migrants. The intervention also included a social cohesion and capacity building

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<sup>14</sup> SREO was not provided with the MoUs signed with the hospitals.

component to engage local communities and government officials to encourage their role in effectively responding to and managing mixed migration flows in Tripoli.

With regards to long term changes that can be attributed to the project, most of the interviewed beneficiaries reported positive changes in their personal lives as well as in their attitudes and behaviour towards irregular migration. The awareness raising sessions positively impacted most beneficiaries. Around 60% of the interviewed beneficiaries stated that their views towards irregular migration have changed and they were now against it. Another 30% chose to not respond to the question while the rest stated that they always thought it was dangerous and would never cross the sea. These sessions increased their knowledge about irregular migration and the associated risks as well as the legal pathways available to them. Several beneficiaries passed on this information to others in their community. 7.5% of the respondents stated that they would advise their families and friends not to migrate irregularly through the sea or desert and inform them about safe migration. Thus, this component contributes towards encouraging migrants to make informed and safe decisions regarding migration and also in encouraging their peers to do the same. A few had learnt of the VHR programme through these sessions and registered with IOM to return home. There were also a few others who were identified as People of Concern through IOM's referral process with UNHCR.

The theory of change is designed with the assumption that if migrants have their basic needs and information needs met, and if the community has improved communication mechanisms with migrants, then migrants will be less inclined to rely on negative and risk migration behaviours that undermine the coordination and management of mixed migration flows in Libya. While the awareness raising messages provided to achieve this change of reducing irregular migration flows were appropriate and effective to an extent, two beneficiaries noted that they would still consider taking the risky journey by sea to Europe because their circumstances were extremely dire.

*“Even though there is support being provided, when I see my children suffering in-front of me, my psychological state gets worse. I won't lie to you; I think about traveling irregularly through the sea.”  
- A woman beneficiary*

The project activities also helped improve the well-being of the targeted beneficiaries. Many described that they felt more hopeful and safer as a result of the project. The MHPSS assistance was particularly well-received by beneficiaries, who believed that these sessions helped them deal with their hardships and become more positive about the future. There was also a general understanding among different migrant communities that IOM would help them either directly or through referrals if they were in need of a particular service. This was echoed by a few beneficiaries as well as several embassy focal points and community leaders. According to one beneficiary, *“...there are many migrants who are afraid to get medical health but IOM helped them to be aware of the services available and get what they need. Personally, I am more hopeful as a result of the project. We are less afraid and know what to do to stay safe. It definitely has a long-term impact...”*

The interviewed doctor and medical officer confirmed that the project increased access to health services for many migrants, and that there was a positive change in the lives of the migrants before and after providing this assistance.

Overall, the project had wider positive effects that went beyond the impact on direct beneficiaries. According to a community leader, IOM's assistance had a wider impact on perceptions and aspirations at the community level. He noted, *“Of course, the impact of the project is obvious especially on the Sudanese community, as it is one of the biggest communities in Libya. The voluntary return trips have increased to 14-16 trips since the beginning of the project. Some changes related to the social cohesion aspect can also be observed.”*



On the other hand, some of the key informants did not notice major long-term changes after the intervention, stating that more efforts and work still need to be done. Some of them said that the security and political situation in Tripoli had to improve to see more long-term changes in the lives of migrants and also alluded to the response not being able to meet the increasing needs of the large number of migrants in the city. The interviewed IOM caseworker mentioned, *“We are providing the necessary assistance. Activities such as the awareness sessions about irregular migration will reach not only the migrants but also his relatives and others in his country of origin. But there are no other significant changes as Tripoli is so big and the migrant numbers keep increasing every day.”*

Negative stereotypes towards migrants still prevail among community leaders and according to the Tripoli Center Municipality informant, migration increased the risks of diseases spreading and the crime rate. The project provided health and protection services, in addition to the awareness component to effectively respond to the needs of the migrants.

The project established more formal pathways to cooperating on migrant response. By engaging community leaders and embassy representatives, the project institutionalized coordination and management of mixed migration to some extent. Embassies are now intervening directly and referring cases for VHR, protection and health services to IOM. A Community representative explained that they are currently working closely with VHR, protection, health and other departments at IOM. *“Before the intervention, there were middlemen who used to collect information from people and they would contact IOM. In such cases, some mismanagement can happen. Now, the interaction between migrants and IOM is happening directly and they make necessary arrangements at the embassy premises. As a result of the project, we can avoid these middlemen by directly intervening with the help of IOM”*. The representatives of Rwanda, Senegal, Cameroon and Ivory Coast communities interviewed all confirmed the established coordination between their embassies/area of responsibilities and IOM.

Most of the embassy focal points and community members believed that the project was accessible to and addressed the needs of particularly vulnerable groups like unaccompanied children, women, victims of trafficking and abuse, people with disabilities, elderly. As quoted by one of the embassy focal points, *“With regards to elderly people, we have some vulnerable cases. We are giving shelter to them. For example, last May 2020, there was a massacre in Mezdah (south of Tripoli) where 26 Bangladeshis were killed and many injured by traffickers. We provided shelter to some of the affected Bangladeshis. We have some measures to protect vulnerable cases with shelter and more.”* Response measures to vulnerable groups have been introduced by other embassies as well according to key informants representing Ivory Coast, Benin, Cameroon, Senegal and Burkina Faso.

On the other hand, the Gambian community leader interviewed, who attended few meetings with IOM in person and via ZOOM, mentioned that the services offered by IOM did not address the priority needs in her area. She added that she was not aware of any measures taken to improve the coordination and management of migration flows, especially since they do not have an embassy in Libya. They only have community leaders to coordinate between migrants and authorities. She believed that no measures have been introduced to respond to particularly vulnerable groups like unaccompanied children, women, victims of trafficking and abuse, people with disabilities, elderly.

The Ministry of Local Government informant praised IOM's effort in providing basic services to the migrants. She invited them recently to the ministry in order to talk about their work and what added value the ministry might provide to reach the needed results. This implies that effective communication has been initiated regarding this topic.

**Time, effective communication and proper awareness are key components to fill the gap between the needs of the host communities/migrants and the services providers.** The Libyan Red Crescent

staff in Tripoli stated that the Libyan community did not accept the idea of migrants or integrate migrants in the local community. According to him, *“This issue needs time to be solved and it also needs modern methods for awareness about migrants and their problems”*. He pointed out that there is a gap between communities and organizations regarding this topic”.

Regarding the provision of logistics, the Multakana informant confirmed that IOM have done everything they could; however, as for the aspect of integration of migrants into the local community, there still is a lot of work to be done. He explained: *“The entire migration system needs to be restructured to deal with the migrants, and both the social affairs’ officials and the education officials need some capacity-building on this matter. Furthermore, they need Libyans to engage with them and not Syrians or Lebanese or other nationalities, because these other nationalities are putting efforts and working their best, but they cannot be compared to Libyans.”* This indicates **the need and importance to engage Libyan actors in the inclusion and social cohesion efforts.**

*“I can say that safety and protection of vulnerable migrants increased to a large extent, as they provided all types of assistance, and the migrants felt safe due to this assistance, they solved many security issues regarding formal papers and voluntary return, through the protection teams. They tried to raise the migrants’ awareness about the risks of irregular migration, and I think they succeeded in this”.*

*- A community representative in Tripoli.*

To address the needs of vulnerable migrants and host communities in Libya, IOM designed the MRRM programme and prioritized an integrated response by providing a wide range of services that relied on needs-based assistance while taking into consideration the political, social, humanitarian and security context. The design followed a conflict sensitivity approach, especially the following components: social cohesion, capacity building and awareness raising.

The collected data from the key informants demonstrates that IOM incorporated a conflict sensitivity approach. According to the local council in the old city of Tripoli, the training had developed his problem-solving skills and communication skills, and it helped him to know how to deal with migrants who come to his area.

Given the sensitive social situation between the migrants and the host communities, and the conflicts occurring between them, the training helped in building local capacities within the targeted municipalities to respond to migrants’ needs and raised awareness about migrants’ assistance.

*“There were some issues that we had not cared about despite that they were in front of us, but after receiving the training, we started caring about the migrants in terms of assistance, medical care and implementing a work plan within the municipality.”*

*- Andalus Municipality*

The municipality of Andalus neighborhood informant added that the training was excellent and it covered many topics related to migration methods, information about migrants and human trafficking. After meeting with the IOM representative/agent, they concluded that they should establish a formal office, and there could be cooperation with some organizations and a dedicated budget by the mayor of the municipality and the Ministry of Local Government to help the migrants.

