Research Terms of Reference

Azzawya Area-Based Assessment LBY1803

December 2018

REACH Informing more effective humanitarian action

1. Executive Summary

Country of intervention	Libya					
Type of Emergency	Natural disaster	Х	Conflict			
Type of Crisis	Sudden onset		Slow onset X Protracted			
Mandating Body/ Agency	OFDA/USAID					
Project Code	14iAGX					
Research Timeframe	1. Start collect data: 16/12/2018		4. Data sent for validation: 01/03/2019			
Add planned deadlines (for	2. Data collected: 31/01/2019		5. Outputs sent for validation: 30/03/2019			
first cycle if more than 1)	3. Data analysed: 01/03/2019		6. Outputs published: 20/04/2019			
Number of assessments	X Single assessment (one cycle)		□ Multi assessment (more than one cycle)			
Humanitarian milestones	Milestone		Deadline			
Specify what will the assessment inform and when e.g. The shelter cluster will use this data to draft its Revised Flash Appeal;	Donor plan/strategy		//			
	□ Inter-cluster plan/strategy		//			
	Cluster plan/strategy					
	□ NGO platform plan/strategy					
	X Other (Specify):		HNO (deadline 1 September 2019) NGOs plans working in Azzawya (no deadline)			
Audience Type &	Audience type	Dissemination				
Dissemination Specify who will the assessment inform	X Strategic		X General Product Mailing (e.g. mail to NGC consortium; HCT participants; Donors)			
and how you will disseminate to inform the audience	X Programmatic X Operational □ [Other, Specify]		X Cluster Mailing (Education, Shelter and WASH) and presentation of findings at next cluster meeting			
			X Presentation of findings (e.g. at HCT meeting; Cluster meeting)			
			X Website Dissemination (Relief Web & REACH Resource Centre)			
			□ [Other, Specify]			
Detailed dissemination plan required	□ Yes		X No			
General Objective	This area-based assessment (ABA) aii	ms to provide an in-depth and comprehensive			
	5		al population's ability to meet basic needs using of education, healthcare, markets and external			

	and planning of local government actors in Azzawya city.
Specific Objective(s)	Based on a review of secondary data, this assessment will focus on Libyans an migrants' access to markets and services, with regards to: education, healthcare markets, and external aid. The levels of analysis will be the following: (1) the city of Azzawya and (2) smaller data collection units (DCU) ² within the city. As for migrants only urban migrants living outside of detention centers will be assessed.
	 Availability of services by Data Collection Unit (DCU) Identify perceived neighborhood boundaries within the city of Azzawya. Identify the stakeholders responsible for service provision for each DCU. Map operational services (schools, health centers, markets, bakeries external aid assistance).
	 Local vulnerabilities assessment (accessibility & acceptability), by DCU and withi the city of Azzawya Assess Libyans and migrants' perceived quality of basic services. Identify what are the barriers faced by Libyans and migrants in accessing basi services.
	 Local capacities assessment (resilience) by DCU and within Azzawya city 3.1 Identify coping mechanisms to a lack of access to basic services.
	1. Define and profile the geographic area selected for the assessment
	 1.1 Identify and map perceived neighborhood boundaries within the city of Azzawya. 1.2. Identify and map demographic profile of the population within the DCU.
	 Identify and map the availability and accessibility of basic services³ highlighting ke gaps and barriers to service provision
	2.1. Map operational services (schools, health centers, markets, bakeries) by DCL
	2.2. Identify what are the barriers faced by service providers regarding servic delivery (city and DCU levels).
	 Understand the perceptions and expectations of Libyans and migrants regardin delivery of basic services 3.1. Assess Libyans and migrants' perceptions of existing basic services. 3.2 Identify what are the barriers faced by Libyans and migrants in accessing basis services.
	 Assess Libyans and migrants' coping capacities and strategies to lack of access to basic services Identify coping mechanisms used to compensate for a lack of access to basis services.
Research Questions	Main research question:
	What is the micro-level impact of the Libyan crisis on Libyans and migrants' access t services in the city of Azzawya? To what extent does access to education, healthcare markets, and external aid differ for Libyans and migrants?

¹ To this end, the assessment will combine three main components including a mapping of neighborhood boundaries and of existing services, a survey on the primary obstacles for both Libyans and migrants to meet their basic needs, and a third component related to their coping mechanisms.

² Data collection unit refers to a group of neighborhoods delineated by residents in Azzawya during the Phase 1 of the data collection.

³ In this document, "basic services" refers to the services identified during the secondary data review as the highest priorities in Azzawya, namely education, healthcare, markets, and external aid.

	To respond to this research question, this assessment will consist of four sub-researc					
	questions:					
	 What are the neighborhood and DCU boundaries and how are residents groupe within each? 					
	1.1 What are the current perceived neighborhoods within the city of Azzawya What are their boundaries? What are the larger regions of the city into which the can be grouped?1.2. What is the demographic profile of the population within each neighborhoo and DCU?					
	2. To what extent are basic services functional and accessible for residents?					
	2.1. Where are operational services (schools, health centers, markets, bakeries external aid) by DCU?					
	2.2. What are the primary obstacles to delivering services, from the perspective of service providers?					
	 3. What are the perceptions and expectations of Libyans and migrants regarding delivery of basic services? 3.1. How adequate and acceptable are existing basic services? 3.2. What are the primary obstacles to accessing services?, 					
	 4. To what extent do Libyans and migrants develop coping capacities and strategie to compensate for lack of access to basic services 4.1 How do Libyans and migrants cope with a lack of access to services? 					
Geographic Coverage	Azzawya (city level) and data collection units (DCUs) within the city of Azzawy (number of DCUs to be confirmed after phase one of data collection.)					
Secondary data sources	 Market Assessments (REACH) MSNA 2018 (REACH) IOM-DTM Round 21 (July-August 2018) REACH/UNICEF, Solitary Journeys of unaccompanied and separate 					
	 children in Libya: forthcoming. Micallef M., Trends in human trafficking and smuggling in post-revolutio Libya, The Global Initiative Against Transnational Crime, 2017. 					
	 Al Araby A., Local specificities of migration in Libya : challenges and solutions 					
	European University Institute, 2018.					
Population(s)	IDPs in camp IDPs in informal sites					
Select all that apply	IDPs in host communities X IDPs					
	□ Refugees in camp □ Refugees in informal sites					
	Refugees in host communities X Migrants					
	X Non displaced X Returnees					
Stratification	□ Geographical #: DCU (exact X Group #: 3 Regions X Gender #: 2					
Select type(s) and enter	number to be defined) of origin (migrants): Population size					
number of stata	Population size per strata is Middle East and per strata is					
	known? Yes X No North Africa, West known?					
	Africa and East					

		Population size per strata is known? □ Yes X No			
Data collection tool(s)	X Structured (Quantitative)	X Semi-structured (Qualitative)			
	Sampling method	Data collection method			
Semi-structured data collection tool (s) Phase 1: MFGDs	X PurposiveX Snowballing□ [Other, Specify]	 Key informant interview (Target #): Individual interview (Target #): X Focus group discussion (Target #): 1 [Other, Specify] (Target #): 			
Semi-structured data collection tool (s) # 1 Phase 2: MFGDs	X PurposiveX Snowballing□ [Other, Specify]	 Key informant interview (Target #): Individual interview (Target #): X Focus group discussion (Target #): 4 per DCU [Other, Specify] (Target #): 			
Semi-structured data collection tool (s) Phase 2: individual interviews with migrants	X Purposive X Snowballing □ [Other, Specify]	 Key informant interview (Target #): X Individual interview (Target #): 30 (city-level) Focus group discussion (Target #): [Other, Specify] (Target #): 			
Semi-structured data collection tool (s) Phase 3: interview guide for Libyan service providers	X Purposive X Snowballing □ [Other, Specify]	 X Key informant interview (Target #): 56 at city-level: 13 education KIIs (3 city-wide administrators + 10 headmasters or teachers that work in different schools throughout the city); 13 healthcare KIIs (3 city-wide administrators, 10 medical professionals working in different health facilities throughout the city); 10 bakeries KIIs; 10 market KIIs; 10 external aid KIIs (administrators or staff from local NGOs, international agencies, or local councils in charge of distributions). Individual interview (Target #): Focus group discussion (Target #): [Other, Specify] (Target #): 			
Semi-structured data collection tool (s) Phase 3: interview guide for migrant key informant	X Purposive X Snowballing □ [Other, Specify]	X Key informant interview (Target #): 3 per DCU 3 KIIs with migrant per DCU will be conducted where it is possible to do so (i.e. DCUs estimated to have large localised concentrations of			

		migrants, and where the security conditions					
			permit gatherings of migrants to take place).				
				Individual interview	(Targ	et #):	
				Focus group discuss	ion (1	Farget #):	
				□ [Other, Specify] (Targ	et #):		
Target level of precision if probability sampling		_% level of confidence		+/- % margin of error			
Data management platform(s)	Х	IMPACT					
		[Other, Specify]					
Expected output type(s)	d output type(s) X Situation overview #: 1 SO (city level)			Report #:		Profile #:	
	Х	Presentation (Preliminary findings) #: 1		Presentation (Final) #:	Х	Factsheet #: 1 per DCU	
		Interactive dashboard #:_	Х	Webmap #: 1	Х	Map #: As needed	
		[Other, Specify] #:					
Access	X Public (available on REACH resource center and other humanitarian platforms)						
		 Restricted (bilateral dissemination only upon agreed dissemination list, no publication on REACH or other platforms) 					
Visibility Specify which logos should be on outputs	Al	All information products will feature REACH branding.					

2. Rationale

2.1. Rationale

During the first civil war in 2011-2012, Libya witnessed massive fighting between Gaddafi's forces and the opposition. In 2018, the country records its eighth year of conflict. War damage due to heavy bombardments, security threats, and economic and political crisis undermined migrants and Libyans' future prospects by affecting their livelihoods and access to services. However, to better understand local needs, relationships between various stakeholders, community perceptions and vulnerabilities, humanitarian actors must focus on urban spaces as unified systems, rather than analyzing needs on a sector-by-sector basis.

The main objective of an Area-based Assessment (ABA) is to better understand local dynamics, vulnerabilities and community capacities to facilitate long-term recovery. In general, using a sectoral approach, international aid workers showed a lack of local knowledge, jeopardizing long-term success of their programs⁴. In order to address this and to facilitate cooperation and coordination between international aid and local communities, this approach is particularly relevant in a country where humanitarian aid is relatively recent.

This ABA aims to focus on neighborhoods of the city of Azzawya (also spelled Al-Zawaia, Azzawi, or Zaouia). Azzawya was chosen for an in-depth analysis for several reasons:

⁴ REACH, Consultations on Humanitarian Responses in Urban Areas. Perspectives from Cities in Crisis, World Humanitarian Summit, (May 2016)

- First of all, for the diversity of its population, notably the size of its migrant community, estimated to 24,475 migrants living in the city⁵.
- Azzawya was also chosen for the complexity of access restrictions to basic services in certain areas of the city, faced by its residents. Located around 45 km away from Tripoli, on the western coast of Libya, Azzawya is the fifth most-populous city⁶ of Libya and hosts the second biggest refinery of the country⁷, which attracts migrants' workforce.
- According to information provided by a KI in September 2018, the official divisions of the city have changed since 2014, which led to disagreements about the definition of the neighborhood boundaries.
- The latest findings from the 2018 REACH Multi Sector Needs Assessment conducted at mantika-level⁸ in Libya also allowed to further identify the geographical area and the sectors requiring further micro-level investigation. First, with 40% of Libyan children out of school, Azzawya is the mantika with the lowest school enrollment rate in Libya. In terms of health care, 76.5% of households reported a lack of medical staff, and 6.1% of households in Azzawya take more than 1 hour to get to hospital. These are the second highest rates across Libya.
- According to KIs⁹ interviewed to fine-tune the research questions for this assessment, in Azzawya the major humanitarian challenges concern the lack of access to healthcare, education and cash; tensions among some communities; employment opportunities restricted to the refinery, which increase risk to join armed groups for smuggling (fuel and people). The three first-mentioned difficulties will be part of this assessment.
- Azzawya is also an interesting case study with regards to its migration profile.¹⁰ The International Organization for Migration (IOM), through its Displacement Tracking Matrix (DTM), estimated that as of August 2018, 35,075 migrants lived in the mantika of Azzawya. Azzawya has been attracting migrant workers filling the local labour shortages. Secondly, Azzawya is an important embarkation point for migrants intending to cross the Mediterranean from Libya to Europe.¹¹ This is confirmed by an ongoing study on the lives of unaccompanied and separated children (UASC) in Libya, conducted in 2018 by REACH, in partnership with UNICEF. This study found that Azzawya had been one of the top three embarkation points for the refugees and migrants interviewed, and one of the top five main sites in Libya where migrants had stopped along their journeys across Libya towards Europe.¹² From the study, it also emerged that Azzawya was one of the most difficult sites for UASC to access healthcare in Libya, a finding also confirmed by the IOM DTM for the overall migrant population in Azzawya.¹³ Additionally, the very few respondents who had access to informal education in Libya did so in Azzawya.
- Very little is known, however, about migrants' access to education, as well as about migrants' food security and access to markets–in terms of physical and financial access to markets in Libya and specifically in Azzawya. These dynamics could, however, be better understood through a micro-level approach. Similarly, although a recent

⁵ IOM-DTM, Round 21 (July-August 2018)

⁶ 200,000 habitants in 2011.

⁷ 2nd largest refinery of Libya: Azzawya Oil Refining Company (ARC) owned by the Government (120,000 barils/day).

⁸ In the MSNA, a mantika refers to a region containing several cities (baladiya).

 ⁹ Five residents of Azzawya provided information in August 2018 as part of a preliminary survey to prepare the research design of this ABA in Azzawya.
 ¹⁰ International Organization for Migration, Displacement Tracking Matrix – Migrant Report – Round 21, August 2018.

¹¹ Micallef M., Trends in human trafficking and smuggling in post-revolution Libya, The Global Initiative Against Transnational Crime, 2017.

¹² REACH/UNICEF, Solitary Journeys of unaccompanied and separated children in Libya, forthcoming.