The IOM team leader noted that the people in need communicate with the municipalities to receive assistance, however not all the municipalities were responding. IOM communicated with the municipalities and the MRRM teams to assess the needs of the migrants. However, IOM needs to strengthen communication with less responsive municipalities to ensure that their staff will respond and assist the migrants appropriately.

- The awareness raising and recreational activities play a huge role in enhancing the social linkages between migrants and host communities. However, the social cohesion activities could be improved by enhancing the skills and knowledge of key community actors in conflict analysis and resolution, problem-solving, and reconciliation mechanisms enabling them to advance a reconciliation agenda. Such approach would build the capacity and provide local stakeholders with the ability to exert social cohesion in their communities and support the implementation of local reconciliation initiatives. IOM should identify committed interlocutors and stakeholders who represent diverse enough segments of the community that reconciliation initiatives will be more likely to hold. These should be influential figures, tribal leaders, and other community actors. IOM should also work with local staff and partners to maximize the endorsement necessary for a successful, inclusive process. This would include marginalized minorities, women, and youth—where these groups are not the target groups of the dialogues, they should be included in each community activity. IOM could extend awareness trainings about migration related issues (including migration governance) to Libyan schools and communities to contribute to increased acceptance of migrants in the local community. IOM could also increase the number and variety of events, such as workshops, conferences and panel discussions to build ownership of and commitment to reconciliation among migrants and local community, but also to strengthen trust and community relationships. None of the migrant beneficiaries interviewed by SREO noted attending social cohesion activities, and apart from a community leader who mentioned creating a football team and participating in the local leagues in coordination with community youth groups, no other community leaders mentioned such initiatives, and IOM noted that the football team and local leagues were not part of MRRM programme activities. However, according to the IOM project updates: On 8 March 2020, IOM organized an event to celebrate International Women’s Day and the inauguration of MRRM base in Hay Alandalos, as part of its efforts to support vulnerable migrants in Libya.
- The MRRM team in collaboration with IOM’s MHPSS, Child Protection and Labor Mobility and Human Development (LHD) units celebrated the occasion of International Migrants Day (occurring on the 18th of December each year) by conducting a series of recreational activities on “Reimagining Human Mobility” to shed light on the cultural and economic impact of migration in Libya through migrants’ stories. The activities were conducted from the 13th till the 16th of December at the MRRM base in Tripoli.
- The rehabilitation of health and education infrastructure was prioritized by community based initiatives to provide services for migrants and local communities. IOM implemented activities at these venues, during IMD and World Day for cultures, in which locals and migrants participated.

### 3.5 Sustainability

IOM took sustainability into account when designing and implementing the integrated response in Tripoli. While prioritising immediate emergency assistance to vulnerable migrants through food kits, non-food items and urgent health services, they also focused on interventions that would support more long-term responses to migration flows at the community, local and institutional level. Specifically, the awareness raising sessions for migrants on safe migration, capacity-building for government actors on migration management and community engagement activities intended to contribute towards the longer-term goals of this project including enhanced safety, social cohesion and migrant-sensitive institutional response.



According to SREO's assessment, several aspects of the project and its impact can be sustained in time. All beneficiaries interviewed by SREO had attended the awareness-raising sessions conducted by IOM that covered topics related to the dangers and risks associated with irregular migration, legal pathways and services available to those in need. They also received information on health and hygiene practices including COVID-19 safety measures. Many of them received the relevant information while receiving other services such as food kits and health care. All of them reported that the awareness sessions helped them understand the realities and risks of crossing the sea and with more than half (n=24/40) agreeing that that it helped change (n=4/40) their attitudes towards irregular migration for the better and a few (n=4/40) stating that it reinforced their belief that it was always dangerous. The remaining 12 beneficiaries chose to not respond to whether the sessions changed their views on irregular migration with two noting that their conditions were so dire that would still consider taking such risky journeys. A few beneficiaries (n=2/40) revealed that they had considered taking the journey across the Central Mediterranean Route to Europe before, but were dissuaded after attending the awareness sessions. A few others (n=3/40) also mentioned that they spoke about the risks and dangers associated with irregular migration to others who were considering this option.

Along with more awareness on the risks associated with such dangerous journeys, there was also an understanding among them that they could approach IOM for support and that they had other options for safe migration. As explained by one of the beneficiaries, *"Migration by the sea is dangerous. I will not put myself and my children in such danger and we will not consider this again. We will wait for the organization to help us."* The overall sense of trust in the IOM among migrants was also referred to by several community leaders and embassy focal points. One of the embassy representatives elaborated on this: *"For long-term impact, the migrants believe that if they fall into some big problem, the IOM and embassy will help them. They are aware that we can help and know they can come to us for help. It is circulated among them, this belief."* Such instances clearly indicate the value of the awareness sessions and other activities that helped migrants to make more informed and safe decisions in the future while also encouraging others in their community to do the same. The embassy representative also added that the project introduced more formal channels to respond to migrants in distress. When earlier migrants would rely on "middlemen" from their communities to contact IOM and other organizations that caused a lot of mismanagement, now the embassy was able to directly intervene to support migrants and coordinate with IOM. Thus, the project contributed towards improving the coordination and management of migration response by working closely with the concerned embassies.

A significant number of migrants and key informants including community leaders and embassy representatives felt that the impact of the project could be sustained. However, when asked to what extent the project contributed towards improving response at the local government or institutional level, some of the key informants were doubtful. Many embassy representatives mentioned the security and political context in Libya has to improve drastically for more concrete and long-term improvement in the overall situation for migrants. One of them noted, *"the local people who provide employment and sponsor migrants are generous to the migrants. But at the same time, there are some miscreants here who cause issues. I think it will take some time for the migrants to get actual benefits from the local community and institutions. I don't know if there are other measures from local institutions."*

IOM's efforts towards improving the capacity of government stakeholders on migration management also played an important role in ensuring sustainability of the project. Despite the lack of tangible policy responses, three of the government officials interviewed acknowledged that they had very little awareness on migration and IOM before attending the training organized by IOM. They were now more aware of the vulnerabilities and rights of migrants, the regional dynamics, the legal framework as well as the humanitarian principles for protection. They believed that this would help them respond

to migrant flows effectively. While two of them reiterated that there were too many migrants in Tripoli that strained existing resources, one of the government officials stated that while there were many negative aspects of migration, there were also positive aspects. He explained, *“Irregular migration is a problem. It creates problems for health and crime-related matters but at the same time many migrants are contributing to the economy and working here. We should focus on this and respond.”*

Similarly, the local council who attended the training expressed his solidarity with migrants who were facing abuse and other hardships in Libya. He believed that IOM’s training was very beneficial and that it should be introduced to Libyan schools and communities to increase awareness among Libyans, which would then contribute to increased acceptance of migrants in the local community. He added, *“I didn’t know about IOM before. These training sessions helped my problem-solving and communication skills when dealing with migrants in my area. I hope migration flows decrease, but there are changes for the better. As members of this community, we must help, protect and provide shelter to migrants with IOM’s help”*. Such attitudes at the local level are extremely important in contributing towards migrant-sensitive responses and social cohesion among migrants and the host community. As indicated by the responses, such trainings have also increased the visibility of IOM and their role in helping government actors in responding to migration better. The project thus encouraged engagement at the local government level in migration management by enhancing understanding of migration as well as in facilitating MRRM activities and migrants’ access to relevant services.

In order to effectively contribute towards social cohesion, and contribute to the project ToC, needs to be more emphasis on community-based dialogues among migrants and the local community. Cultural events constitute an opportunity to showcase the diversity of migrant communities in Libya. On the World Day for Cultural Diversity, migrant groups shared with the audience their cultural heritage through their traditional clothes, handcrafts, and art performances<sup>15</sup>. A local Libyan NGO also participated, representing the Libyan culture and traditions. Additionally, MRRM implemented several community-based initiatives to support organizations (Multakana) and spaces benefiting both Libyans and migrants, such as Sudanese and French schools. On a larger scale, a local development initiative was implemented as part of the intervention, it included the rehabilitation of PHC centres in Tripoli benefiting both Libyans and migrants. However, none of the interviewed beneficiaries engaged in community events or dialogue activities that included Libyans. The embassy representatives also highlighted that there was not much interaction between migrants and Libyans. A couple of migrants felt that their relationship with the Libyan population had improved slightly. As explained by a beneficiary, *“Before, they used to harass migrants but now everything has calmed down. Things are changing for the betterment of migrants in this country. I believe IOM is really helping to do this.”* Another noted, *“The relationship between hosts and migrant communities changed a little for the better. It’s not easy for us to open up to Libyans. They are in charge.”*

Overall, the increase in awareness and knowledge about health and protection issues will continue to serve beneficiaries beyond the project life and encourage them to seek out similar services from IOM or relevant authorities through the referral mechanisms introduced. The VHR programme was beneficial to many migrants who did not have the means to return to their countries of origin. Several beneficiaries interviewed by SREO were registered with IOM to return home and they were thankful for this service. They also noted that IOM had provided financial assistance packages to other VHR beneficiaries who had returned, such as entrepreneurial and livelihoods support as they reintegrate into their communities. This indicates that the VHR programme supported migrants to become self-reliant in their home countries.

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<sup>15</sup> IOM, MRRM Project Update Report, April 2020.

*“I cannot be sure how sustainable the project is as it will depend on the conditions and context in Libya. They are doing the best they can for migrants here. They are giving us hope that one day we will go back to your country and one day we'll be safe. They should continue all activities because they all contribute towards the safety and well-being of migrants. Many migrants are out of money, they don't have food or a proper place to live. They live in fear... Another thing is they are always out of food. They should improve it by enhancing the quantity available. I know there are too many migrants but it is a very difficult situation for us.”*

- A Woman beneficiary

Finally, SREO has concerns about the sustainability of the food kit distribution component of the project. Although the aim of this component was to provide short-term emergency food support, a majority of the beneficiaries complained that they received the food kits very irregularly and that no more food kits were available after enquiring with IOM. Beneficiaries were not informed ahead of time when the distributions would take place or when they would be available next. Such practices could increase dependence on negative coping mechanisms that would put migrants at risk. Beneficiaries should be systematically informed ahead of the frequency and availability of food kits and when the assistance will stop to allow them to plan more efficiently and avoid a lean period. It is noteworthy to mention that IOM has partnered on 19 May 2021 with the World Food Programme (WFP) to improve food security and nutrition for vulnerable communities, including migrants, affected by COVID-19 in Libya. This partnership comes as part of a €20 million programme funded by the European Union “Protecting most vulnerable populations from the COVID-19 pandemic in Libya”. As part of this, IOM and WFP are providing ready-to-eat food assistance to vulnerable migrants living in urban areas, internally displaced persons (IDPs), returnees and host communities who have lost their livelihoods due to COVID-19. This assistance comes at a critical point for many vulnerable migrants who have been impacted by both the increased prices of essential commodities, including food, and limited or loss of income due to the lack of employment opportunities. Since the beginning of 2021, when the Libyan government introduced a new unified exchange rate, migrants’ living conditions have become increasingly challenging as the prices of some imported goods such as vegetable oil and milk has increased by 60 percent. Cost and affordability of food and other core items remain the main obstacle for migrants in Libya, while many of them have poor or borderline food consumption, which is a precondition for a weaker immune system<sup>16</sup>. During the two-year-long project, IOM’s Migrant Resource and Response Mechanism (MRRM) mobile teams will provide emergency food assistance kits, supplied by WFP, to vulnerable migrants in Algatroun, Bani Waleed, Benghazi, Ghat, Sabha, Tripoli and Zwara. Food kits contain essential ready-to-eat items such as canned beans, tuna, and halawa that will last over a month.

Several beneficiaries also spoke about the need for livelihoods support that would reduce their dependence on the food kits. Some referred to financial assistance as a major need while a few requested for skills-building and training sessions. One of the beneficiaries observed, *“I think they're not taking it into consideration here. I think if we have work to do, it will be better instead of just receiving gifts (aids) and being dependent on them. Hence, I can depend on myself when aids stop.”* Despite the emergency response nature of the food distributions, the sustainability is questionable without further livelihoods synergies and cluster support. IOM must consider effective ways to address this concern in collaboration with partners at the local and cluster level while keeping the Libyan labour laws and market context in mind. Historically, Libya has been a key country of destination in North Africa for migrant workers from neighbouring countries, as well as for migrant workers from countries further afield in Western Africa, Western Asia (Middle East), and Southern Asia. Prior to 2011, between 1.35 million and 2.5 million migrant workers were estimated to be employed in the services (health,

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<sup>16</sup> IOM-DTM Libya, Migrant Report 35 (January – February 2021)

domestic work, retail and others), industry (such as construction and light manufacturing), energy (oil production and related services) and agriculture sectors in Libya<sup>17</sup>. Persistent labour deficit linked to the Libyan demographic profile and steady demand for skilled work force since the discovery of oil in Libya resulted in several labour migration trends that continue to date. The Libyan labour market is now shaped by growing unemployment for nationals on one side, and substantial numbers of foreign migrant workers on the other side: a paradoxical situation arising from a combination of skills mismatch, public sector dominance of the labour market and distaste for manual labour among Libyans. Migrants engagement in the Libyan labour market is a vital capability enhancing factor that reduces their vulnerabilities to financial shocks and reduces negative humanitarian consequences.

One in three migrants interviewed by IOM DTM Libya in 2019 and 2020 (33%) reported to have sent remittances to their country of origin from Libya, while a vast majority (83% interviewed during 2020) reported that they intended to send remittances<sup>18</sup>. While remittances build resilience at the individual level, remittances also serve as a risk mitigation and income diversification strategy for migrant households in the country of origin. Throughout 2019-2020 the proportion of migrants sending remittances from Libya and the amounts remitted declined steadily, both due to armed conflict and the socio-economic impact of the COVID-19 pandemic. Migrants face various challenges that prevent them from successfully sending remittances such as lack of secure livelihoods, unstable employment prospects, inadequate earnings for those employed, and difficulties faced in sending remittances due to lack of reliable money transfer services. Migrants are unbanked and lack access to secure and regular financial services. A majority of the remittance sending migrants use informal funds transfer systems (such a hawala) to send remittances from Libya, while others use various other transfer modalities such as mobile money services, financial service providers offering money transfer services, or relying on fellow migrants returning home. A concerted effort towards improving the situation of migrant workers in Libya is needed via regulation of labour market and strengthening of social protection mechanisms available to migrant workers.

### 3.6 Cross-cutting Issues

According to IOM staff, other key staff and beneficiary responses, the project specifically prioritised the needs of women and children. Some of the beneficiaries had received awareness sessions on women's rights including gender-based violence and services available. One of them highlighted the importance of the project for women-headed households and how it helped them support their families' needs. Many of them received reproductive health services, according to IOM staff and beneficiaries. They emphasised that pregnant and lactating women were one of the groups targeted by the health programs. All study participants confirmed that the services were equally accessible to men and women including the elderly and people with disabilities. None of the informants or beneficiaries noted any gender-related barriers to accessing services. Based on internal M&E data and reports submitted by IOM, it remains unclear whether the data was gender-disaggregated.

Community leaders, embassy representatives and IOM staff confirmed that IOM identified the most vulnerable groups through thorough assessments both for people who registered directly for relevant services and through field visits. The mobile clinic was able to provide urgent health services to people with disabilities, the elders and those who lived far from the centre, as confirmed by the community leaders and IOM staff. One community member also noted that for distribution item activities, people with disabilities were given the kits first so they would not have to queue. Overall, the project considered the needs and priorities of different vulnerable groups in its design and implementation. While some of the community leaders and embassy focal points had concerns about the response time from IOM for urgent health and protection cases, they were generally positive about the project's

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<sup>17</sup> IOM, Global Compact for Migration Objectives, Labour Migration Dynamics in Libya (February 2021)

<sup>18</sup> IOM-DTM Libya, Migrant Report 34 (Nov – Dec 2020)

targeting of vulnerable groups including unaccompanied and separated children, victims of trafficking, women-headed households and women. Based on accounts from key informants and beneficiaries, there were women staff members present among the health and protection teams including the mobile clinics to attend to women beneficiaries.

All beneficiaries interviewed by SREO felt safe, comfortable and respected when accessing services under the MRRM project. According to several beneficiaries, IOM staff were “very helpful”, “patient”, “polite”, “cooperative” and “friendly”. This was evidenced by IOM’s monitoring data as well that showed that most beneficiaries were content with IOM staff assistance and professionalism: 95% reported they were “satisfied”, 4.3% were “very satisfied” and 0.7% said they were “not satisfied”. However, SREO noted that a large number of the beneficiaries interviewed were not aware of the feedback and complaints mechanisms available to them. As per the MRRM proposals, a hotline was available to beneficiaries to seek assistance from IOM including for feedback and complaints. IOM staff did not confirm whether there were women staff member assigned to answer the hotline. A few beneficiaries stated that they often received no response when they tried to contact IOM. To ensure accountability to its beneficiaries, IOM should provide information regarding the feedback mechanisms and relevant contact info to beneficiaries benefiting any project activity and ensure that all calls and requests are responded to and dealt with in a timely manner. Finally, it was also noted that not all IOM staff had signed a code of conduct and/or PSEA policy as part of their employment. Among the five staff members interviewed, only the IOM doctor and MPHSS staff had signed a code of conduct and PSEA policies. Only the MHPSS staff mentioned attending training on gender sensitivities and PSEA protocols. While there were no related complaints or concerns raised by beneficiaries and key informants, it is crucial to include PSEA guidelines and relevant training to ensure protection and gender mainstreaming is adhered to throughout the project cycle by all staff members and partners.