¹³ International Organization for Migration, Displacement Tracking Matrix – Migrant Report – Round 21, August 2018.

REACH study conducted in partnership with UNHCR investigated refugees and migrants' access to cash, no information is available about the local specificities of migrants' access to cash in Azzawya.

To address the above-mentioned information gaps, this area-based assessment will particularly focus on education, healthcare, food security and markets, and external aid in Azzawya. It will inform humanitarian, development and governmental actors on priorities at the urban area-level. This approach will thus allow them to better understand local dynamics and challenges to operate more efficiently at a micro-level by filling response gaps to the most vulnerable populations.

3. Methodology

2.1. Methodology overview

To provide an in-depth understanding of Azzawya and its neighborhoods, the empirical approach used for this study will primarily be **qualitative**. Therefore, results will be considered indicative and not representative.

This area-based assessment will map the infrastructure and services available in Azzawya with regards to: (1) education, (2) healthcare, (3) food security, markets and bakeries, and (4) external aid.

Building on a review of secondary data, an in-depth analysis on access, barriers and coping mechanisms for Libyans and migrants will focus on the following services:

- 1) Education
- 2) Healthcare
- 3) Food and markets
- 4) External aid.

Qualitative data will be collected through three methods: (1) a participatory mapping exercise (MFGDs) to delineate the neighborhoods within Azzawya and identify in which neighborhoods Libyans and migrants are more densely concentrated. This phase will also aim at grouping neighborhoods in larger entities, called data collection units, which will be used as reference for the next step.¹⁴ (2) A second round of MFGDs will allow to map operational infrastructure in relation to education, healthcare, and markets in each DCU, and map areas where external aid has been provided. Due to operational and security limitations restraining the possibility of conducting FGDs with non-Libyan nationals, a round of DCU-level based KIIs will be conducted with migrants to assess their access to operational infrastructure in the above-mentioned sectors. (3) Thirdly, city-level individual interviews with key informants selected among Libyan service providers and migrant users will allow to explore Libyans and migrants' access and barriers to access services related to education, healthcare, markets and external aid, as well as the strategies used to cope with a lack of access to those.

Key definitions

Migrant:

¹⁴ According to a first mapping exercise conducted in August 2017, there were 38 neighborhoods in Azzawya, which can not be assessed separately due to time and budget constraints. Therefore, to facilitate data collection and analysis, we aim to reach between 8 and 12 DCU in Azzawya. These DCUs are thus supposed to be made of different neighborhoods. If the mapping exercise make it clear that inhabitants are also commonly referring to spatial entities bigger than neighborhoods, these will used as our DCUs. If it seems unlikely for participants to group different neighborhoods in larger entities, this will be done at Tunis level. An element of flexibility is therefore embedded regarding factors defining the DCUs, and will depend on the spatial references commonly used by the inhabitants of Azzawya.

"Any person who is moving or has moved across an international border or within a State away from his/her habitual place of residence, regardless of (1) the person's legal status; (2) whether the movement is voluntary or involuntary; (3) what the causes for the movement are; or (4) what the length of the stay is."¹⁵

For the purposes of this study, the expression "migrants" will refer to all non-Libyan nationals, regardless of their migratory status. Refugees will therefore be included among migrants. "Owing to well-founded fear of being persecuted for reasons of race, religion, nationality, membership of a particular social group or political opinion, [a **refugee** is a person who] is outside the country of his nationality and is unable or, owing to such fear, is unwilling to avail himself of the protection of that country; or who, not having a nationality and being outside the country of his former habitual residence as a result of such events, is unable or, owing to such fear, is unwilling to return to it."¹⁶ Libya is not signatory to the 1951 Refugee Convention but recognises seven nationality groups as coming from refugee producing countries: Syrians, Iraqis, Oromo Ethiopians, Sudanese from Darfur, Eritreans, Somalis and Palestinians.¹⁷

Informal education:

Informal education refers to "an addition, alternative and/or a complement to formal education within the process of the lifelong learning of individuals. It is often provided to guarantee the right of access to education for all. It caters for people of all ages, but does not necessarily apply a continuous pathway-structure; it may be short in duration and/or low intensity, and it is typically provided in the form of short courses, workshops or seminars. Non-formal education mostly leads to qualifications that are not recognized as formal qualifications by the relevant national educational authorities or to no qualifications at all. Non-formal education can cover programmes contributing to adult and youth literacy and education for out-of-school children, as well as programmes on life skills, work skills, and social or cultural development."¹⁸

¹⁵ International Organization for Migration - IOM, <u>Who is a migrant?</u>

¹⁶ 1951 UN Refugee Convention.

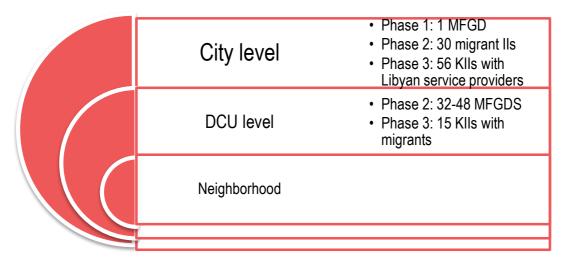
¹⁷ UNHCR (2017) Expanded response in Libya 2017.

¹⁸ ISCED 2011, <u>http://uis.unesco.org/node/334726</u>.

2.2. Area and population of interest

2.2.1. Area of interest

Two area-levels will be considered in this assessment: the city and the data collection unit (DCU) levels.



1. City level

The three rounds of the data collection will be conducted at city level. In the first round of data collection, three MFGDs and one restitution session will allow to fine-tune neighborhood boundaries, which will be grouped in larger entities called data collection units. Between 8 and 12 DCU should be delineated. During the second phase of the data collection, 30 individual interviews with migrants will be then conducted at city-level to understand perceptions, access and barriers of services. The third phase of data collection, namely with individual key informant interviews with Libyan service providers, will take place at city-level, based on the level of knowledge regarding education, healthcare, market and food security, and external aid.

2. Data collection unit level

One of the key components of this assessment will consist in drawing neighborhood boundaries, to be further grouped in data collection units (DCU). Following a mapping exercise in August 2017, REACH team identified 38 areas commonly identified as "neighborhoods" by Azzawya city residents. These neighborhoods do not necessarily match the baladiyas or muhallas commonly used within the humanitarian sector, which are based on Gaddafi-era administrative boundaries that no longer reflect realities on the ground. This assessment intends to fine-tune the existence and boundaries of each neighborhood during the first phase of the data collection, as well as potentially to come up with coherent groupings (DCU) in the city. During the restitution session (Phase 1), the objective is that participants agree on these groupings based on criteria (traditional, demographic, community etc.) that will be considered in the analysis. We also hope to include migrants in each DCU, but at this stage of the assessment, contextual uncertainties do not allow to ensure this selection criterion. Secondly, as the overall objective is to provide an in-depth understanding of local population needs to enhance aid actor's activities, using residents' boundaries will ensure the accuracy of reported data when "DCU-level" findings are reported, and ensure that KIs are reporting according to their area of knowledge from a geographic standpoint.

The second phase of data collection will occur once the DCU will be established in order to conduct 4 MFGDs per DCU. The key informant interviews with migrants conducted during the third phase of data collection will take place at DCU level as well.

2.2.2. Population of interest

The population of interest includes all population groups residing in the neighborhoods of Azzawya, namely: (1) Libyans: adult¹⁹ male and female non-displaced, returnees and IDPs, including service providers such as teachers, medical staff, merchants, and external aid and (2) adult **male and female urban migrants** regularly or irregularly residing in Azzawya outside of detention centers, regardless of their time of arrival in the city.

2.3. Secondary data review

To identify available information on access to services in Azzawya, and to determine information gaps prior to focus of the study, the design of this assessment was driven by findings from REACH recent assessments in Libya and previous ABA assessments conducted in other areas, as well as reports and data produced by international organisations, think tanks and, academic consortia. These sources contributed to inform the definition of the research questions and of the overall methodology, the indicators and the development of the data collection tools. Some of the sources of secondary data consulted for this assessment are the following:

- Libyan Bureau of Statistics;
- Market Assessments (REACH, JMMI);
- MSNA 2018 (REACH);
- IOM's Displacement Tracking Matrix (Round 21, July-August 2018).
- REACH/UNICEF, Solitary Journeys of unaccompanied and separated children in Libya: forthcoming.
- Micallef M., Trends in human trafficking and smuggling in post-revolution Libya, The Global Initiative Against Transnational Crime, 2017.
- Al Araby A., Local specificities of migration in Libya : challenges and solutions, European University Institute, 2018.

Additionally, an exploratory study based on a KI mapping exercise held in August 2017²⁰ and KI interviews²¹ conducted in August 2018, allowed to delineate the first boundaries of neighborhoods, and to obtain an overview of the current challenges in the city.

2.4. Primary Data Collection

REACH will conduct data collection for this assessment in January 2019. Data will be collected through both printed and online maps, as well as through Kobo forms. REACH field teams will complete and submit the forms to the assessment team, which will review daily submissions and flag any issues for follow ups the following day.

¹⁹ Aged 18 years old and more.

²⁰ Purposive sampling method.

²¹ Snowballing sampling method. Five interviews were conducted with KI from Azzawya: two face-to-face interviews and three by telephone.

In that context, the initial plan consists in three phases:

- 1) Phase 1 (half a day): one MFGD will be conducted with residents of Azzawya to identify perceived neighborhoods boundaries, by justifying their choices and identify in which neighborhoods and DCUs Libyans and migrants are mostly located. The defined neighborhoods will have to be grouped in data collection units. During this phase, due to security reasons, REACH's team based in Tunis will conduct the MFGD during the training in Tunis with the data collectors who are residents of Azzawya. In case of unsolvable discrepancies, these will be highlighted in the outputs. Following this MFGD, a few days will be dedicated to digitize boundaries and create new maps before starting the phase 2.
- 2) Phase 2 (26 days) will consist of (1) 4 MFGDs per DCU with Libyan service providers and (2) 30 city-level migrant key informants from three different regions of origin (East Africa, West Africa and MENA region).

The MFGDs will be conducted with the objective of mapping functional markets, education, health and aid facilities, to identify Libyans' access to them and understand community members' perceptions and expectations. Once accurate neighborhood boundaries are delineated, four gender-based MFGDs per DCU will be held with Libyan women and men. As the security and operational conditions in Azzawya limit migrants' ability to participate in MFGDs, REACH will conduct a round of DCU-level key informant interviews with migrants in replacement of the MFGDs. For more information, please refer to the paragraph on Phase 3 below.

In the meantime, 30 migrant KIIs will be conducted at the city-level. Migrant KIs will be sampled on the basis of their region of origin (East Africa, West Africa and MENA region) to explore migrants' expectations and experience in accessing services in the above-mentioned sectors.

3) Phase 3 (16 days) will consist of: (1) 56 in-depth, city-level, interviews with key informants selected among Libyan service providers with specific knowledge on health, education, markets, and external aid in Azzawya and (2) a total of 15 key informant interviews – 3 per each DCU – with migrants originating from East Africa, West Africa and the MENA region. With regards to the migrant DCU-level KIs, a structured tool will be administered in the five migrant most densely inhabited DCUs, among those defined during phase 1. Three migrant key infomants will be sampled in each of these five DCUs on the basis of their region of origin (East Africa, West Africa and MENA region) with a view to reflect on the diversity of migrants' experiences. KIs will be asked questions about migrant-specific access to the facilities and service providers mapped in each of the 5 most densely inhabited DCUs. Based on the maps produced as an outcome of the MFGDs with Libyans, migrant KIs will be hence asked to point to any additional facilities that are not already mapped or to indicate any facilities that are not accessed by migrants. This will allow to gain a more comprehensive view of Libyans and non-Libyans' access to services in Azzawya.

It should be noted that the assessment will have an element of flexibility embedded in terms of quantity of interviews or FGDs, as the exact number of DCUs and the profiles of key informants that will be interviewed may vary. Adjustability will depend on the knowledge of participants from the previous rounds, and the existing services (education, healthcare, markets, external aid) in the DCU as we will choose in part KIs because they have a position of service providers.

The method may also need to be altered depending on the field constraints, notably regarding the possibility to conduct FGDs or individual interviews with non-Libyans (migrants and refugees).

Methods:

The following table provides the methods that will be employed during the three phases of the assessment and the corresponding methods that will be used to meet each phase objective. In order to compare findings between each group of population, it is essential to use the same methods, mitigation measures and tools for each group of population.

Phase Met	thod	Objective	Tools	Treatment	Analysis	Population of interest	Sampling
P1 City MF0	GD I	Delineate neighborhood boundaries, group neighborhood in rationale DCUs.	Participatory mapping (paper map)	ArcGis	Qualitative (mapping)	Community members	Purposive & snowballing
P2 DCI MF0	GD (Map operational services (schools, health centers, external aid) & markets; Identify KIs; Understand community perceptions and adequacy of services, obstacles, and coping mechanims	Participatory mapping (Google My Maps) Semi- structured guide	ArcGis Nvivo	Qualitative	Community members	Purposive & snowballing
indi inte with	y-level ividual erviews h :	Identify KIs; Understand community perceptions and adequacy of services, obstacles, and coping mechanisms	Semi- structured guide	ArcGis Nvivo	Mixed	Migrants	Purposive & snowballing
Key info	y s	Understand barriers to deliver services, perceptions and coping mechanisms.	Semi- structured guideline	Nvivo, SPSS	Mixed	Libyan service providers	Purposive & snowballing
Key info inte with	y ormant erviews	Map operational services (schools, health centers, external aid) & markets; Give perceptions of the boundaries aggred in Phase 1.	Structured guideline with a few open- ended questions	SPSS	Mixed	Migrants	Purposive & snowballing

Sampling:

The **purposive and snowballing sampling methods** appear as the most appropriate for this assessment, given that the objective is to understand local dynamics in terms of meeting basic needs, through a mapping of operational services, and an analysis of residents' obstacles, expectations and coping mechanisms in accessing them. On one hand, the biggest disadvantage of these sampling methods is the inability to generalize research findings, and the vulnerability to errors of judgement in the choice of participants. On the other hand, the choice of the sampling is more relevant in a conflict-affected country where a trust relationship between data collectors and participants is necessary to conduct the survey, and where

only key informants working in one of the assessed services in a DCU are required.²² Additionally, purposive and snowballing sampling is also the most cost and time effective sampling method.

The first round of data collection will be organized around a mapping and focus group discussions, gathering around 8 community members residing in or knowing different parts of Azzawya (assuring the largest geographic coverage per MFGD), followed by a restitution session to resolve discrepancies in the responses of these three groups. This phase aims to further fine-tune neighborhood boundaries and research questions, and to activate further networks of contacts that could facilitate access to the target population.

To stimulate exchange and discussion, the MFGDs of **the second round** of data collection will gather participants by gender for Libyans. To avoid too long session and keep attention of participants, the sectors we have identified will be split per MFGDs, thus considering **4 rounds per DCU**, **including 5-8 participants per MFGD**²³. Participants will be sampled purposively and using knowledge networks from the previous round. The second of data collection also includes **thirty** migrant individual interviews. Migrants will be sampled purposively on the basis of their region of origin as follows: **10 migrant KIs** originating from the Middle East and North Africa (**MENA**), **10 migrant KIs** originating from West Africa and **10 migrant KIs** originating from East Africa.

The third phase will consist of key informant interviews with purposively sampled Libyan service providers and based on suggestions provided by participants from the previous sessions. They will be selected considering their knowledge of basic services and their role as service provider in education, health, markets, and external aid. Between 10 and 13 interviews per sector will be conducted at city-level, depending on the quality of the interviews and availability of key informants. The third phase of data collection also include 3 key informant interviews per DCU with migrants purposively sampled in the DCUs with the highest density of migrant populations.

Tools:

Data collection tools include three components:

- Participatory mapping during the FGDs (MFGDs). The first phase consists of identifying boundaries and existing services based on community perceptions, rather than official boundaries. Delineations may differ depending on socio-economic factors, which will be considered in the analysis. In the case of there is no data saturation (boundaries differ), a restitution session will be conducted with inhabitants and local staff to reach the data saturation point. The aim is to use printed large maps for this exercise, but depending on the feasibility to print maps in a sensitive context such as Libya, online tool will be considered.
- o The second phase of data collection includes participatory mapping exercises with Libyans and individual interviews with migrants. The mapping exercise with community members of each identified DCU consists of locating all relevant educational, health, aid and market facilities in their residing area. The mapping exercise will be followed by a focus group discussion that aims to collect DCU-level information on access and acceptability of

²² The 4 assessed services are: education, healthcare, food and market, and external aid.

²³ Thus, in one DCU, we will have for example 1 female MFGD dedicated to education, health and aid ; 1 male MFGD dedicated to education, health and aid ; 1 female MFGD dedicated to markets, bakeries and aid ; and 1 male MFGD dedicated to markets, bakeries and aid.

these facilities and services, including external aid. Semi-structured questions interviews will guide the FGDs. As for the individual interviews with migrants, one single tool will be developed. This tool will be mostly structured but will include a few open-ended questions.

The third phase of data collection will consist of five semi-structured tools developed for Libyan service providers.
 Each of them will be tailored to a specific service / sector and will be administered to key informants based on their sectors of expertise (healthcare, education, markets, bakeries, and external aid). It also consists of one single tool for migrant key informants to be interviewed in each DCU. Both of them will include structured and open-ended questions. The migrant key informant tool will also include questions to map facilities

Data collection will be held from December 2018 to January 2019 and will take place in Tunis and Azzawya.

Among the data collection teams, two enumerators (male & female) will be devoted to the MFGDs, including one facilitator and one note taker. All enumerators will be trained on data collection methods and ethical safeguards before the beginning of data collection, and on how to counter bias during data collection.

REACH field managers will coordinate fieldwork of REACH local partners in Libya, with a view to supervise enumerators on the field, facilitate access to data collection sites and ensure the timely submission of quality data. The FC will be responsible for conducting daily briefing sessions at the beginning of the working day and debriefing session at the end of the working day to ensure a smooth progression of fieldwork, with a view to promptly identify and address issues of concern. He will be the reference contact for the data collection team for the regular implementation of data collection activities and for any challenges that could arise in the field, and will liaise on a daily basis with the assessment team in Tunis to inform the team about any developments related to the fieldwork. The overall supervision of the assessment will be ensured by a team composed by: an Assessment Specialist, a Senior Assessment Officer (SAO), an Assessment Officer (AO), a GIS Officer, and a Project Officer based in Tunis.

2.5. Data Processing & Analysis

For data processing and analysis specific to each data collection component:

1. Participatory mapping & FGDs

Phase 1: The boundaries resulting from each of the 3 first MFGDs will be compared and crosschecked, aiming at highlighting similarities and discrepancies. A 4th MFGD (restitution session) will be held, gathering all the participants of the previous 3 MFGDs and aiming at reaching a consensus over the neighbourhood boundaries. If discrepancies and disagreements are impossible to solve, this will be highlighted in the outputs. The 4th MFGD will also aim at grouping neighborhoods in larger entities called Data Collection Units (DCUs), to be used as references in the next phase. This first phase will most likely be organized around large printed maps, to be scanned to the assessment team at Tunis level.

Phase 2: Unlike the phase 1, this phase will most likely be organized around "online" maps, considering the remote context and the difficulty to print a large amount of maps in a sensitive context like Libya. Two different tools will be prepared through: (1) Google My Maps, aiming at mapping different types of services and demographic profile of the population within the DCU, and (2) open-ended questions guideline used to identify the perceptions of residents of existing

services, barriers they face in accessing basic services and their coping mechanisms. Data collected will be directly exported and analysed at DCU level.

2. Key informant and migrant interviews

Primary data will be collected through semi-structured tools for KIIs and a structured tool for migrant interviews. Enumerators will input data either on hand-held mobile devices or using their web browsers, then first enter information in KoBo, an online tool for mobile data collection, and then store on a protected server. A special attention will be given to open-ended questions, where enumerators will have the possibility to complete and consolidate the form before finalizing it.

Data will be transcribed on a daily basis for submission to the PO and Assessment team in Tunis. Incoming data will be monitored and cleaned on a daily basis in order to monitor its quality with a view to address any possible issues of concern in a timely manner.

The analysis will be triangulated and contextualised with information emerging from MFGDs and secondary data. Qualitative data will be coded through the analysis software Atlas.Ti or Nvivo on the basis of the following criteria:

- **Frequency:** the analysis will take into account the number of times a piece of information was reported by respondents. Given the non-probability nature of the sample, this will only be considered indicative of how much the information is spread among respondents.
- **Specificity:** while taking into account the bias of respondents, interviews which contain more detailed accounts with information that can be verified through secondary sources will be treated as more relevant if contradicting with other information collected during primary data collection.

3. Roles and responsibilities

Table 2: Description of roles and responsibilities

Task Description	Responsible	Accountable	Consulted	Informed
Research design	Assessment Officers	Assessment Manager	Research Design Unit	Sector coordinators, REACH Global Coordinator
Supervising data collection	Project Officer	Assessment Officer	Assessment Manager	Research Design Unit, Data Unit, Reporting Unit
Data processing (checking, cleaning)	Project Officer	Assessment Officers	<mark>Assessment</mark> Manager	Data Unit
Data analysis	Assessment Officers, GIS Officer	Assesment Manager	Data Unit	Reporting Unit
Output production	Assessment Officers, GIS Officer	Assessment Manager	<mark>Reporting Unit,</mark> Data Unit, GIS Unit	Sector coordinators, REACH

				Global Coordinator
Dissemination	Assessment Officers	Assessment Manager	Libya Coordinator	REACH Global Coordinator
Monitoring & Evaluation	Assessment Officers, GIS Officer, Data Collection Officer	Assessment Manager	Libya Coordinator	REACH Global Coordinator
Lessons learned	Assessment Officers	Assessment Manager	Libya Coordinator	Sector coordinators, REACH Global Coordinator

Responsible: the person(s) who executes the task

Accountable: the person who validates the completion of the task and is accountable of the final output or milestone

Consulted: the person(s) who must be consulted when the task is implemented

Informed: the person(s) who need to be informed when the task is completed

4. Data Analysis Plan

SEE Annex 1

5. Data Management Plan

Administrative Data						
Research Cycle name	Area-based Assessment					
Project Code	LBY1803					
Donor	OFDA					
Project partners	-					
Research Contacts	Christopher Paci, Assessment Specialist (<u>christopher.paci@reach-initiative.org</u>) Francesca Garofalo, Senior Assessment Officer (<u>francesca.garofalo@reach-</u> initiative.org)					
	Céline Roman, GIS Officer (<u>celine.roman@reach-initiative.org</u>) Anne-Charlotte Triplet (annecharlotte.triplet@reach-initiative.org)					
Data Management Plan Version	Date: 29/10/2018	Version: V1				
Related Policies	-					
Documentation and Metadata						
What documentation	X Data analysis plan	X Data Cleaning Log, including:				
and metadata will		X Deletion Log				
accompany the data? Select all that apply	X Value Change Log					
	X Code book	Data Dictionary				
	Metadata based on HDX	□ [Other, Specify]				
	Standards					
Ethics and Legal Compliance						

Azzawya Area-Based Assessment (LBY1803), December 2018

Which ethical and legal measures will be taken?	x Consent of participants to participate	□ Consent of participants to share personal information with other agencies				
	x No collection of personally identifiable	x Gender, child protection and other				
	data will take place	protection issues are taken into account				
	x All participants reached age of majority	[Other, Specify]				
Who will own the copyright and Intellectual Property Rights for the data that is collected?	All outputs of the Area-Based Assessment are disseminated to the broader humanitar					
Storage and Backup						
Where will data be stored and backed up	X IMPACT/REACH Kobo Server	Other Kobo Server: [specify]				
during the research?	X IMPACT Global Physical / Cloud Server	Country/Internal Server				
	On devices held by REACH staff	Physical location [specify]				
	□ [Other, Specify]					
Which data access and security measures have	X Password protection on devices/servers	X Data access is limited to REACH staff				
been taken?	 Form and data encryption on data collection server 					
	□ [Other, Specify]					
Preservation						
Where will data be stored for long-term	X IMPACT / REACH Global Cloud / Physical Server					
preservation?	REACH Country Server	□ [Other, Specify]				
Data Sharing						
Will the data be shared publically?	x Yes	 No, only with mandating agency / body 				
Will all data be shared?	□ Yes	x No. Only anonymized data will be shared				
	□ No, [Other, Specify]					
Where will you share the	x REACH Resource Centre	OCHA HDX				
data?						
	□ HumanitarianResponse	□ [Other, Specify]				
Responsibilities						
Data collection	Wassim Ben Romdhane, Project Officer (tu	inis.project-officer2@reach-initiative.org)				
	Ikram Mensi, Project Officer (tunis.project-officer@reach-initiative.org)					
	REACH Field Managers in Libya					
Data cleaning	Wassim Ben Romdhane, Project Officer (tunis.project-officer2@reach-initiative.org)					
	Ikram Mensi, Project Officer (tunis.project-officer@reach-initiative.org)					
	Hedi Ben Mustapha, Data Officer (tunis.da					
Data analysis	Francesca Garofalo, Assessment Officer (
	Céline Roman, GIS Officer (<u>celine.roman@</u>					
	Anne-Charlotte Triplet, Assessment Officer (<u>annecharlotte.triplet@rea</u>					
Data sharing/uploading	initiative.org Francesca Garofalo, Assessment Officer (francesca garofalo@reach_initiative.org)				
Data onanngrapioading		านกอออน.รูนาอานเอเซาอนอาากแนนเพช.อารู				

Céline Roman, GIS Officer (celine.roman@reach-initiative.org)						
Anne-Charlotte	Triplet,	Assessment	Officer	(annecharlotte.triplet@reach-		
initiative.org						

6. Monitoring & Evaluation Plan

IMPACT Objective	External M&E Indicator	Internal M&E Indicator	Focal point	Tool	Will indicator be tracked?
	Number of	# of downloads of x product from Resource Center	Country request to HQ		X Yes
Humanitaria	Number of humanitarian organisations	# of downloads of x product from Relief Web	Country request to HQ		X Yes
n stakeholders	accessing IMPACT services/products	# of downloads of x product from Country level platforms	Country team	User_lo	X Yes
are accessing IMPACT	Number of individuals	# of page clicks on x product from REACH global newsletter	Country request to HQ	g	X Yes
products	accessing IMPACT services/products	# of page clicks on x product from country newsletter, sendingBlue, bit.ly	Country team		X Yes
		# of visits to x webmap/x dashboard	Country request to HQ		X Yes
IMPACT activities contribute to better program	Number of humanitarian	# references in HPC documents (HNO, SRP, Flash appeals, Cluster/sector strategies)	Country	Referen	LIBYA Humanitarian Needs Overview 2019 Shelter cluster strategy
implementati on and coordination of the humanitaria	organisations utilizing IMPACT services/products	# references in single agency documents	team	ce_log	
n response	Humanitarian actors use	Perceived relevance of IMPACT country-programs			
	IMPACT evidence/product	Perceived usefulness and influence of IMPACT outputs		Usage_	
	s as a basis for decision making,	Recommendations to strengthen IMPACT programs			
Humanitaria	aid planning and	Perceived capacity of IMPACT staff			
n stakeholders	delivery	Perceived quality of outputs/programs	Country	Feedba ck <i>and</i>	
are using IMPACT products	Number of humanitarian documents (HNO, HRP, cluster/agency strategic plans, etc.) directly informed by IMPACT products	Recommendations to strengthen IMPACT programs	Country team	Usage_ Survey templat e	Usage survey to be conducted at the end of the research cycle related to all outputs, targeting at least 10 partners-
Humanitaria n stakeholders are engaged	Number and/or percentage of humanitarian organizations	# of organisations providing resources (i.e.staff, vehicles, meeting space, budget, etc.) for activity implementation	Country team	Engage ment_lo g	X Yes

Azzawya Area-Based Assessment (LBY1803), December 2018

in IMPACT programs throughout	directly contributing to IMPACT	# of organisations/clusters inputting in research design and joint analysis		X Yes
the research cycle	programs (providing resources, participating to presentations, etc.)	# of organisations/clusters attending briefings on findings;		X Yes

ANNEX: DATA ANALYSIS PLAN

PHASE 1

1.1 Participatory mapping focus group discussion

Research Questions	Sub-research questions	Category	Questionnaire QUESTION	Probes
1. What are the neighborhood and DCU boundaries and how are residents grouped within each?	1.1 What are the current perceived neighborhoods within the city of Azzawya? What are their boundaries? What are the larger regions of the city into which they can be grouped?	DCU boundaries	What are the types of divisions/areas within Azzawya city and how do they relate to each other?	What are the (geographic/spatial?) references commonly used by inhabitants of Azzawya? If there are different kind of references, what are the relationships between them (ex: a neighborhood belongs to a municipality)
1. What are the neighborhood and DCU boundaries and how are residents grouped within each?	1.1 What are the current perceived neighborhoods within the city of Azzawya? What are their boundaries? What are the larger regions of the city into which they can be grouped?	DCU boundaries	What distinguish a <i>municipality</i> from another?	Is there official authorities linked to each <i>municipality</i> ? Do the presence of militias/armed play a role in the definition and extent of <i>municipalities</i> ? Any other criteria related to the perception of the <i>municipalities</i> ?
1. What are the neighborhood and DCU boundaries and how are residents grouped within each?	1.1 What are the current perceived neighborhoods within the city of Azzawya? What are their boundaries? What are the larger regions of the city into which they can be grouped?	DCU boundaries	What distinguish a <i>neighborhood</i> from another?	Is there official authorities linked to each neighborhood? Do the presence of militias/armed groups play a role in the definition and extent of <i>neighborhoods</i> ? Is there a link with religious authorities? Are they defined by tribes or communities? Any other criteria related to the perception of the <i>neighborhoods</i> ?