#### 4. CONCLUSIONS AND RECOMMENDATIONS

All MRRM activities were highly **Relevant** to the needs of the migrant communities and local context in Tripoli. Tripoli, being the capital and largest urban centre in Libya, hosts the largest number of migrants and refugees, who were particularly vulnerable due to the ongoing instability and recent violence. IOM’s targeted response in Tripoli was critical to meet the growing humanitarian needs of migrants. IOM identified, assessed and addressed the needs of migrants through regular field visits and extensive coordination with the embassies and community leaders representing different migrant groups and their countries of origin. The food and NFI assistance met the urgent food and basic needs of many migrants who were struggling to meet their needs and that of their families. The health and specialised protection services including MHPSS targeted the most vulnerable groups while the VHR service was particularly relevant to many migrants who wished to return to their countries but didn’t have the means to do so. The awareness-raising sessions were also appropriately designed and implemented to educate migrants on the risks of irregular migration and services available to them. Many beneficiaries did not have adequate knowledge on these topics particularly about the available services and alternatives to onward migration like IOM’s VHR Programme. The capacity-building training on migration and migration management for government officials was also relevant to the context as many of the interviewed officials lacked the necessary information to respond to migrants in a sensitive and effective manner before they attended the session. Any intervention targeted towards migrants should engage all actors involved, particularly at the local government level and IOM prioritised this accordingly. Although the community engagement activities aimed at encouraging social cohesion between migrants and the host population, those were not fully implemented as planned. Based on IOM’s reasoning, the implementation of social cohesion activities was limited due to government sensitivity on these issues.



The two projects were largely **Effective** in increasing migrants' access to basic services (health, food, NFIs), specialised medical and protection assistance as well as in changing their perceptions around irregular migration. Many of them benefited from more than one form of assistance and relied on IOM to support them in need. They expressed high levels of satisfaction with most of the services received. While the emergency food kits were distributed as a short-term response, several beneficiaries claimed that they received these kits irregularly and IOM often ran out of food kits when many were in need of it. SREO noted that the accountability measures for the project did not translate well. While IOM conducted daily monitoring activities to assess beneficiary needs, satisfaction and feedback, many beneficiaries were either unaware of the available feedback mechanisms or they noted that IOM didn't respond to their calls. The projects also effectively engaged community leaders and embassies in facilitating access to relevant services for migrants and ensuring the appropriate response. The capacity building component contributed to increased understanding of migration, migration management and IOM's role among local government officials, which will in turn lead to more informed migrant-sensitive response and better coordination between IOM and local officials in the long run. The planned social cohesion activities were not implemented effectively and did not have enough reach to foster any societal change in migrant-host community relations. For such integrated interventions to be truly effective, it must involve the local population in its programming either through community events, regular recreational activities and awareness campaigns. The MRRM projects successfully translated the resources into tangible and quality outputs and outcomes in accordance with the stated plans. Both projects enhanced the migrants' access to basic services and the capacities of government officials to understand migration related issues, including migration governance. The activities were well implemented, thus allowing to reach intended results, although IOM was forced to adapt some awareness sessions due to COVID-19.

While IOM resources and capacities were sufficient to implement this project, SREO identified some **Efficiency** constraints in program implementation, primarily related to the coordination and communication between IOM and partners. Several community leaders and embassy focal points said there were instances when they did not receive a timely response from IOM for urgent medical and protection cases. Liaising with different IOM focal points and internal approvals processes for different departments with IOM often delayed response time when urgent action was required. There is a clear need to harmonize operations and communications between different departments at IOM involved in the MRRM projects. Meetings with stakeholders were not held very regularly either and were done with individual embassies for specific matters. It would be helpful to have more regular meetings with all community leaders and embassy focal points to establish clear processes on program implementation as well as broader efforts to coordinate and manage mixed migration flows. IOM staff noted that there were a few delays in implementation of some activities due to COVID-19 but this did not affect the overall timeline or impact of the projects. A key added value of the MRRM projects was to bring together in one mechanism humanitarian aid, a wide range of services and needs based assistance to migrants living in urban areas as well as vulnerable cases from the host community through the deployment of mobile teams during the conflict and the COVID-19 pandemics.

The **Impact** of each component varied in terms of visibility and continuity with food and NFI distributions meeting basic needs of beneficiaries in the short term, while awareness-raising and capacity-building have improved understanding of irregular and mixed migration substantially, thus encouraging more informed decision-making both by migrants and relevant authorities in the future. Interviewed migrants are now more aware of the risks they could be exposed to when migrating irregularly and know there are safer and legal options as a result of the projects. A positive indirect effect of the awareness-raising component is the spill-over of knowledge to the larger community, including migrant's relatives and friends in the country of origin. This is also valid for the capacity building training, where participants said they passed on the information to their peers and migrants in their locality. Overall, many beneficiaries noted an improvement in their well-being and daily lives

as they felt more hopeful and safer as a result of the different services, particularly the mental health support. The impact of the project on improving migrant-host community relations at the local level remains uncertain as there was limited interaction between them although there were not as many skirmishes as before, as reported by a couple of beneficiaries.

Several aspects of the project and its impact can be considered **Sustainable**. The general increase in awareness and knowledge about health and protection risks and relevant services will continue to serve beneficiaries and encourage them to seek out assistance through IOM, or the referral mechanisms introduced. Beneficiaries were informed about the realities and risks of irregular migration, the impact of which will be sustainable as they consider their options to make more informed and safe decisions in the future. The project institutionalised migrant response mechanisms to some extent by establishing formal partnerships with embassies. Where before several migrant communities relied on informal networks to avail relevant services from IOM or other actors, now embassies will intervene directly and refer cases for VHR, protection and health services to IOM. The capacity-building component plays an important role in improving immediate and long-term institutional response to migrant flows. While there were no tangible policy responses or measures introduced, government officials acknowledged that they had very little knowledge on migration and IOM before attending the training organized by IOM. This will contribute towards social cohesion and more migrant-sensitive measures in the future. As highlighted earlier, IOM should have focused more on the social cohesion and community engagement activities to encourage better relations between host and migrant communities in the long term. Irregular food distributions raise concerns about the sustainability of this component as the lack of information regarding the availability and frequency of the distributions did not allow them to plan ahead. Moreover, there needs to be stronger linkages with the FSL sector to link beneficiaries with livelihoods support to decrease dependence on food kits.

The project was designed and implemented with significant regard to **Cross-cutting issues**, particularly gender mainstreaming. The MRRM intervention targeted many women and children in its health and protection activities. All beneficiaries felt that the services were equally accessible to all and no gender-related barriers were identified. The activities mostly prioritised the needs of vulnerable groups particularly women-headed households, pregnant and lactating women, victims of trafficking, the elderly and people with disabilities. Community leaders, embassy representatives and IOM staff confirmed that IOM identified the most vulnerable groups through thorough assessments both for people who registered directly for relevant services and through field visits. The mobile clinic was able to provide urgent health services to people with disabilities, the elders and those living far from the centre. The protection and health teams included women staff members to assist women beneficiaries, including in the mobile clinic teams. All beneficiaries interviewed felt safe, comfortable and respected when accessing services and were happy with IOM staff behaviour and assistance. However, a significant number of beneficiaries were not aware of the feedback and complaints mechanisms available and many who tried to contact IOM did not receive a response. It should be investigated whether they felt safe using those channels. Barriers to giving feedback need to be identified and addressed. Finally, IOM must ensure all staff members participate in trainings on PSEA and gender sensitivities particularly those engaged directly with the affected communities.