1. What are the neighborhood and DCU boundaries and how are residents grouped within each?	1.1 What are the current perceived neighborhoods within the city of Azzawya? What are their boundaries? What are the larger regions of the city into which they can be grouped?	DCU boundaries	Please trace the boundaries of the <i>municipalities</i> and name them	
1. What are the neighborhood and DCU boundaries and how are residents grouped within each?	1.1 What are the current perceived neighborhoods within the city of Azzawya? What are their boundaries? What are the larger regions of the city into which they can be grouped?	DCU boundaries	Please trace the boundaries of the <i>neighborhoods</i> and name them	
1. What are the neighborhood and DCU boundaries and how are residents grouped within each?	1.1 What are the current perceived neighborhoods within the city of Azzawya? What are their boundaries? What are the larger regions of the city into which they can be grouped?	DCU boundaries	Please discuss the discrepancies between the 3 maps resulting out of the 3 MFGDs and reach a consensus.	

PHASE 2

2.1 Mapping Focus Group Discussions with Libyans

Research Questions	Sub-research questions	Category	Questionnaire QUESTION	Probes
1. What are the neighborhood	1.2. What is the demographic	Orientation and	Identify the residential areas of this part	Identify any large areas of this part of the
and DCU boundaries and how	profile of the population within	DCU	of the city on the map (i.e. those areas	city that are non-residential (industrial areas,
are residents grouped within	each neighborhood and DCU?	characteristics	that consist mostly of houses and	large commercial areas, government
each?			personal property).	building complexes, open space, etc.)
1. What are the neighborhood	1.2. What is the demographic	Orientation and		Are there any areas in this part of the city
and DCU boundaries and how	profile of the population within	DCU		that are currently inaccessible or not easily
are residents grouped within	each neighborhood and DCU?	characteristics		accessed by ordinary residents? Please
each?				explain barriers to access.

1. What are the neighborhood and DCU boundaries and how are residents grouped within each?	1.2. What is the demographic profile of the population within each neighborhood and DCU?	Orientation and DCU characteristics	Please estimate the percentages of people in this part of the city that belong to different displacement groups, and indicate where in this part of the city each of these groups tends to live.	Can you estimate what percentage of people in this part of the city are IDPs? When did these IDPs first start to arrive? When did the majority of them arrive? Where were the majority of them displaced from?
1. What are the neighborhood and DCU boundaries and how are residents grouped within each?	1.2. What is the demographic profile of the population within each neighborhood and DCU?	Orientation and DCU characteristics		Can you estimate what percentage of people in this part of the city are returnees? When did these returnees first start to arrive? When did the majority of them arrive? Where were the majority of them returning from?
1. What are the neighborhood and DCU boundaries and how are residents grouped within each?	1.2. What is the demographic profile of the population within each neighborhood and DCU?	Orientation and DCU characteristics		Can you estimate what percentage of people in this part of the city are refugees or migrants? When did these refugees or migrants first start to arrive? When did the majority of them arrive? What are their main nationalities / regions of origin?
1. What are the neighborhood and DCU boundaries and how are residents grouped within each?	1.2. What is the demographic profile of the population within each neighborhood and DCU?	Orientation and DCU characteristics		Can you estimate what percentage of people in this part of the city are non- displaced?
1. What are the neighborhood and DCU boundaries and how are residents grouped within each?	1.2. What is the demographic profile of the population within each neighborhood and DCU?	Orientation and DCU characteristics		Identify any areas of this part of the city that host large concentrations of IDPs.
1. What are the neighborhood and DCU boundaries and how are residents grouped within each?	1.2. What is the demographic profile of the population within each neighborhood and DCU?	Orientation and DCU characteristics		Identify any areas of this part of the city that host large concentrations of returnees.
1. What are the neighborhood and DCU boundaries and how are residents grouped within each?	1.2. What is the demographic profile of the population within each neighborhood and DCU?	Orientation and DCU characteristics		Identify any areas of this part of the city that host large concentrations of refugees or migrants. What are their main nationalities / regions of origin?

1. What are the neighborhood and DCU boundaries and how are residents grouped within each?	1.2. What is the demographic profile of the population within each neighborhood and DCU?	Orientation and DCU characteristics	Identify any areas in this part of the city that are currently being used as formal camps, informal settlements, or collective shelters for displaced people, and give details on each.	Where are these areas that are being used as formal camps or informal settlements? Where are these collective shelters? For each site, what was this area or building previously used for? Which groups of people are currently living there?
2. To what extent are basic services functional and accessible for residents?	2.1. Where are operational services (schools, health centers, markets, bakeries, external aid) by DCU?	Food and Markets	Where do people living in this part of the city go to purchase core food and non-food items (including market places both inside and outside the immediate area)?	Where are the main marketplaces in this part of the city where core food and non-food items are sold?
2. To what extent are basic services functional and accessible for residents?	2.1. Where are operational services (schools, health centers, markets, bakeries, external aid) by DCU?	Food and Markets		Aside from marketplaces, from what other sources do your households commonly purchase core food and non-food items?
2. To what extent are basic services functional and accessible for residents?	2.1. Where are operational services (schools, health centers, markets, bakeries, external aid) by DCU?	Food and Markets		Are there any core food or non-food items that residents <u>regularly</u> need to leave this part of the city to purchase? If so, which items? What marketplaces do they need to visit to find these items? What forms of transportation do they use to get there? Do any groups of people face challenges accessing or traveling to these locations?
3. What are the perceptions and expectations of Libyans and migrants regarding delivery of basic services?	3.1. How adequate and acceptable are existing basic services as perceived by Libyans and migrants?	Food and Markets	How well do the core food and non-food items available in this part of the city meet residents' needs?	Are there particular types of households in this part of the city who find it difficult to access marketplaces? Please explain which types of households and why.
3. What are the perceptions and expectations of Libyans and migrants regarding delivery of basic services?	3.2. What are the primary obstacles to accessing services, from the perspective of Libyans and migrants?	Food and Markets		Are there any areas in this part of the city where finding core food or non-food items is particularly challenging? If so, which areas, and why?

3. What are the perceptions and expectations of Libyans and migrants regarding delivery of basic services?	3.2. What are the primary obstacles to accessing services, from the perspective of Libyans and migrants?	Food and Markets		What are the main barriers that prevent residents of this part of the city from purchasing core food and non-food items? Are there any items that are particularly difficult for residents to access? If so, which items, and why?
3. What are the perceptions and expectations of Libyans and migrants regarding delivery of basic services?	3.2. What are the primary obstacles to accessing services, from the perspective of Libyans and migrants?	Food and Markets		In general, do you consider the marketplaces in this part of the city to be of sufficient quality? Why or why not? How has the quality of marketplaces and market items in this part of the city changed since 2014?
3. What are the perceptions and expectations of Libyans and migrants regarding delivery of basic services?	3.2. What are the primary obstacles to accessing services, from the perspective of Libyans and migrants?	Food and Markets	Do people in this part of the city have access to sufficient cash to meet their day-to-day needs?	What are the main sources from which you obtain Libyan dinars for day-to-day use? Do you regularly need to use multiple sources in order to obtain enough Libyan dinars to meet your day-to-day needs?
3. What are the perceptions and expectations of Libyans and migrants regarding delivery of basic services?	3.2. What are the primary obstacles to accessing services, from the perspective of Libyans and migrants?	Food and Markets		Are you regularly able to access enough hard cash to meet your day-to-day needs? If not, why not, and how often do you face difficulties? What strategies do you use to try to mitigate this issue?
2. To what extent are basic services functional and accessible for residents?	2.1. Where are operational services (schools, health centers, markets, bakeries, external aid) by DCU?	Bakeries	Where do people living in this part of the city go to purchase bread (including bakeries and stores both inside and outside the immediate area)?	Where are the bakeries in this part of the city that residents currently rely on for bread?
2. To what extent are basic services functional and accessible for residents?	2.1. Where are operational services (schools, health centers, markets, bakeries, external aid) by DCU?	Bakeries		Where are the main other sources, aside from bakeries, through which people in this part of the city access bread?
3. What are the perceptions and expectations of Libyans and migrants regarding delivery of basic services?	3.2. What are the primary obstacles to accessing services, from the perspective of Libyans and migrants?	Bakeries	How well does the bread available in this part of the city meet residents' needs?	What are the main barriers that prevent residents of this part of the city from being able to purchase enough bread?

3. What are the perceptions and expectations of Libyans and migrants regarding delivery of basic services?	3.1. How adequate and acceptable are existing basic services as perceived by Libyans and migrants?	Humanitarian assistance	How well does the humanitarian assistance provided in this part of the city meet residents' needs?	Within the past year, have your local council or other local or religious authorities offered any type of humanitarian assistance in this part of the city? If so, what did they offer, and to whom?
3. What are the perceptions and expectations of Libyans and migrants regarding delivery of basic services?	3.1. How adequate and acceptable are existing basic services as perceived by Libyans and migrants?	Humanitarian assistance		Within the past year, have any Libyan or international organisations offered any type of humanitarian assistance in this part of the city? If so, what did they offer, and to whom?
3. What are the perceptions and expectations of Libyans and migrants regarding delivery of basic services?	3.1. How adequate and acceptable are existing basic services as perceived by Libyans and migrants?	Humanitarian assistance		Have these offers of humanitarian assistance been restricted to any particular areas of this part of the city? If so, which areas?
3. What are the perceptions and expectations of Libyans and migrants regarding delivery of basic services?	3.1. How adequate and acceptable are existing basic services as perceived by Libyans and migrants?	Humanitarian assistance		Are there particular groups of residents of this part of the city who have been the focus of humanitarian assistance efforts? If so, which groups, and why?
3. What are the perceptions and expectations of Libyans and migrants regarding delivery of basic services?	3.1. How adequate and acceptable are existing basic services as perceived by Libyans and migrants?	Humanitarian assistance		Have your own households received any type of humanitarian aid? If so, what type of aid was it?
3. What are the perceptions and expectations of Libyans and migrants regarding delivery of basic services?	3.1. How adequate and acceptable are existing basic services as perceived by Libyans and migrants?	Priority needs	To the best of your knowledge, what are the priority needs of most people living in this part of the city?	For those whose households received aid: Was the aid useful to your household? Was it of adequate quality? Did you receive enough aid to meet your household's needs? Did you receive it at the time you needed it?

3. What are the perceptions and expectations of Libyans and migrants regarding delivery of basic services?	3.2. What are the primary obstacles to accessing services, from the perspective of Libyans and migrants?	Priority needs		In general, what do you consider to be the top 3 needs of people in this part of the city? Are there any groups of people who might have different priorities (for example, men, women, children, elderly; non-displaced people, IDPs, returnees, refugees/migrants; etc.)?
1. What are the neighborhood and DCU boundaries and how are residents grouped within each?	1.2. What is the demographic profile of the population within each neighborhood and DCU?	Orientation and DCU characteristics	Identify the residential areas of this part of the city on the map (i.e. those areas that consist mostly of houses and personal property).	What are some unique qualities of this area of the city that might make meeting these priority needs easier or harder?
1. What are the neighborhood and DCU boundaries and how are residents grouped within each?	1.2. What is the demographic profile of the population within each neighborhood and DCU?	Orientation and DCU characteristics		Identify any large areas of this part of the city that are non-residential (industrial areas, large commercial areas, government building complexes, open space, etc.)
1. What are the neighborhood and DCU boundaries and how are residents grouped within each?	1.2. What is the demographic profile of the population within each neighborhood and DCU?	Orientation and DCU characteristics	Please estimate the percentages of people in this part of the city that belong to different displacement groups, and indicate where in this part of the city each of these groups tends to live.	Are there any areas in this part of the city that are currently inaccessible or not easily accessed by ordinary residents? Please explain barriers to access.
1. What are the neighborhood and DCU boundaries and how are residents grouped within each?	1.2. What is the demographic profile of the population within each neighborhood and DCU?	Orientation and DCU characteristics		Can you estimate what percentage of people in this part of the city are IDPs? When did these IDPs first start to arrive? When did the majority of them arrive?
1. What are the neighborhood and DCU boundaries and how are residents grouped within each?	1.2. What is the demographic profile of the population within each neighborhood and DCU?	Orientation and DCU characteristics		Can you estimate what percentage of people in this part of the city are returnees? When did these returnees first start to arrive? When did the majority of them arrive?

1. What are the neighborhood and DCU boundaries and how are residents grouped within each?	1.2. What is the demographic profile of the population within each neighborhood and DCU?	Orientation and DCU characteristics		Can you estimate what percentage of people in this part of the city are refugees or migrants? When did these refugees or migrants first start to arrive? When did the majority of them arrive? What are their main nationalities / regions of origin?
1. What are the neighborhood and DCU boundaries and how are residents grouped within each?	1.2. What is the demographic profile of the population within each neighborhood and DCU?	Orientation and DCU characteristics		Can you estimate what percentage of people in this part of the city are non-displaced?
1. What are the neighborhood and DCU boundaries and how are residents grouped within each?	1.2. What is the demographic profile of the population within each neighborhood and DCU?	Orientation and DCU characteristics		Identify any areas of this part of the city that host large concentrations of IDPs.
1. What are the neighborhood and DCU boundaries and how are residents grouped within each?	1.2. What is the demographic profile of the population within each neighborhood and DCU?	Orientation and DCU characteristics		Identify any areas of this part of the city that host large concentrations of returnees.
1. What are the neighborhood and DCU boundaries and how are residents grouped within each?	1.2. What is the demographic profile of the population within each neighborhood and DCU?	Orientation and DCU characteristics	Identify any areas in this part of the city that are currently being used as formal camps, informal settlements, or collective shelters for displaced people, and give details on each.	Identify any areas of this part of the city that host large concentrations of refugees or migrants. What are their main nationalities / regions of origin?
2. To what extent are basic services functional and accessible for residents?	2.1. Where are operational services (schools, health centers, markets, bakeries, external aid) by DCU?	Education	Where do people living in this part of the city go to access educational services such as primary and secondary education (including facilities both inside and outside the immediate area)?	Where are these areas that are being used as formal camps or informal settlements? Where are these collective shelters? For each site, what was this area or building previously used for? Which groups of people are currently living there?
2. To what extent are basic services functional and accessible for residents?	2.1. Where are operational services (schools, health centers, markets, bakeries, external aid) by DCU?	Education		Where are the educational facilities in this part of the city that students are currently attending (including both formal and informal schools)?

2. To what extent are basic services functional and accessible for residents?	2.1. Where are operational services (schools, health centers, markets, bakeries, external aid) by DCU?	Education		Are there any educational facilities in this part of the city that are currently closed or non-operational? Please identify these facilities on the map. Why are students not currently attending these facilities?
3. What are the perceptions and expectations of Libyans and migrants regarding delivery of basic services?	3.1. How adequate and acceptable are existing basic services as perceived by Libyans and migrants?	Education	How well do the educational services in this part of the city meet residents' needs?	Do any groups of children from this part of the city need to travel to educational facilities in other parts of Azzawya, or outside the city, in order to attend school? If so, which groups? Where are these facilities located, and what types of facilities are they (primary/secondary, public/private/informal/religious, etc.)? What forms of transportation do they use to get there? Do any groups of children face challenges accessing or traveling to these locations?
3. What are the perceptions and expectations of Libyans and migrants regarding delivery of basic services?	3.2. What are the primary obstacles to accessing services, from the perspective of Libyans and migrants?	Education		Are there particular groups of children in this part of the city that have greater difficulty accessing education? Please explain which groups and why.
3. What are the perceptions and expectations of Libyans and migrants regarding delivery of basic services?	3.1. How adequate and acceptable are existing basic services as perceived by Libyans and migrants?	Education		What are the main barriers that may have prevented some students in this part of the city from accessing education?
3. What are the perceptions and expectations of Libyans and migrants regarding delivery of basic services?	3.1. How adequate and acceptable are existing basic services as perceived by Libyans and migrants?	Education		In general, do you consider the level of education in schools in this part of the city to be of sufficient quality? Why or why not? How has the quality of education in these schools changed since 2014?
2. To what extent are basic services functional and accessible for residents?	2.1. Where are operational services (schools, health centers, markets, bakeries, external aid) by DCU?	Health	Where do people living in this part of the city go to access health services (including facilities both inside and outside the immediate area)?	What steps do you believe need to be taken to improve access to or quality of education for children in this part of the city?

2. To what extent are basic services functional and accessible for residents?	2.1. Where are operational services (schools, health centers, markets, bakeries, external aid) by DCU?	Health		Where are the health facilities in this part of the city that residents currently use (including hospitals, private clinics, pharmacies, and other primary healthcare facilities)?
2. To what extent are basic services functional and accessible for residents?	2.1. Where are operational services (schools, health centers, markets, bakeries, external aid) by DCU?	Health		Are there any health facilities in this part of the city that are currently closed or non- operational? Please identify these facilities on the map. Why are patients not using these facilities?
3. What are the perceptions and expectations of Libyans and migrants regarding delivery of basic services?	3.1. How adequate and acceptable are existing basic services as perceived by Libyans and migrants?	Health	How well do the health services in this part of the city meet residents' needs?	Do any groups of people from this part of the city need to travel to other parts of Azzawya, or outside the city, in order to access healthcare that meets their needs? If so, which groups? Where are these facilities located, and what types of facilities are they (hospitals, clinics, pharmacies, etc.)? What forms of transportation do they use to get there? Do any groups of people face challenges accessing or traveling to these locations?
3. What are the perceptions and expectations of Libyans and migrants regarding delivery of basic services?	3.2. What are the primary obstacles to accessing services, from the perspective of Libyans and migrants?	Health		Are there particular groups of people in this part of the city that have greater difficulty accessing healthcare that meets their specific needs? Please explain which groups and why.
3. What are the perceptions and expectations of Libyans and migrants regarding delivery of basic services?	3.1. How adequate and acceptable are existing basic services as perceived by Libyans and migrants?	Health		What are the main barriers that may have prevented some residents of this part of the city from accessing healthcare that meets their needs?
3. What are the perceptions and expectations of Libyans and migrants regarding delivery of basic services?	3.1. How adequate and acceptable are existing basic services as perceived by Libyans and migrants?	Health		In general, do you consider the level of healthcare provided by facilities in this part of the city to be of sufficient quality? Why or why not? How has the quality of healthcare in this part of the city changed since 2014?

3. What are the perceptions and expectations of Libyans and migrants regarding delivery of basic services?	3.1. How adequate and acceptable are existing basic services as perceived by Libyans and migrants?	Priority needs	To the best of your knowledge, what are the priority needs of most people living in this part of the city?	What steps do you believe need to be taken to improve access to or quality of healthcare for all residents of this part of the city?
3. What are the perceptions and expectations of Libyans and migrants regarding delivery of basic services?	3.2. What are the primary obstacles to accessing services, from the perspective of Libyans and migrants?	Priority needs		In general, what do you consider to be the top 3 needs of people in this part of the city? Are there any groups of people who might have different priorities (for example, men, women, children, elderly; non-displaced people, IDPs, returnees, refugees/migrants; etc.)?
3. What are the perceptions and expectations of Libyans and migrants regarding delivery of basic services?	3.2. What are the primary obstacles to accessing services, from the perspective of Libyans and migrants?	Priority needs		What are some unique qualities of this area of the city that might make meeting these priority needs easier or harder?

2.2 City-level Migrant Klls

Research questions	IN #	Data collection method	Indicator / Variable	Questionnaire question	Questionnaire Responses	Data collection level
Metadata	1	Migrant KII	Date of interview	Date of interview		City-level (Azzawya)
	2	Migrant KII	Enumerator's name or code	Enumerator name or code		City-level (Azzawya)
	3	Migrant KII	Name of data collection unit (DCU)	Name of data collection unit (DCU)	DCU1 DCU2 DCU3 DCU4 DCU5 DCU6 DCU7	City-level (Azzawya)

4	Migrant KII		Hello, my name is (name), and I work with the organisation Bassmet Amal. We are conducting a survey throughout the city of Azzawya to better understand the availability and accessibility of key services and infrastructure of migrants throughout the city of Azzawya, especially those relating to healthcare, education, markets, bakeries, and humanitarian aid. Your responses to the questions that follow will be very valuable in helping humanitarian and development actors to better understand the needs that exist in different areas of the city. We estimate that this survey will take approximately 50 minutes to complete.		City-level (Azzawya)
5	Migrant KII	Consent	Do you consent to participate in this survey?	Yes • No	City-level (Azzawya)
6	Migrant KII	Gender of interviewee	Gender of interviewee	Female • Male	City-level (Azzawya)
7	Migrant KII	Age of interviewee	Age of interviewee	18-30 • 31-64 • 65+	City-level (Azzawya)

Migrant KII	KI's neighbourhood of residence	In which neighborhood do you live?	Al-Ariwi Ouza Abou Ghelasha	
			Al-Anqar	
			Albarnawi	
			Alhaj Mohamed	
			Alhajbeya	
			Alharra	
			Al-Harsha	
			Al-Khedarwa	
			Alkhanafis	
			Arrzaka	
			Arrimha	
			Arruis	
			Azzhiwi	
			Achaib Aynouh	
			Alfassi	
			Al-kradhbiya	City lovel (Azzawya)
				City-level (Azzawya)
			Al-Mrayma	
			The teaching Hospital	
			Almotrad Amankaa	
			Abou Sorra	
			Abulssa	
			Awlad Jarboo	
			Awlad Sakr	
			Awlad Sula	
			Awlad Ajina	
			Balbi	
			Bahr Assamah	
			Ben Osman	
			Bir Arrtimat	
			Bir Terfas	
			Bir Maamer	
8			South of Al-Harsha	

	Joudaim Dila Saban Souk Al-khoudhra Souk Alsai Souk Alasr Street Al-jomla Street Jamal Abdul Nasser Shaabiyat Hay Alwehda Shabiyat Huissa Dhay Al-Helal Tariq Azzahra, Shohadaa Azzawya Qamouda Nasrat Al-Istithmar Assmariyat Sayda Zeinab Achourafaa Assabreya Adhaman Al-Iyada Al-Mujamaa Akalfat	
	Dhay Al-Helal	
	Akalfat	
	Almidan	
	Alwalani	
	Ben Youssef	
	Bir Bni Hsin	
	Street Omar Almokhta	
	Shaabiyat Al-Mouthalath	
	Abd Al-Wahed	
	Uqba ibn Nafi	

Migrant KI	KI's employment location	In which neighborhood do	Al-Ariwi	
Ū		you work?	Ouza	
		5	Abou Ghelasha	
			Al-Anqar	
			Albarnawi	
			Alhaj Mohamed	
			Alhajbeya	
			Alharra	
			Al-Harsha	
			Al-Khedarwa	
			Alkhanafis	
			Arrzaka	
			Arrimha	
			Arruis	
			Azzhiwi	
			Achaib Aynouh	
			Alfassi	
			Al-kradhbiya	City-level (Azzawya)
			Al-Mrayma	
			The teaching Hospital	
			Almotrad	
			Amankaa	
			Abou Sorra	
			Abu Issa	
			Awlad Jarboo	
			Awlad Sakr	
			Awlad Sula	
			Awlad Ajina	
			Balbi	
			Bahr Assamah	
			Ben Osman	
			Bir Arrtimat	
			Bir Terfas	
			Bir Maamer	
9			South of Al-Harsha	

		Joudaim Dila Saban Souk Al-khoudhra Souk Alsai Souk Alasr Street Al-jomla Street Jamal Abdul Nasser Shaabiyat Hay Alwehda Shabiyat Huissa	
		Sayda Zeinab Achourafaa Assabreya Adhaman Al-Iyada Al-Mujamaa Akalfat Almidan Alwalani Ben Youssef Bir Bni Hsin Street Omar Almokhta Shaabiyat Al-Mouthalath Abd Al-Wahed Uqba ibn Nafi	

10		Kis's professional occupation	What is your professional occupation?	 Baker Cleaner Construction worker Cook Driver Farmer Fisher Mechanic Merchant Metal worker Shepherd Tailor Teacher Waiter Other, please specify 	City-level (Azzawya)
----	--	----------------------------------	---------------------------------------	---	----------------------

11	Migrant KII	KI's country of origin	What is your country of origin?	1. Afghanistan 2. Algeria 3. Burkina Faso 4. Cote d'Ivoire 5. Egypt 6. Eritrea 7. Ethiopia 8. The Gambia 9. Ghana 10. Guinea-Bissau 11. Guinea-Conakry 12. Equatorial Guinea 13. Iraq 14. Mali 15. Niger 16. Nigeria 17. Palestine 18. Senegal 19. Somalia 20. Sudan 21. South Sudan 22. Syria 23. Tunisia 24. Yemen 25. Chad 97. Other: (specify)	City-level (Azzawya)
12	Migrant KII	KI's date of arrival in Libya	When did you arrive in Libya? (mm/yy)		City-level (Azzawya)

	13		KI's date of arrival in Azzawya	When did you arrive in Azzawya? (mm/yy)		City-level (Azzawya)
	14	Migrant KII	KI's household composition in Azzawya	Who do you currently live with?	I am alone here • I live here with my spouse • I live here with my spouse and children • Other (please specify) • I live with my brother/sister • I live with my friends • Prefer not to answer	City-level (Azzawya)
	15	Migrant KII	KI's region of origin	(Question for enumerator) From which region of origin is the KI from?	West Africa• East Africa • MENA	City-level (Azzawya)
1. What are the neighborhood and DCU boundaries and how are residents grouped within each in Azzawya?	16	Migrant KII	% of migrant women out of total migrant population in Azzawya	Can you estimate what proportion (%) of the migrant community from your region of origin living in Azzawya is composed by women?	0% • 10% or less • 11 -20% • 21-30% • 31- 40% • 41-50% • 51-60% • 61-70% • 71-80% • 81-90%; 91-100% • Don't know • Prefer not to answer	City-level (Azzawya)
	17	Migrant KII	% of migrant children out of total migrant population in Azzawya	Can you estimate what proportion (%) of the migrant community from your region of origin living in Azzawya is composed by children (=less than 18 years old)?	0% • 10% or less • 11 -20% • 21-30% • 31- 40% • 41-50% • 51-60% • 61-70% • 71-80% • 81-90%; 91-100% • Don't know • Prefer not to answer	City-level (Azzawya)
	18	Migrant KII	% of UASC out of migrant children population in Azzawya	<i>(if not 0%)</i> Can you estimate what proportion (%) of migrant children (from your region of origin) that live alone (not accompanied by their parents or legal guardians) in Azzawya?	0% • 10% or less • 11 -20% • 21-30% • 31- 40% • 41-50% • 51-60% • 61-70% • 71-80% • 81-90%; 91-100% • Don't know • Prefer not to answer	City-level (Azzawya)