The IOM teams implemented the intervention activities under the two funds and followed a joint-update methodology while monitoring the two projects. The two projects' proposals are almost identical. The activities of the two projects were designed to complement each other. The Dutch-funded project had a host family programme intending to support 70 migrants. There was also an additional activity, which consisted in the production of a short documentary about the risks and realities in Libya regarding legal employment, working conditions, labour law, public conduct, do's and don'ts related to cultural sensitivity, housing, security and safety both at residence and workplace, trafficking and gender issues. The success of this complementing approach is reflected in responses

from project participants and stakeholders expressing high levels of satisfaction with the project activities. Funds were reallocated when needed in order to meet the urgent needs, for instance the remaining funds under the Dutch grant were used to provide more NFI kits to beneficiaries. Given that the projects were mostly identical in design and implementation, it is recommended to have separate M&E mechanisms internally to assess the activities within each fund.

While the services provided within this project contributed to the general ToC, some improvements could still be made in order to achieve the objective of strengthening coordination and management of mixed migration flows in Libya through the provision of enhanced protection and assistance measures and alternatives to onward movement. Based on the above findings, we recommend:

### **Relevance**

- Promote tailored and contextually-nuanced shelter solutions for migrants as part of the project or in coordination with other IOM programmes to mitigate legal and cultural obstacles faced by non-Libyans when seeking safe and dignified housing solutions. Such approach could complement and strengthen the host family placement activity under the Dutch project. Accommodation remains as one of the biggest problems migrants face in Tripoli, due to the high cost of rent. Majority of the interviewed beneficiaries noted staying with many people in order to share the cost of rent, while others said they didn't have permanent accommodation and stayed with their friends and/or neighbours. The SNFI Cluster Libya also highlighted in its guidance note 'Shelter Solution for migrants, refugees and Asylum seekers in Libya' released in June 2021 that there was a clear link between intention to stay / leave and length of time spent in Libya and over-crowding; whereby for those who intend to depart for Europe or have just arrived, predominately live in over-crowded accommodation. The SNFI Cluster Libya recommends assisting populations at risk of eviction with monetary support (cash for rent) or by identifying alternative accommodation solutions (host family's module) to help the target group gain tenancy security and thus facilitate integration into society and improve access to the job market. The members of the target group/ community could also actively participate in the rehabilitation work as unskilled labourers under the technical guidance of the skilled labourers (masons, carpenters, etc..) to have the opportunity to enhance their technical skills. The gained knowledge may result in increasing their opportunities in the job market ensuring an income which might lead to financial independence.

### **Effectiveness**

- Clearly define project activities for community engagement to address social cohesion components. While a few beneficiaries cited improved relations between migrants and the host community, most of the informants and beneficiaries noted there wasn't much interaction between the two groups. In order to effectively contribute towards social cohesion, there needs to be more emphasis on dialogue and community-building among migrants and the local community. None of the beneficiaries interviewed by SREO had attended any community engagement or dialogue initiatives. In addition, governmental entities should be targeted in order to achieve the social cohesion component, since some limitations were due to concerns raised by the government and the COVID-19 pandemic.
- Align dialogue transfer models with intended impacts at individual, relational and structural levels in order to guide MRRM programme design. Four broad dialogue transfer models exist, differentiated by a number of components and focused on the



directionality of change beyond participants. These models include: 1) Bottom up and out transfer – where grassroots leaders expand dialogue effects horizontally to peers and vertically to mid- and high-level leaders; 2) Middle out and down transfer – where mid-level leaders expand dialogue effects to peers and grassroots members of their communities. 3) Middle out and up transfer – where mid-level leaders expand dialogue effects to peers as well as high-level leaders. 4) Top out and down transfer – where high-level leaders expand dialogue effects to other key decision-makers and, through policy and institutional (macro) change, to mid- and grassroots levels. IOM should select the most relevant dialogue transfer model to optimize the impact over migrants and host communities.

- Prioritize the involvement in social cohesion activities of community leaders with strong enthusiasm and dedication to project objectives over others who may have larger reach and experience but less motivation to guarantee the momentum and energy of key actors implementing the project and assuring timely project progress. Enhance the skills and knowledge of key community actors in conflict analysis and resolution, problem-solving, and reconciliation mechanisms enabling them to advance a reconciliation agenda. Such approach would build the capacity and provide local stakeholders with the ability to exert social cohesion in their communities and support the implementation of local reconciliation initiatives. IOM should identify committed interlocutors and stakeholders who represent diverse enough segments of the community that social cohesion initiatives will be more likely to hold. These should be influential figures, tribal leaders, and other community actors. The importance of motivated key community actors is crucial to project success. IOM should identify, at project onset, leaders who have the passion and desire to set aside time for social cohesion. This should be a higher priority selection criteria than the individual's reach and influence in the community. These individuals will be self-driven which is important in projects such as MRRM given that they do not receive material compensation for their participation and efforts. Leaders/groups with enthusiasm can also serve as role models and project champions for other less driven actors.
- Conduct meetings between IOM and partners on a more regular basis to discuss changing needs, challenges and adaptive ways of working together. It was observed that meetings with partners and stakeholders were not held regularly or uniformly. Several embassy representatives, migrant community leaders, NGO representatives, local government officials noted that meetings were held sporadically and agreed that their partnership with IOM would benefit from regular communication and coordination. SREO suggests having joint meetings with each group of stakeholders and individual follow-up sessions with each partner to discuss progress, changes and any challenges.
- Strengthen collaboration with stakeholders, particularly embassies. Collaboration with some embassies was found to be consistent and efficient while it was not for others. This could be handled through joint meetings with different country representatives to address collective response.
- Include the local population in awareness-raising sessions on migration and social inclusion. The planned social cohesion activities were not implemented effectively and did not have enough reach to contribute to any evident changes in migrant-host community relations. For such integrated interventions to be truly effective and contribute towards migrant inclusion and social cohesion, it must involve the local population in its programming either through community events, regular recreational activities and awareness campaigns. IOM should also consider introducing modules on migration in Libya for Libyan students in schools and universities. This would be a way

to ground the projects in local realities, networks, and structures to ensure sustainability.

- Set a more sustained strategy for local partner capacity-building and tailored support to ensure that they are able to appropriately carry out their role as expected and advance a strengthening and upskilling of local CSOs (Multakana, Libyan Red Crescent, etc.). The success of the MRRM projects hinges heavily on an astute selection of local staff, local partners, and key community actors. The M&E plan should measure the capacity-building of key community actors, local partners and project implementors since they play a key role in fostering a space conducive to social cohesion. By developing a monitoring system at the project design phase, IOM could ensure a harmonized game plan to support local partners, invest in lasting partnerships with local organizations for future projects, and have a guarantee of quality project implementation.

### **Efficiency**

- Optimize coordination and referral mechanisms internally and between partners (community leaders/embassies) so as provide timely assistance, especially for urgent medical and protection assistance.
- Prioritise dissemination of information regarding the VHR programme as there were beneficiaries who didn't know about this assistance at all.
- Several migrants who were registered to VHR programme noted that they had no idea why the process was delayed. Irregularity of the kit distributions made it difficult for beneficiaries to plan ahead. The coordination between the VHR team and MRRM team should be improved so migrants receive timely and accurate information.

### **Impact**

- Mobilize the media in a context-appropriate and culturally-sensitive manner to increase the visibility of dialogues between migrants and host communities and broaden project outcomes to a larger audience. IOM could enhance its social media presence via channels such as Instagram and Facebook. Young migrants use the internet and social media to engage with their communities and seek out information about community initiatives (social events, livelihood initiatives, conferences, etc.). This is a great way for the dialogue participants to continuously provide information to the community about the topics discussed, the progress made, address common misconceptions, and highlight success stories when someone's life was impacted by an activity issued from a dialogue. A dedicated WhatsApp number could be established for all dialogues and clearly labelled on IOM materials. Dialogue participants should also be encouraged through materials and advocacy to announce their dialogue experience on social media. This could partially be facilitated by IOM providing photographs of dialogues or initiatives as incentives which would then be shareable online.
- Connect dialogues between migrants and host communities with large visibility, high participation, durable, and tangible initiatives that help improve the local quality of life (sanitation infrastructure, waste management, sport playgrounds, etc.) to help materialize spaces of interaction and collaboration created abstractly through dialogues. Some evaluation participants mentioned wanting to collaborate with others across dividing lines by rehabilitating their communities on multiple aspects. This could bring different groups together while addressing a common challenge and finding common grounds for discussion.