19	Migrant KII	% of East African migrants out of total migrant population in Azzawya	Can you estimate what proportion (%) of the migrant population living in Azzawya is composed by migrants from East Africa ?	0% • 10% or less • 11 -20% • 21-30% • 31- 40% • 41-50% • 51-60% • 61-70% • 71-80% • 81-90%; 91-100% • Don't know • Prefer not to answer	City-level (Azzawya)
20	Migrant KII	% of West African migrants out of total migrant population in Azzawya	Can you estimate what proportion (%) of the migrant population living in Azzawya is composed by migrants from West Africa ?	0% • 10% or less • 11 -20% • 21-30% • 31- 40% • 41-50% • 51-60% • 61-70% • 71-80% • 81-90%; 91-100% • Don't know • Prefer not to answer	City-level (Azzawya)
21	Migrant KII	% of North African migrants out of total migrant population in Azzawya	Can you estimate what proportion (%) of the migrant population living inin Azzawya is composed by migrants from North Africa and the Middle East?	0% • 10% or less • 11 -20% • 21-30% • 31- 40% • 41-50% • 51-60% • 61-70% • 71-80% • 81-90%; 91-100% • Don't know • Prefer not to answer	City-level (Azzawya)
22	Migrant KII	% of Asian migrants out of total migrant population in Azzawya	Can you estimate what proportion (%) of the migrant population living in in Azzawya is composed by migrants from Asia ?	0% • 10% or less • 11 -20% • 21-30% • 31- 40% • 41-50% • 51-60% • 61-70% • 71-80% • 81-90%; 91-100% • Don't know • Prefer not to answer	City-level (Azzawya)
23	Migrant KII	% of migrants living alone in Azzawya	What is the proportion of migrants (from your region of origin) who live alone in Azzawya?	0% • 10% or less • 11 -20% • 21-30% • 31- 40% • 41-50% • 51-60% • 61-70% • 71-80% • 81-90%; 91-100% • Don't know • Prefer not to answer	City-level (Azzawya)
24	Migrant KII	% of migrants living with their families in Azzawya	What is the proportion of migrants (from your region of origin) who live with their families in Azzawya?	0% • 10% or less • 11 -20% • 21-30% • 31- 40% • 41-50% • 51-60% • 61-70% • 71-80% • 81-90%; 91-100% • Don't know • Prefer not to answer	City-level (Azzawya)
25	Migrant KII	Migrants' drivers to go to Azzawya	What is the most common reason why migrants (from your region of origin) come to Azzawya?	Select multiple: To work permanently • To work in seasonal jobs and then return home • To go to Europe • Other (please specify) • Don't know • Prefer not to answer	City-level (Azzawya)

26	Migrant KII	% of migrants going to Azzawya to work permanently	What proportion of migrants (from your region of origin) come to work permanently in Azzawya (long-term workers)?	0% • 10% or less • 11 -20% • 21-30% • 31- 40% • 41-50% • 51-60% • 61-70% • 71-80% • 81-90%; 91-100% • Don't know • Prefer not to answer	City-level (Azzawya)
27	Migrant KII	% of circular migrants in Azzawya	What proportion of migrants (from your region of origin) come to do seasonal work in Azzawya and then return home (circular migrants)?	0% • 10% or less • 11 -20% • 21-30% • 31- 40% • 41-50% • 51-60% • 61-70% • 71-80% • 81-90%; 91-100% • Don't know • Prefer not to answer	City-level (Azzawya)
28	Migrant KII	% of transit migrants in Azzawya	What proportion of migrants (from your region of origin) come to Azzawya to embark to Europe (transit migrants)?	0% • 10% or less • 11 -20% • 21-30% • 31- 40% • 41-50% • 51-60% • 61-70% • 71-80% • 81-90%; 91-100% • Don't know • Prefer not to answer	City-level (Azzawya)

29		Migrants' neighbourhood of residence (per region of origin)	What are the neighbourhoods where migrants (from your region of origin) live?	Select multiple: Al-Ariwi Ouza Abou Ghelasha Al-Anqar Albarnawi Alhaj Mohamed Alhajbeya Alharra Al-Harsha Al-Harsha Al-Khedarwa Al-Khedarwa Al-Khedarwa Al-Khedarwa Al-Kradha Arruis Azzhiwi Achaib Aynouh Alfassi Al-kradhbiya Al-kradhbiya Al-Mrayma The teaching Hospital Almotrad Amankaa Abou Sorra Abu Issa Awlad Jarboo Awlad Sakr Awlad Sula Awlad Ajina Balbi Bahr Assamah Ben Osman Bir Arrtimat Bir Terfas Bir Maamer	City-level (Azzawya)
----	--	---	---	---	----------------------

South of Al-Harsha
Joudaim
Dila
Saban
Souk Al-khoudhra
Souk Alsai
Souk Alasr
Street Al-jomla
Street Jamal Abdul Nasser
Shaabiyat Hay Alwehda
Shabiyat Huissa
Dhay Al-Helal
Tariq Azzahra, Shohadaa Azzawya
Qamouda
Nasrat
Al-Istithmar
Assmariyat
Sayda Zeinab
Achourafaa
Assabreya
Adhaman
Al-Iyada Al-Mujamaa
Akalfat
Almidan
Alwalani
Ben Youssef
Bir Bni Hsin
Street Omar Almokhta
Shaabiyat Al-Mouthalath
Abd Al-Wahed
Uqba ibn Nafi
Other (please specify)
Don't know
Prefer not to to answer

30		Migrants' neighbourhood of residence (per KI's region of origin)	Do migrants (from your region of origin) live in different neighbourhoods, based on their profile (long- term migrant workers / circular migrants / transit migrants) ?	Yes • No• Don't know • Prefer not to answer	City-level (Azzawya)
31	Migrant KII	Migrants' neighbourhood of residence (per KI's region of origin)	(If yes) Please specify		City-level (Azzawya)
32	Migrant KII	Migrants' employment sectors (per KI's region of origin)	In what sectors do they tend to be employed?	 Baker Cleaning Construction work Cook Driver Farmer Fisher Mechanic Merchant Metal worker Shepherd Tailor Teacher Waiter Other Don't know Don't want to answer 	City-level (Azzawya)

2. To what extent are basic services functional and accessible to residents in Azzawya?	33	Migrant KII	Type of migrants' shelters in Azzawya	What kind of shelters do migrants (from your region of origin) to live in in Azzawya?	Select multiple: Connection houses with freedom of movement • Connection houses with no freedom of movement • Apartment • House • Unfinished room(s) • Public space not usually used for shelter (school, mosque, etc.) • Private space not usually used for shelter (basement, garage, store, warehouse, work site, etc.) • Workplace • Outdoors • Don't know • Prefer not to answer • Other (please specify)	City-level (Azzawya)
	34	Migrant KII	Migrants' access to health facilities in Azzawya	Are migrants (from your region of origin) free to use the health facilities in Azzawya?	Select multiple: No, some non-Libyans face administrative access restrictions (admitted only if documented - Libyan ID, permanent Libyan residence required etc.) • No, some non-Libyans face access restrictions (not admitted to facility due to discrimination, unable to afford healthcare, etc.) • Yes, non-Libyans are free to use health facilities • Other (please specify) • Don't know • Prefer not to answer	City-level (Azzawya)
	35	Migrant KII	Migrants' barriers to access formal healthcare facilities	(if no, other types of access restrictions) What are the main restrictions that migrants (from your region of origin) face to access formal healthcare?	Select multiple: Access is allowed only if accompanied by a Libyan • Not admitted because non-Libyan (even if regular) • Unable to afford healthcare • Fear of being arrested • Unable to reach the facility because too distant • Unable to reach the facility because the road is unsafe • Language barriers • Don't know • Prefer not to answer	City-level (Azzawya)
	36	Migrant KII	Type of migrants' most commonly accessed health facilities	What are the most common health facilities that migrants (from your region of origin) access in Azzawya?	Select multiple: Public hospitals • private clinics • mobile clinics • NGO-run services • other (please specify) • Don't know • Prefer not to answer	City-level (Azzawya)

	37	Migrant KII	Type of migrants' most commonly accessed health facilities	Why? Please, clarify		City-level (Azzawya)
	38	Migrant KII	Migrants' most common medical needs in Azzawya	What are the top three most common medical needs for migrants (from your region of origin) in Azzawya?	Select multiple: Emergency care (accident/injuries) • Antibiotics • Surgery • Mental healthcare • Skilled care during childbirth • Treatment for chronic disease (diabetes, high blood pressure, heart problems, kidney problems, etc.) • Rehabilitation (for those who have recently experienced injuries) • Assistive devices (e.g. wheelchairs, prosthetics) • Nutrition assistance • Other (please specify) • Don't know • Prefer not to answer	City-level (Azzawya)
3. What are the perceptions and expectations of Libyans and migrants regarding delivery of basic services in Azzawya?	39	Migrant KII	Migrants' perceived quality in Azzawya	How would you describe the quality of healthcare for migrants (from your region of origin) in Azzawya?	Excellent • Good • Acceptable • Poor • Very poor • Don't know • Prefer not to answer	City-level (Azzawya)
,	40	Migrant KII	Migrants' perceived quality in Azzawya	Why? Please, explain		City-level (Azzawya)

2. To what extent are basic services functional and accessible to residents in Azzawya?		Migrants' greatest barrier to access healthcare in Azzawya	In your opinion, what is the greatest barrier preventing some migrants (from your region of origin) from accessing high-quality healthcare in Azzawya?	 No barriers Healthcare is available but unaffordable Non-Libyans are not allowed in healthcare facilities Only migrants from certain countries of origin are allowed in healthcare facilities (please specify which ones) Healthcare is available only in certain areas of the city not easily accessible to all migrants Migrants are offered a different treatment than Libyans Lack of facilities Access is allowed only if accompanied by a Libyan national Distance to facilities (lack of means of transportation) Lack of medical equipment Lack of medical personnel Healthcare is being provided by unqualified members of the community Unsafe for patients to travel to medical facilities Lack of female doctors Lack of information about available healthcare facilities Fear to be arrested Other (please specify) • Don't know • Prefer not to answer 	City-level (Azzawya)
--	--	--	---	---	----------------------

42	ligrant KII	Migrants' most reported barrier to access formal healthcare in Azzawya	In your opinion, what is the second greatest barrier preventing some migrants (from your region of origin) from accessing high-quality healthcare in Azzawya?	 No barriers Healthcare is available but unaffordable Non-Libyans are not allowed in healthcare facilities Only migrants from certain countries of origin are allowed in healthcare facilities (please specify which ones) Healthcare is available only in certain areas of the city not easily accessible to all migrants Migrants are offered a different treatment than Libyans Lack of facilities Access is allowed only if accompanied by a Libyan national Distance to facilities (lack of means of transportation) Lack of medical equipment Lack of medical personnel Healthcare is being provided by unqualified members of the community Unsafe for patients to travel to medical facilities Lack of female doctors Lack of information about available healthcare facilities Fear to be arrested Other (please specify) • Don't know • Prefer not to answer 	City-level (Azzawya)
----	-------------	--	--	--	----------------------

	43	Migrants' second greatest barrier to access formal healthcare in Azzawya	In your opinion, what is the third greatest barrier preventing some migrants (from your region of origin) from accessing high-quality healthcare in Azzawya?	 No barriers Healthcare is available but unaffordable Non-Libyans are not allowed in healthcare facilities Only migrants from certain countries of origin are allowed in healthcare facilities (please specify which ones) Healthcare is available only in certain areas of the city not easily accessible to all migrants Migrants are offered a different treatment than Libyans Lack of facilities Access is allowed only if accompanied by a Libyan national Distance to facilities (lack of means of transportation) Lack of medical equipment Lack of medical personnel Healthcare is being provided by unqualified members of the community Unsafe for patients to travel to medical facilities Lack of female doctors Lack of information about available healthcare facilities Fear to be arrested Other (please specify) • Don't know • Prefer not to answer 	City-level (Azzawya)
--	----	---	---	---	----------------------

4. To what extent do Libyans and migrants develop coping capacities and strategies to compensate for a lack of access to basic services in Azzawya?	44	Migrant KII	Migrants' coping mechanism to a lack of formal healthcare	How do migrants (from your region of origin) in Azzawya access healthcare when they are unable to access formal health facilities in the city?	Select multiple: Traveling to another part of the city where formal health faciliies are accessible • Go to pharmacy for advice and medication • Use alternative medicine • Resorting to individuals with no professional training • Using expired medicines • Self- medication • Other (please specify) • Don't know • Prefer not to answer	City-level (Azzawya)
	45	Migrant KII	Migrants' coping mechanism to a lack of formal healthcare	(If moving to another part of the city) With which means of transportation?	Select multiple: By foot on their own • by car on their own • by taxi on their own • With the support of a smuggler • With the support of the employer • Other (please specify) • Don't know • Prefer not to answer	City-level (Azzawya)
	46	Migrant KII	Migrants' coping mechanism to a lack of formal healthcare	Who do migrants (from your region of origin) ask for support to access healthcare, in case of lack of money?	Select multiple: Nobody, self-medication • Ask employer for help • Ask smugglers for help • Ask other migrants for help • Ask Libyan acquaintances for help • Begging • Other (please specify) • Don't know • Prefer not to answer	City-level (Azzawya)
2. To what extent are basic services functional and accessible to residents in Azzawya?		Migrant KII	Migrants' access to education facilities in Azzawya	Are migrant children (from your region of origin) free to access education in Azzawya?	Yes, migrants are free to use public educational facilities • No, some migrants face administrative access restrictions (regular status required - Libyan ID required, permanent Libyan residence required, etc.) • No, some migrants face other types of access restrictions (not admitted to school, unable to afford education, etc.) • Other (please specify) • Don't know • Prefer not to answer	City-level (Azzawya)
1	47					

	48	Migrant KII	Migrants' barriers to access formal education facilities	<i>(if no, other types of access restrictions)</i> What are the main restrictions that migrants (from your region of origin) face to access education?	Select multiple: Access is allowed only if accompanied by a Libyan • Not admitted because non-Libyan (even if legally in Libya) • Unable to afford education • Fear of being arrested • Unable to reach the facility because too distant • Unable to reach the facility because unsafe • Language barriers • Don't know • Prefer not to answer	City-level (Azzawya)
	49	Migrant KII	Type of education facilities accessed by migrants in Azzawya	What kind of facilities do migrant children (from your region of origin) tend to enrol in?	Libyan public schools • Libyan private schools • International schools • Quranic schools • Other (please specify) • Don't know • Prefer not to answer	City-level (Azzawya)
	50	Migrant KII	Differences in the type of school accessed by migrant and Libyan children	(If Libyan private or public schools) Do migrant children (from your region of origin) and Libyan children attend the same schools in Azzawya?	Yes • No • Don't know • Prefer not to answer	City-level (Azzawya)
	51	Migrant KII	Perceived safety of roads to reach education facilities in Azzawya	How safe is it for migrant children (from your region of origin) to go to school?	Always safe • Usually safe • Sometimes unsafe • Usually unsafe • Not safe at all • Other (please specify) • Don't know • Prefer not to answer	City-level (Azzawya)
	52	Migrant KII	Perceived safety of roads to reach education facilities in Azzawya	(If unsafe) Why?		City-level (Azzawya)
3. What are the perceptions and expectations of Libyans and migrants regarding delivery of basic services in Azzawya?	53	Migrant KII	Migrants' perceived education quality in Azzawya	Overall, how would you describe the quality of education provided to migrant children (from your region of origin) in the city of Azzawya?	Excellent • Good • Acceptable • Poor • Very poor • Don't know • Prefer not to answer	City-level (Azzawya)

	54		Migrants' perceived education quality in Azzawya	Why? Please, clarify		City-level (Azzawya)
2. To what extent are basic services functional and accessible to residents in Azzawya?		Migrant KII	Migrants' greatest perceived barriers to access education in Azzawya	In your opinion, what is the greatest barrier preventing migrant children (from your region of origin) in Azzawya from accessing high-quality education?	No barriers • Unable to afford education (please specify of which type of facility) • Unable to speak Arabic • Access is not allowed to any migrant children • Access to school is allowed only to migrnt children from some countries of origin (please specify) • Lack of means of transportation to reach the facility • The road to school is unsafe • Lack of information about accessible education facilities • Fear to be arrested • Not interested to access education (migrant workers) • Not enough teachers/Overcrowding in classrooms • Untrained teachers • Not enough school materials available • Lack of infrastructure in school buildings (electricity, latrines, furniture) • Cost of materials/books • School environment is insecure • Education is not seen as important • Early marriage causes children to leave school • Schools are not separated by gender • Schools are seaparated among Libyans and non-Libyans • Mismatch between Libyan schools curricula and curricula in countries of origin • Other (please specify) • Don't know • Prefer not to answer	City-level (Azzawya)
	55					

56

57	Migrant KII	Migrants' third greatest perceived barriers to access education in Azzawya	In your opinion, what is the third greatest barrier preventing migrant children (from your region of origin) in Azzawya from accessing high-quality education?	No barriers • Unable to afford education (please specify of which type of facility) • Unable to speak Arabic • Access is not allowed to any migrant children • Access to school is allowed only to migrnt children from some countries of origin (please specify) • Lack of means of transportation to reach the facility • The road to school is unsafe • Lack of information about accessible education facilities • Fear to be arrested • Not interested to access education (migrant workers) • Not enough teachers/Overcrowding in classrooms • Untrained teachers • Not enough school materials available • Lack of infrastructure in school buildings (electricity, latrines, furniture) • Cost of materials/books • School environment is insecure • Education is not seen as important • Early marriage causes children to leave school • Schools are not separated by gender • Schools are seaparated among Libyans and non-Libyans • Mismatch between Libyan schools curricula and curricula in countries of origin • Other (please specify) • Don't know • Prefer not to answer	City-level (Azzawya)
----	-------------	---	---	--	----------------------

4. To what extent do Libyans and migrants develop coping capacities and strategies to compensate for lack of access to basic services in Azzawya?	58	Migrant KII	Migrants' coping mechanism to a lack of education	What form of informal education do migrant children (from your region of origin) access in Azzawya if they cannot access formal education facilities?	Select multiple: None • Private classes offered by Libyans • Private classes offered by other migrants • Studying in religious institutions (mosque, church) • Other (please specify) • Don't know • Prefer not to answer	City-level (Azzawya)
2. To what extent are basic services functional and accessible to residents in Azzawya?	59	Migrant KII	Types of core food items bought by migrants in Azzawya	What types of core food items do migrants (from your region of origin) in Azzawya tend to buy?	Select multiple: bread • flour • rice • pasta • couscous • beans • meat • fish • eggs • milk • fresh vegetables • cooking oil • salt • sugar • Other (please specify) • Don't know • Prefer not to answer	City-level (Azzawya)
	60	Migrant KII	Types of NFIs bought by migrants in Azzawya	What types of non-food items do migrants (from your region of origin) in Azzawya tend to buy?	Select multiple: fuel • cooking fuel • hygiene items • bottled water • cooking utensils • clothing • shoes • blankets • Other (please specify) • Don't know • Prefer not to answer	City-level (Azzawya)
	61	Migrant KII	Perceived ease in accessing items in Azzawya	Is it easy for migrants (from your region of origin) to buy core food and non-food items across the city?	Yes • No • Don't know • Prefer not to answer	City-level (Azzawya)

62	Migrant KII	Names of most difficult neighbourhoods where to buy items in Azzawya	(<i>If not</i>) What are the neighbourhoods in Azzawya where it is most difficult for migrants (from your region of origin) to buy core food and non-food items?	Select multiple: Al-Ariwi Ouza Abou Ghelasha Al-Anqar Albarnawi Alhaj Mohamed Alhaj Mohamed Alhajbeya Alharra Al-Harsha Al-Khedarwa Al-Khedarwa Al-Khedarwa Al-Khedarwa Al-Khedarwa Al-Kradna Arruis Azzhiwi Achaib Aynouh Alfassi Al-kradhbiya Al-Mrayma The teaching Hospital Almotrad Amankaa Abou Sorra Abu Issa Awlad Jarboo Awlad Sakr Awlad Sula Awlad Ajina Balbi Bahr Assamah Ben Osman Bir Arrtimat Bir Terfas Bir Maamer	City-level (Azzawya)
----	-------------	--	---	--	----------------------

		South of Al-Harsha	
		Joudaim	
		Dila	
		Saban	
		Souk Al-khoudhra	
		Souk Alsai	
		Souk Alasr	
		Street Al-jomla	
		Street Jamal Abdul Nasser	
		Shaabiyat Hay Alwehda	
		Shabiyat Huissa	
		Dhay Al-Helal	
		Tariq Azzahra, Shohadaa Azzawya	
		Qamouda	
		Nasrat	
		Al-Istithmar	
		Assmariyat	
		Sayda Zeinab	
		Achourafaa	
		Assabreya	
		Adhaman	
		Al-Iyada Al-Mujamaa	
		Akalfat	
		Almidan	
		Alwalani	
		Ben Youssef	
		Bir Bni Hsin	
		Street Omar Almokhta	
		Shaabiyat Al-Mouthalath	
		Abd Al-Wahed	
		Uqba ibn Nafi	
		Other (please specify)	
		Don't know	
		Prefer not to to answer	

63	Migrant KII	Most difficult neighbourhoods where to buy items in Azzawya	(<i>If not</i>) Why? Please, clarify if this refers to both food and non food items		City-level (Azzawya)
64	Migrant KII	Migrants' greatest expenditure	What is the greatest expenditure of migrants (from your region of origin) in Azzawya?	Food • water • fuel • non-food items • transportation (including smuggler) • healthcare • education • shelter • other (please specify) • Don't know • Prefer not to answer	City-level (Azzawya)
65	Migrant KII	Migrants' second greatest expenditure	What is the second greatest expenditure of migrants (from your region of origin) in Azzawya?	Food • water • fuel • non-food items • transportation (including smuggler) • healthcare • education • shelter • other (please specify) • Don't know • Prefer not to answer	City-level (Azzawya)
66	Migrant KII	Migrants' third greatest expenditure	What is the third greatest expenditure of migrants (from your region of origin) in Azzawya?	Food • water • fuel • non-food items • transportation (including smuggler) • healthcare • education • shelter • other (please specify) • Don't know • Prefer not to answer	City-level (Azzawya)
67	Migrant KII	Migrants' greatest priority need	What is the greatest priority need for migrants (from your region of origin) in Azzawya?	Food • water • fuel • non-food items • transportation (including smuggler) • saving for an emergency situation • sending money home • healthcare • education • shelter • other (please specify) • Don't know • Prefer not to answer	City-level (Azzawya)
68	Migrant KII	Migrants' second greatest priority need	What is the second greatest priority need of migrants (from your region of origin) in Azzawya?	Food • water • fuel • non-food items • transportation (including smuggler) • saving for an emergency situation • healthcare • education • shelter • other (please specify) • Don't know • Prefer not to answer	City-level (Azzawya)
69	Migrant KII	Migrants' third greatest priority need	What is the third greatest priority need of migrants (from your region of origin) in Azzawya?	Food • water • fuel • non-food items • transportation (including smuggler) • saving for an emergency situation • sending money home • healthcare • education • shelter • other (please specify) • Don't know • Prefer not to answer	City-level (Azzawya)

70	Migrant KII	Migrants' perceived ability to meet their basic needs	Has the ability of migrants (from your region of origin) to meet their basic needs changed since the beginning of 2018?	Yes, its more difficult now • Yes, it's easier now • No, it's the same • Other (please specify) • Don't know • Prefer not to answer	City-level (Azzawya)
71	Migrant KII	Migrants' perceived ability to meet their basic needs	(If it's more difficult now) For what reasons do you believe this has happened?	Select multiple: Higher prices • Employers give work but does not pay • Insecurity (robbery) • Employer has no access to cash • Other (please specify) • Don't know • Prefer not to answer	City-level (Azzawya)
72	Migrant KII	Migrants' perceived ability to meet their basic needs	<i>(If it's easier now)</i> For what reasons do you believe this has happened?		City-level (Azzawya)
73	Migrant KII	Variation in migrants' ability to save money in the previous year	Has migrants' ability to save money changed since the beginning of 2018?	No, it's the same • Yes, its more difficult now • Yes, it's easier now • Other (please specify) • Don't know • Prefer not to answer	City-level (Azzawya)
74	Migrant KII	Reasons behind any changes in migrants' ability to save money in the previous year	(If it's more difficult now) For what reasons do you believe this has happened?	Select multiple: Higher prices • currency depreciation • Employers give work but does not pay • Insecurity (robbery) • Employer has no access to cash • Other (please specify) • Don't know • Prefer not to answer	City-level (Azzawya)
75	Migrant KII	Reasons behind any changes in migrants' ability to save money in the previous year	<i>(If it's easier now)</i> For what reasons do you believe this has happened?		City-level (Azzawya)
76	Migrant KII	Reasons behind any changes in migrants' ability to send remittances back home in the previous year	Has the ability of migrants (from your region of origin) to send money back home changed since the beginning of 2018?	No, it's the same • Yes, its more difficult now • Yes, it's easier now • Other (please specify) • Don't know • Prefer not to answer	City-level (Azzawya)

	77	Migrant KII	Reasons behind any changes in migrants' ability to send remittances back home in the previous year	(if yes) For what reasons do you believe this happened?		City-level (Azzawya)
	78	Migrant KII	Type of payment used by migrants to buy items	What types of payment do migrants (from your region of origin) use to buy core food and non food items?	Select_multiple: Cash • Certified Store credit • In-kind • Mobile money • Other (please specify) • Prefer not to answer	City-level (Azzawya)
4. To what extent do Libyans and migrants develop coping capacities and strategies to compensate for lack of access to basic services in Azzawya?		Migrant KII	Coping mechanisms to migrants' lack of economic means	How do migrants (from your region of origin) do when they are unable to access enough cash to make their payments in full?	Select multiple: Get debt from shop owner • Borrow money from friends • Pay in kind • Begging • Borrow from employer • Find employment offering food • Ask the mosque / church for help • Ask local NGO for help •Ask international organisation for help • Other, please specify • Don't know • Prefer not to answer	City-level (Azzawya)
	79					

80	2. To what extent are basic services Migrant KII Migrants' greatest barrier that prevents In your opinion, what is the greatest barrier that prevents No barriers • Migrants are not accepted (discrimination) • Migrants pay more for the same items than Libyans • Linguistic barriers • Unsafe for migrants to shop in some parts of the city • Access to some stores not allowed to migrants • Access to some stores not allowed to migrants • Access to some stores not allowed to some migrant groups (please specify) • Deterioration of economic means to meet basic needs • Market items are available, but are too expensive • Libyan markets do not offer items that migrants use • Stores or marketplaces are closed or non-functional • Access to marketplaces are functioning, but at unpredictable times • Insecurity or checkpoints make it difficult to access markets • Other (please specify) • Don't know • Prefer not to answer City-level (Azzaw)	ya)
----	---	-----

81	Migrant KII	Migrants' second greatest barrier to buying the items they need in Azzawya	In your opinion, what is the second greatest barrier that prevents migrants (from your region of origin) from being able to buy the items they need In Azzawya?	No barriers • Migrants are not accepted (discrimination) • Migrants pay more for the same items than Libyans • Linguistic barriers • Unsafe for migrants to shop in some parts of the city • Access to some stores not allowed to migrants • Access to some stores not allowed to some migrant groups (please specify) • Deterioration of economic means to meet basic needs • Market items are sometimes not available • Market items are available, but are too expensive • Libyan markets do not offer items that migrants use • Stores or marketplaces are closed or non-functional • Access to marketplaces is unsafe • Fear to be arrested • Stores or marketplaces are functioning, but at unpredictable times • Insecurity or checkpoints make it difficult to access markets • Other (please specify) • Don't know • Prefer not to answer	City-level (Azzawya)
81					