- Partner with Al Bayan centre for women and children to expand the provision of MHPSS services in Tripoli. Al Bayan centre is already collaborating with UNDP and IMC to support GBV survivors through individual and group sessions. The organization contributed last year to the 16 days awareness-raising campaign targeting internally displaced persons (IDPs), returnees, migrants and people in detention and the other vulnerable groups.
- Liaise with AICS, UNDP and UNICEF in the framework of their “Baladiyati” (“My Municipality”) programme. The EU’s Baladiyati “Recovery, Stability and Socio-economic Development Programme” (50 million euros) is the largest programme ever financed by the European Union in direct support of Libyan municipalities and of some of the most vulnerable communities in the country. It currently works with 27 municipalities across Libya with the aim to improve people’s access to quality public services, such as education, health, water and sanitation. The programme also aims at improving living conditions and building resilience among vulnerable populations, including host communities and migrants, refugees, returnees and internally displaced people (IDPs). The “Recovery, Stability and Socio-economic Development in Libya” programme is financed by the European Union through the EU Emergency Trust Fund for Africa (EUTF), and is implemented by the Italian Agency for Development Cooperation (AICS), UNDP and UNICEF. In June 2021, communication experts of 27 municipalities came together in a three-day seminar on strategic communications. The event aimed at strengthening communication between local administrations and the communities, and improve access to information on key public services.

### ***Sustainability***

- Support migrants who are already in Libya with trainings on technical skills needed in the Libyan labour market, in specific for jobs that closely match their profile, to improve their prospects of sending remittances resulting in reduced vulnerabilities. This can be done through setting up economic hubs, where migrant workers could have access to a variety of services such as health, legal support, employment opportunities as well as skills enhancement trainings. There is a potential to target the agriculture, local manufacture and construction sectors as potential sources for further employment opportunities for the migrant population. Migrants engagement in the Libyan labour market is a vital capability enhancing factor that reduces their vulnerabilities to financial shocks and reduces negative humanitarian consequences.
- In collaboration with relevant government counterparts and respective embassies, regular labour mobility programming is recommended to promote migration of skilled workers to Libya as per the Libyan labour market demand for skills via targeted information campaigns in the country of origin.
- Most migrants are unbanked and face a lack of access to reliable money transfer services. Programming and policies aimed at improving migrants’ access to safe and reliable money transfer services are recommended. At national level, the Libyan economic sector reform should be supported via advocacy aimed at ensuring that migrant perspectives are incorporated in the improvements planned for the Libyan banking sector. Migrants in Libya constitute a significant proportion of the population as well as the labour market, and as migrant workers are expected to continue to contribute to the Libyan economy, therefore reforms in the banking and financial services sector should consider structural improvements that facilitate their inclusion into the formal economy. The unbanked migrant population represents a significant market segment that will not only benefit from accessing legal and equitable financial

services but is also an untapped source of revenue for the financial service providers and banks in Libya.

### ***Cross Cutting Issues***

- Improve accountability measures by increasing capacity to attend to the hotline number in addition to informing all beneficiaries about the available feedback and complaints mechanisms. A large number of the beneficiaries interviewed by SREO were unaware of the feedback and complaints mechanisms available to them. It should be investigated whether they felt safe using those channels. Barriers to giving feedback need to be identified and addressed. Formal feedback can be sought through specific assessments (using group discussions or interviews), post distribution monitoring or questionnaires. Informal feedback received in the course of daily interaction should also be valued and used to develop trust and improve programs on an ongoing basis. People may fear that critical feedback will lead to a loss of assistance or have negative repercussions. It is important for IOM to explore different methods of providing informal and formal feedback.
- Conduct regular follow-up calls/visits with beneficiaries who received relevant services through referrals to ensure their needs were met: Three women beneficiaries interviewed mentioned that when they were consulted by IOM regarding childbirth, they were told that IOM would reimburse their hospital fees, however they reported being unable to get a response from IOM when they contacted them. There were also cases reported by beneficiaries in which they were registered for an assistance, referred either internally or externally to other services, and they were waiting to receive the assistance without hearing back from IOM.

### ***Monitoring and Evaluation***

- Introduce separate M&E mechanisms for the two funds to allow for independent monitoring and assessment of the performance and progress of each project. In order to provide a thorough comparison of the implementation approaches and achievements of the two projects, separate M&E mechanisms would be beneficial.
- Design a stronger project framework with a layered Theory of Change and SMART indicators to help better measure project impact and change, and structure project progress effectively. The current project indicators are vague which ensure project flexibility to a certain degree but cannot appropriately capture project impact as well as demonstrate project progress. Measures and data should be collected at baseline so that endline data collected in an external final evaluation can be compared to see evolution and change attributable to the project in time. SMART indicators help pace project implementors. It sets goals, expectations, and milestones that can help keep IOM and its partners on track and timebound. It also allows project implementors to appropriately communicate to other stakeholders their expectations around project outcomes and objectives. Setting SMART indicators helps ground project activities in a specific context and timeline and forces these activities or outputs to be outcomes-, objective-, and impact-oriented.

## ANNEXES

### Annex I. Bibliography

IOM DTM, Libya's Migrant Report: Round 35, January - February 2021 (April 2021).

IOM, Interim Report, September 2020.

IOM Publications, Migrants caught in crisis, 2011.

IOM, MRRM Project Update, April 2020.

IOM, MRRM Project Update, December 2020.

UNOCHA Libya, Humanitarian Needs Overview, January 2021.

UNOCHA Libya, March Humanitarian Bulletin, April 2021.

SNFI Cluster Libya, Shelter solution for Migrants, Refugees and Asylum seekers in Libya Guidance Note, June 2021.

## Annex II. Desk Review Documents

**Table 3:** Documents SREO requested from IOM during Inception Phase

Document Requested	Name of the document provided by IOM:
Copy of project documents (proposal, logical framework, theory of change, progress reports, programmatic changes) related to the two MRRM interventions.	<p>IOM Interim Report to State Secretariat for Migration, Federal Department of Justice and Police, Swiss Confederation, June 2020.</p> <p>IOM Libya MRRM Tripoli Final Proposal for Netherlands-Funded Project</p> <p>IOM Libya MRRM Tripoli Final Proposal for Swiss-Funded Project</p> <p>IOM MRRM Joint Donor Updates of February 2020, April 2020, June 2020, October 2020, December 2020.</p> <p>IOM No Cost Extension of the project “Promoting Rights-Based Solutions for Vulnerable Migrants through a Migrant Resource and Response Mechanism (MRRM) in Tripoli, Libya” Letter to The Swiss Confederation</p> <p>IOM No Cost Extension of the project “Promoting Rights-Based Solutions for Vulnerable Migrants through a Migrant Resource and Response Mechanism (MRRM) in Tripoli, Libya” Letter to the Department for Stability &amp; Humanitarian Aid / Programme Delivery Unit of Ministry of Foreign Affairs of the Kingdom of Netherlands</p> <p>IOM Signed Funding Agreement between the Netherlands Minister for Foreign Trade and Development Cooperation and IOM</p> <p>IOM Signed Funding Agreement between The Swiss Confederation and IOM</p> <p>IOM documentary cut 1 (video)</p>
Documents outlining the selection criteria and selection process for MRRM intervention beneficiaries	Rapid assessment form
Beneficiary satisfaction surveys for both projects	M&E 28-3-2021 Beneficiary Survey Data Excel Sheet
Details of Migration Governance capacity-building for government officials and others (training curriculum, attendance register etc.)	<p>IOM Certificate in Migration Governance Training Agenda</p> <p>IOM Certificate in Migration Governance Training Participants List</p>



	<p>IOM Certificate in Migration Governance Training Pre and Post Evaluations</p> <p>IOM Certificate in Migration Governance Training Report, March 2021.</p>
<p>Baseline assessment and mid-term evaluation (including data collection tools used for both exercises), programme monitoring framework, updated indicator tracking table (ITT)</p>	<p>IOM Final M&amp;E Report MRRM Dutch and Swiss, March 2021.</p> <p>IOM Interim Report to State Secretariat for Migration, Federal Department of Justice and Police, Swiss Confederation, June 2020.</p> <p>IOM MRRM Joint Donor Updates of February 2020, April 2020, June 2020, October 2020, December 2020.</p>
<p>MRRM Programmes Standard Operating Procedures for the Voluntary Humanitarian Return (VHR) programme</p>	<p>Emails between VHR programme and MRRM unit about the coordination and referral mechanism</p>
<p>MRRM Programmes Protection Mainstreaming, Child Safeguarding and PSEA policies</p>	<p>This was not provided.</p>
<p>Communication and accountability protocols (e.g. feedback and complaints mechanism)</p>	<p>IOM Libya MRRM Tripoli Final Proposal for Netherlands-Funded Project</p> <p>IOM Libya MRRM Tripoli Final Proposal for Swiss-Funded Project</p> <p>Hotline IOM Tripoli Brochure</p>
<p>Any documents concerning how the COVID-19 crisis has affected MRRM programme activities and what COVID-19 mitigation strategies have been taken into consideration during programming</p>	<p>IOM MRRM Joint Donor Updates of February 2020, April 2020, June 2020, October 2020, December 2020.</p>
<p>Relevant cluster guidelines for Health/Protection/NFI that informed the programme design</p>	<p>NFI Guidance Note</p>
<p>Exit strategy/ linkages with long term programs</p>	<p>This was not provided.</p>
<p>Details of needs assessment (e.g. the process, findings) justifying the provision of basic health care through mobile teams and medical referrals</p>	<p>Libya Health Sector: Health Severity Score 2021</p> <p>Health Cluster Libya Health Severity Scale HPC 2021</p> <p>Health Severity Ranking</p>





	Health Sector HNO 2021 2021 HRP Health Sector Severity and PIN
Details of how mobile teams were monitored, and any relevant documents/templates used (e.g. examples of site visit/progress reports, monitoring reports, etc.)	IOM MRRM Joint Donor Updates of February 2020, April 2020, June 2020, October 2020, December 2020. Weekly outreach plan.
Medical referrals services map and referral database/tracker	This was not provided.
Details of rapid assessment, beneficiary identification, and vulnerability analysis for NFI distributions	Rapid Assessment Form
Tender documents and contracts for selection of NFI kits/Hygiene Kits/Emergency food assistance suppliers	NFI LTA Documents
Post-distribution monitoring reports for the provision of NFI kits, hygiene kits, emergency food kits	&E 28-3-2021 Beneficiary Survey Data Excel Sheet IOM Final M&E Report MRRM Dutch and Swiss, March 2021.
Details of how distributions were monitored, and any relevant documents/templates used (e.g. examples of site visit/progress reports, payment certificates, etc.)	IOM MRRM Joint Donor Updates of February 2020, April 2020, June 2020, October 2020, December 2020.
Details of protection services available	IOM Libya MRRM Tripoli Final Proposal for Netherlands-Funded Project IOM Libya MRRM Tripoli Final Proposal for Swiss-Funded Project
Brochures/Flyers/Materials used in awareness raising sessions, attendance lists if available.	Hotline IOM Tripoli Brochure Audio_Visual_Consent_Form_EN
Capacity building materials used, attendance lists, pre-post test results, if available.	IOM Certificate in Migration Governance Training Agenda IOM Certificate in Migration Governance Training Participants List IOM Certificate in Migration Governance Training Pre and Post Evaluations



	IOM Certificate in Migration Governance Training Report, March 2021.
Voluntary Humanitarian Return (VHR) programme registration lists	VHR Referral Registration Template MRRM Referrals Sheet
Details of how protection services were monitored, and any relevant documents/templates used (e.g. examples of site visit/progress reports, monitoring reports, etc.)	IOM MRRM Joint Donor Updates of February 2020, April 2020, June 2020, October 2020, December 2020.

## Annex III. Evaluation Matrix

**Table 4: Evaluation Matrix**

Criteria	Questions	Sources of Data	Analysis Methods
Relevance	<p><b>Extent to which the intervention objectives and design respond to beneficiaries and continue to do so if circumstances change.</b></p>	<ul style="list-style-type: none"> <li>● Desk Review of Project documents (logframes, proposals, Humanitarian Needs Overview, IOM Strategy Documents/Guidelines/Frameworks, IOM beneficiary survey data)</li> <li>● Key Informant Interviews with govt. counterparts, IOM staff, partner staff Migrant community leaders, host community leaders</li> <li>● Semi-structured Interviews with beneficiaries</li> <li>● Visual verification</li> </ul>	<p>Content Analysis</p> <p>Contribution Analysis</p> <p>Cross-comparative analysis</p>
	<ul style="list-style-type: none"> <li>● Do the intended results align with and support government officials building of capacities?</li> <li>● Has the project responded to the needs of the target beneficiaries, especially of migrants?</li> <li>● Has the project targeted beneficiaries – especially migrants - in the most effective way, provided what they needed most?</li> <li>● Is the project aligned with and supportive of IOM national, regional and/or global strategies and the Migration Governance Framework? Are there any identifiable ways that the approach should be revised in future, or is it evident that additional or complementary activities or projects will need to be implemented?</li> <li>● Is the project well designed according to IOM project development guidelines in a way that address local priority needs?</li> </ul>		

<b>Effectiveness</b>	<b>Extent to which the intervention achieved or is expected to achieve its objectives, and its results, including and differential results across groups.</b>	<ul style="list-style-type: none"> <li>● Desk Review of Project documents (results framework, donor reports)</li> <li>● Key Informant Interviews with, IOM staff</li> <li>● Semi-structured Interviews with beneficiaries</li> </ul>	<p>Content Analysis</p> <p>Cross-comparative analysis</p> <p>Contribution Analysis</p>
	<ul style="list-style-type: none"> <li>● To what extent has the project successfully translated the resources (inputs) into tangible and quality outputs and outcomes in accordance with the stated plans?</li> <li>● To what extent has the project and its outputs enhanced the migrants access to basic services and the capacities of Government officials and actors involved on understanding of migration related issues including migration governance?</li> <li>● Were the activities sufficiently well implemented to reach intended results? Would other activities have been more effective in reaching the results?</li> <li>● To what extent has the project and its outputs met stakeholder expectations, both government and participants?</li> <li>● To what extent has the project adapted to changing external conditions in order to ensure project outcomes are achieved?</li> <li>● What were the major external factors influencing the achievement of the project's expected outputs and outcomes, including both contextual factors and other related interventions?</li> </ul>		
<b>Efficiency</b>	<b>Extent to which the intervention delivers, or is likely to deliver, results in an economic and timely way.</b>	<ul style="list-style-type: none"> <li>● Desk Review of Project planning documents</li> </ul>	Content Analysis

	<ul style="list-style-type: none"> <li>● To what extent were resources (time, funds, expertise) used wisely and adequately to address the most compelling priorities and achieve the outputs? Is the cost worth it?</li> <li>● Is the MRRM internal coordination done in the most efficient way, to ensure maximization of resources and timely implementation?</li> <li>● How does this project align with and complement other related initiatives, whether implemented by IOM, the government, or other national and international actors? What is the added value, if any, of this project compared to those other efforts?</li> <li>● Were the project activities undertaken as scheduled and were outputs delivered on time and in expected quantity? If not, what was the reasons?</li> </ul>	<p>(narrative and financial)</p> <ul style="list-style-type: none"> <li>● Key Informant Interviews with govt. counterparts, IOM staff and partner staff</li> </ul>	<p>Cross-comparative analysis</p> <p>Contribution Analysis</p>
<p><b>Impact</b></p>	<p><b>Extent to which the intervention has generated or is expected to generate significant positive or negative, intended or unintended, higher-level effects.</b></p>	<ul style="list-style-type: none"> <li>● Key Informant Interviews with govt. counterparts, IOM staff, partner staff, Migrant community leaders, host community members</li> <li>● Semi-structured Interviews with beneficiaries</li> </ul>	<p>Content Analysis</p> <p>Cross-comparative analysis</p> <p>Contribution Analysis</p>
	<ul style="list-style-type: none"> <li>● What long-term changes (whether intended or unintended, positive or negative) can be observed, if any? To what extent can they be attributed to the project interventions?</li> <li>● What long term impact the MRRM approach has on coordination and management of mixed migration flows in Libya?</li> <li>● Does the MRRM intervention respect a conflict sensitivity approach?</li> </ul>		

<b>Sustainability</b>	<b>Extent to which the net benefits of the intervention continue or are likely to continue.</b>	<ul style="list-style-type: none"> <li>Key Informant Interviews with IOM team, (local) govt authorities, community leaders etc.</li> </ul>	Content Analysis  Cross-comparative Analysis  Contribution Analysis
	<ul style="list-style-type: none"> <li>To what extent were the project and its results supported by local institutions and embedded in institutional structures that are surviving beyond the life of the project?</li> <li>What if any, migration management/referral mechanisms put in place by the project that show signs of resilience to continue after the project has ended?</li> </ul>		
<b>Cross-cutting Issues</b>	<b>Extent to which the intervention(s) integrated issues like gender, protection mainstreaming, durable solutions, accountability to the affected population and Complaint Response Mechanism, protection mainstreaming, human rights etc.</b>	<ul style="list-style-type: none"> <li>Desk Review of Project Documents (activity description, results framework etc)</li> <li>KIIs with IOM staff, partner staff, migrant community leaders, govt officials etc.</li> <li>Semi-structured Interviews with beneficiaries</li> </ul>	Content Analysis  Contribution Analysis  Cross-comparative Analysis
	<ul style="list-style-type: none"> <li>To what extent were gender mainstreaming issues considered in design and implementation?</li> <li>To what extent were differences, needs, roles and priorities of women, men and specific vulnerable groups considered during planning and implementation?</li> <li>Were any barriers to equal gender participation identified in design or implementation, and was anything done to address these barriers?</li> <li>To what extent did rights and dignity of beneficiaries uphold by project and its partners throughout the implementation?</li> <li>To what extent was the complaints and feedback mechanism accessible to all groups confidentially?</li> <li>To what extent were the complaints and feedback of stakeholders and</li> </ul>		



	<p>beneficiaries taken into consideration during the project implementation?</p> <ul style="list-style-type: none"><li>● To what extent did the projects incorporate protection principles such as safety and dignity, no discrimination, and accountability?</li></ul>		
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## Annex IV. Two-Page Evaluation Brief

### External Evaluation of “Promoting Rights-Based Solutions for Vulnerable Migrants through a Migrant Resource and Response Mechanism” (MRRM) Programmes

Prepared for: IOM Libya

Prepared by: SREO Consulting Ltd.

#### Background

IOM coordinated two MRRM programmes in Tripoli, funded by the Government of Switzerland and the Government of Netherlands; implementing activities across protection, NFI, Hygiene, Food Security, Health, MHPSS sectors in addition to assistance on Voluntary Humanitarian Return (VHR) programmes and awareness-raising sessions on risks of irregular migration, available services and alternative solutions. The two projects were designed to complement each other. The Dutch-funded project had an additional host family programme intending to support 70 migrants along with a production of a short documentary on the risks and realities in Libya. The evaluation took a mixed methods approach involving desk review, 40 semi-structured interviews with beneficiaries and 25 key informant interviews with implementers and stakeholders underpinned by a Qualitative Impact Assessment Protocol (QuiP) approach. The evaluation assessed the performance of the project against the OECD-DAC criteria of relevance, effectiveness, coherence, efficiency, impact and sustainability. The evaluation also assessed the extent to which the project integrated cross-cutting issues in addition to delving into the project’s overall logic and implementation processes to meet its objectives.

#### Key Findings

Overall, the projects increased migrants’ protection by consulting them upon registration and referring them to IOM-provided services or external services provided by other humanitarian actors available in Tripoli. The migrants’ awareness about the risks of irregular migration, health risks, available services and alternative solutions increased through awareness raising sessions, brochures and videos provided on this topic. Most beneficiaries and informants noted a lack of interaction between local communities and migrants, thus highlighting the difficulty for MRRM intervention to tangibly improve social cohesion.

The activities addressing different sectors such as Health, Protection and NFIs, showed strong relevance to the local context. With limited healthcare services in Tripoli, IOM’s provision of health teams integrated in the MRRM mobile teams, consultation, free medication, and referral to hospitals addressed the urgent healthcare needs among communities. The protection interventions helped beneficiaries cope with the difficult circumstances they faced, and they were particularly appreciated by women beneficiaries. The projects aligned with The Migration Governance Framework, with IOM national and regional strategies, and with IOM project development guidelines in a way that addressed local priority needs. Despite the emergency response nature of the food distributions, the sustainability is questionable without further livelihoods synergies and cluster support. IOM must consider effective ways to address this concern in collaboration with partners at the local and cluster

level while keeping the Libyan labour laws and market context in mind. The intended results of both projects also aligned with and supported government officials building of capacities through trainings enhancing their understanding of migration related issues including migration governance.

The provision of food, as well as NFIs and hygiene kits were well-received by beneficiaries with many claiming they would not have been able to afford it on their own. There were concerns about the food distribution being irregular and unable to meet recurring needs but it addressed their urgent needs. MRRM teams established partnerships with embassies, local government actors, community leaders and other humanitarian actors in Tripoli which were mostly effective in setting up processes to identify, assess and respond to migrant needs. Four community leaders expressed it was sometimes challenging to coordinate and communicate with different IOM departments, that led to delays in responding to urgent medical and protection cases.. While it was noted that collaboration with leaders from some communities was high, others reported that it could be improved. A successful referral mechanism was set up by IOM teams to ensure that migrants are able to reach and access MRRM services. While migrants' access to basic services increased during the project, some services were not very well-known among beneficiaries (e.g. Voluntary Humanitarian Return programme). A large number of the beneficiaries interviewed were also not aware of the feedback and complaints mechanisms available to them.

Finally, several aspects of the project have a long-term impact. The transfer of knowledge to relevant local authorities is improving their technical capacity to effectively respond to migration flows, human trafficking and smuggling of migrants. Many beneficiaries reported that the project instilled a sense of hope in them and changed their attitudes towards irregular migration. They also went on to inform their family members and friends about these issues, thus contributing towards more informed and safer decision-making in the larger community. While most stakeholders stated that IOM was doing its best to improve the conditions for migrants for the long term, some were doubtful if the impact would be sustained without improvement in the security and political situation. Although few (n=5/40) beneficiaries reported improved relations between migrants and the host community, the rest of them noted there wasn't much interaction between the two groups. In order to effectively contribute towards social cohesion, there needs to be more emphasis on community-based dialogues. Nevertheless, the project design followed a conflict sensitivity approach, especially with regard to social cohesion, capacity building and awareness raising.

The design and implementation of ongoing and future programming can benefit from the lessons and recommendations in this report, including but not limited to:

### ***Relevance***

- Promote tailored and contextually-nuanced shelter solutions for migrants as part of the project or in coordination with other IOM programmes to mitigate legal and cultural obstacles faced by non-Libyans when seeking safe and dignified housing solutions. Such approach could complement and strengthen the host family placement activity under the Dutch project.

### ***Effectiveness***

- Align dialogue transfer models with intended impacts at individual, relational and structural levels in order to guide MRRM programme design.
- Prioritize the involvement in social cohesion activities of community leaders with strong enthusiasm and dedication to project objectives over others who may have larger reach and experience but less motivation to guarantee the momentum and energy of key actors implementing the project and assuring timely project progress.
- Conduct meetings between IOM and partners on a more regular basis to discuss changing needs, challenges and adaptive ways of working together.
- Include the local population in awareness-raising sessions on migration and social inclusion.
- Set a more sustained strategy for local partner capacity-building and tailored support to ensure that they are able to appropriately carry out their role as expected and advance strengthening and upskilling of local CSOs (Multakana, Libyan Red Crescent, etc.).

### ***Efficiency***

- Optimize coordination and referral mechanisms internally and between partners so as provide timely assistance, especially for urgent medical and protection assistance.
- Prioritize dissemination of information regarding the VHR programme and improve coordination between VHR team and MRRM team so migrants receive timely and accurate information.

### ***Impact***

- Mobilize the media in a context-appropriate and culturally-sensitive manner to increase the visibility of dialogues between migrants and host communities.
- Connect dialogues between migrants and host communities with large visibility, high participation and tangible initiatives that help improve the local quality of life (sanitation infrastructure, waste management, sport playgrounds, etc.) to help materialize spaces of interaction and collaboration.
- Partner with Al Bayan centre for women and children to expand the provision of MHPSS services in Tripoli. Al Bayan centre is already collaborating with UNDP and IMC to support GBV survivors through individual and group sessions.
- Liaise with AICS, UNDP and UNICEF in the framework of their “Baladiyati” (“My Municipality”) programme.

### ***Sustainability***

- Support migrants with trainings on technical skills needed in the Libyan labour market to improve their prospects of sending remittances resulting in reduced vulnerabilities.
- Pilot regular labour mobility programming in collaboration with relevant government counterparts and respective embassies to promote migration of skilled workers to Libya as per the Libyan labour market demand for skills via targeted information campaigns in the country of origin.
- Advocate at national level for reforms in the banking and financial services sector aimed at improving migrants’ access to safe and reliable money transfer services and at facilitating their inclusion into the formal economy.

### ***Cross Cutting Issues***

- Improve accountability measures by increasing capacity to attend to the hotline number in addition to informing all beneficiaries about the available feedback and complaints mechanisms.
- Conduct regular follow-up calls/visits with beneficiaries who received relevant services through referrals to ensure their needs were met.

### ***Monitoring and Evaluation***

- Introduce separate M&E mechanisms for the two funds to allow for independent monitoring and assessment of the performance and progress of each project.
- Design a stronger project framework with a layered Theory of Change and SMART indicators to help better measure project impact and change, and structure project progress effectively.