8		Migrants' third greatest barrier to buying the items they need in Azzawya	In your opinion, what is the third greatest barrier that prevents migrants (from your region of origin) from being able to buy the items they need In Azzawya?	No barriers • Migrants are not accepted (discrimination) • Migrants pay more for the same items than Libyans • Linguistic barriers • Unsafe for migrants to shop in some parts of the city • Access to some stores not allowed to migrants • Access to some stores not allowed to some migrant groups (please specify) • Deterioration of economic means to meet basic needs • Market items are sometimes not available • Market items are available, but are too expensive • Libyan markets do not offer items that migrants use • Stores or marketplaces are closed or non-functional • Access to marketplaces is unsafe • Fear to be arrested • Stores or marketplaces are functioning, but at unpredictable times • Insecurity or checkpoints make it difficult to access markets • Other (please specify) • Don't know • Prefer not to answer	City-level (Azzawya)
8	Migrant KII	Migrants'access to bread by the bag	Do migrants (from your region of origin) buy bread by the bag in Azzawya?	Yes • No • Don't know • Prefer not to answer	City-level (Azzawya)
8	Migrant KII	Bread prices paid by migrants in Azzawya	<i>(if yes)</i> How much, in LYD, do they pay for a standard bag of wheat bread?		City-level (Azzawya)
8	5	Number of bread pieces in a bag	<i>(if yes)</i> How many pieces of bread are included in a standard bag?		City-level (Azzawya)
8	Ū	Price per bread piece	<i>(if no)</i> How much, in LYD, do migrants pay for a standard piece of bread?		City-level (Azzawya)

87	Migrant KII	Awareness of NGOs distributing food in Azzawya	Are you aware of any governmental organisations that have been distributing core food, non-food items or cash to migrants (from your region of origin) in Azzawya?	Yes • No • Don't know • Prefer not to answer	City-level (Azzawya)
88	Migrant KII	Names of NGOs distributing food in Azzawya	<i>(if yes)</i> Which organisations? To the best of your knowledge, what did they do, and where?		City-level (Azzawya)
89	Migrant KII	Type of NGOs supporting migrants in Azzawya	What types of aid organisations are active in Azzawya providing aid to migrants (from your region of origin)?	Select multiple: No organisations actively provide aid • Religious organisation • Libyan NGO or civil society organisation • International NGO • United Nations or other international agency • Migrant association • Other (please specify) • Don't know • Prefer not to answer	City-level (Azzawya)
90	Migrant KII	Type of humanitarian support offered to migrants in Azzawya	What types of humanitarian aid is provided to migrants (from your region of origin) in the city of Azzawya?	Select multiple: None • Food • Non-food items (NFIs) • Shelter • Water • Sanitation or hygiene • Health • Education • Protection • Cash-based interventions • Other (please specify)	City-level (Azzawya)
91	Migrant KII	Frequency of humanitarian support offered to migrants in Azzawya	(if food, non-food items, sanitation or hygieneand cash-based interventions) Within the past three months, have any migrants (from your region of origin) of Azzawya, or any organisations within Azzawya, received food- related assistance from aid organisations?	Yes • No • Don't know • Prefer not to answer	City-level (Azzawya)

92	Migrant KII	Groups of migrants targeted to receive humanitarian support in Azzawya	<i>(if food and cash-based interventions)</i> Did this food assistance target a specific part of the migrant population (from your region of origin)?	Migrants in detention centres • Migrants in urban settings • No specific groups • Other (please specify) • Don't know • Prefer not to answer	City-level (Azzawya)
93	Migrant KII	Type of food assistance provided to migrants	(if food and cash-based interventions) What type of food assistance was provided to migrants (from your region of origin)?	Select multiple: Food baskets • Dry rations • Hot meals (on site) • Cash to purchase food • Vouchers to purchase food • Other (please specify) • Don't know • Prefer not to answer	City-level (Azzawya)
94	Migrant KII	Frequency of food aid in Azzawya	<i>(if food)</i> Was this food assistance provided as part of a one-time intervention or a recurring/ongoing series of interventions?	One-time • Recurring • Other (please specify) • Don't know • Prefer not to answer	City-level (Azzawya)
95	Migrant KII	Frequency of education- related aid in Azzawya	<i>(if education)</i> Within the past three months, have any migrants (from your region of origin) in Azzawya-received education-related assistance from aid organisations?	Yes • No • Don't know • Prefer not to answer	City-level (Azzawya)
96	Migrant KII	Population groups targeted by education- related aid	<i>(if education)</i> Did this education assistance target a specific part of the population?	Select multiple: Migrant children in detention centres • Migrant children in urban settings • No specific groups • Other (please specify) • Don't know • Prefer not to answer	City-level (Azzawya)
97	Migrant KII	Type of education- related aid provided to migrants	<i>(if education)</i> What type of education assistance was provided to migrants (from your region of origin)?	Select multiple: Remedial education or catch- up classes • Recreational activities for children • Child-friendly spaces • Vocational training • Provision of school supplies to children • Provision of educational items • Cash • Vouchers • Other (please specify) • Don't know • Prefer not to answer	City-level (Azzawya)

98		Frequency of education- related aid in Azzawya	<i>(if education)</i> Was this education assistance provided as part of a one- time intervention or a recurring/ongoing series of interventions?	One-time • Recurring • Other (please specify) • Don't know • Prefer not to answer	City-level (Azzawya)
99		Frequency of healthcare- related aid in Azzawya	<i>(if healthcare)</i> Within the past three months, have migrants (from your region of origin) in Azzawya received any health-related assistance from aid organisations?	Yes • No • Don't know • Prefer not to answer	City-level (Azzawya)
100	Migrant KII	Population groups targeted by health- related aid	<i>(if healthcare)</i> Did this health assistance target a specific part of the population?	Select multiple: No specific groups • Migrants in detention centres • Migrants in urban settings • Other (please specify) • Don't know • Prefer not to answer	City-level (Azzawya)
101	Migrant KII	Type of healthcare- related aid in Azzawya	<i>(if healthcare)</i> What type of health assistance was provided?	Select multiple: Emergency care (accident/injuries) • Antibiotics • Surgery • Mental healthcare • Skilled care during childbirth • Treatment for chronic disease (diabetes, high blood pressure, heart problems, kidney problems, etc.) • Rehabilitation (for those who have recently experienced injuries) • Assistive devices (e.g. wheelchairs, prosthetics) • Nutrition assistance • Other (please specify) • Don't know • Prefer not to answer	City-level (Azzawya)
102	Migrant KII	Frequency of healthcare- related aid in Azzawya	(if healthcare) Was this health assistance provided as part of a one-time intervention or a recurring/ongoing series of interventions?	One-time • Recurring • Other (please specify) • Don't know • Prefer not to answer	City-level (Azzawya)

PHASE 3

3.1 Klls with Libyan service providers

Research questions	Sub-research questions	#	Indicator group / sector	Indicator / Variable	Questionnaire Question	Instruction s	Questionnaire Responses	Sampling
N/A	N/A	1	Education	Interviewee gender	Gender of interviewee	Select one	Female • Male	Purposive/Snowballing
N/A	N/A	2	Education	Interviewee age	Age of interviewee	Select one	18-30 • 31-64 • 65+	Purposive/Snowballing
N/A	N/A	3	Education	Interviewee place of residence	In which neighborhood do you live?	Select one	Neighborhood list from Phase 1	Purposive/Snowballing
N/A	N/A	4	Education	Interviewee place of work	In which neighborhood do you work?	Select one	Neighborhood list from Phase 1	Purposive/Snowballing
N/A	N/A	5	Education	Interviewee position	What is your role at this educational facility?	Text		Purposive/Snowballing
N/A	N/A	6	Education	Category of the KI	(Question for enumerator) Which of the following categories does this KI fall into?	Select one	City-level education official or administrator • Teacher, classroom assistant, etc.	Purposive/Snowballing
N/A	N/A	7	Education	Type of education facility	<i>(if teacher)</i> In what type of educational facility do you work?	Select one	Public • Private • Informal • Religious • Other (please specify)	Purposive/Snowballing
N/A	N/A	8	Education	Level of education	<i>(if teacher)</i> What level of education do you specialise in?	Select one	Primary school • Secondary school	Purposive/Snowballing
N/A	N/A	9	Education	Children with specific needs/characteri stics	<i>(if teacher)</i> Do you specialise in teaching a particular type of children (special needs, etc.)?	Text		Purposive/Snowballing

2. To what extent are basic services functional and accessible for residents?	2.1. Where are operational services (schools, health centers, markets, bakeries, external aid) by DCU?	10	Education	# of functional primary schools in the city	<i>(if administrator)</i> How many functional primary schools would you estimate are present in the city of Azzawya?	Integer	Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.1. Where are operational services (schools, health centers, markets, bakeries, external aid) by DCU?	11	Education	# of functional primary schools in the neighborhood	<i>(if teacher)</i> How many functional primary schools are present in your neighbourhood?	Integer	Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.2. What are the primary obstacles to delivering services, from the perspective of service providers?	12	Education	# of non- operational primary schools in the city	<i>(if administrator)</i> How many non-operational primary schools would you estimate are present in the city of Azzawya, if any?	Integer	Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.2. What are the primary obstacles to delivering services, from the perspective of service providers?	13	Education	Reasons of non operationality	(<i>if</i> > 0) For what reasons are these facilities not functioning?	Text	Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.2. What are the primary obstacles to delivering services, from the perspective of service providers?	14	Education	# of non- operational primary schools in the neighborhood	<i>(if teacher)</i> How many non-operational primary schools are present in your neighbourhood, if any?	Integer	Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.2. What are the primary obstacles to delivering services, from the perspective of service providers?	15	Education	Reasons of non operationality	(<i>if</i> > 0) For what reasons are these facilities not functioning?	Text	Purposive/Snowballing

2. To what extent are basic services functional and accessible for residents?	2.1. Where are operational services (schools, health centers, markets, bakeries, external aid) by DCU?	16	Education	# of functional secondary schools in the city	<i>(if administrator)</i> How many functional secondary schools would you estimate are present in the city of Azzawya?	Integer	Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.1. Where are operational services (schools, health centers, markets, bakeries, external aid) by DCU?	17	Education	# of functional secondary schools in the neighborhood	<i>(if teacher)</i> How many functional secondary schools are present in your neighbourhood?	Integer	Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.2. What are the primary obstacles to delivering services, from the perspective of service providers?	18	Education	# of non- operational secondary schools in the city	(if administrator) How many non-operational secondary schools would you estimate are present in the city of Azzawya, if any?	Integer	Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.2. What are the primary obstacles to delivering services, from the perspective of service providers?	19	Education	Reasons of non operationality	(<i>if</i> > 0) For what reasons are these facilities not functioning?	Text	Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.2. What are the primary obstacles to delivering services, from the perspective of service providers?	20	Education	# of non- operational secondary schools in the neighborhood	<i>(if teacher)</i> How many non-operational secondary schools are present in your neighbourhood, if any?	Integer	Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.2. What are the primary obstacles to delivering services, from the perspective of service providers?	21	Education	Reasons of non operationality	(<i>if</i> > 0) For what reasons are these facilities not functioning?	Text	Purposive/Snowballing

2. To what extent are basic services functional and accessible for residents?2. To what extent are basic	2.1. Where are operational services (schools, health centers, markets, bakeries, external aid) by DCU? 2.1. Where are	22	Education	% of IDP children attending school in the city	(if administrator) Can you estimate what percentage of children attending schools in Azzawya come from IDP households?	Integer Select one	Neighborhood list	Purposive/Snowballing
services functional and accessible for residents?	operational services (schools, health centers, markets, bakeries, external aid) by DCU?	23	Education		<i>(if administrator)</i> Do these IDP children tend to be concentrated in particular areas of the city? If so, which areas?	Select one	Neighborhood list from Phase 1	Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.1. Where are operational services (schools, health centers, markets, bakeries, external aid) by DCU?	24	Education	% of returnee children attending school in the city	<i>(if administrator)</i> Can you estimate what percentage of children attending schools in Azzawya come from returnee households?	Integer		Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.1. Where are operational services (schools, health centers, markets, bakeries, external aid) by DCU?	25	Education		(if administrator) Do these returnee children tend to be concentrated in particular areas of the city? If so, which areas?	Select one	Neighborhood list from Phase 1	Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.1. Where are operational services (schools, health centers, markets, bakeries, external aid) by DCU?	26	Education	% of non- Libyans children attending school in the city	<i>(if administrator)</i> Can you estimate what percentage of children attending schools in Azzawya come from non-Libyan households, including refugees and migrants?	Integer		Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.1. Where are operational services (schools, health centers, markets, bakeries, external aid) by DCU?	27	Education	Repartition of non-Libyans children per area	(if administrator; if > 0) Do these non-Libyan children tend to be concentrated in particular areas of the city? If so, which areas?	Select one	Neighborhood list from Phase 1	Purposive/Snowballing

2. To what extent are basic services functional and accessible for residents?	2.2. What are the primary obstacles to delivering services, from the perspective of service providers?	28	Education	Restrictions for non-Libyans children to access schools in Azzawya	(<i>if administrator; if = 0</i>) Are non-Libyan children, including refugees and migrants, free to use educational facilities in Azzawya?	Select multiple	Yes, non-Libyans are free to use educational facilities • No, some non-Libyans face administrative access restrictions (Libyan ID required, permanent Libyan residence required, etc.) • No, some non-Libyans face other types of access restrictions (not admitted to school, unable to afford education, etc.) • Other (please specify) • Don't know • Prefer not to answer	Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.2. What are the primary obstacles to delivering services, from the perspective of service providers?	29	Education	Reasons for non- access in Azzawya	<i>(if no or other)</i> Please clarify your response.	Text		Purposive/Snowballing

2. To what extent are basic services functional and accessible for residents?	2.2. What are the primary obstacles to delivering services, from the perspective of service providers?	30	Education	Restrictions for non-Libyans children to access the school	<i>(if teacher)</i> Are non- Libyan children, including refugees and migrants, free to use the educational facility where you work?	Select multiple	Yes, non-Libyans are free to use educational facilities • No, some non-Libyans face administrative access restrictions (Libyan ID required, permanent Libyan residence required, etc.) • No, some non-Libyans face other types of access restrictions (not admitted to school, unable to afford education, etc.) • Other (please specify) • Don't know • Prefer not to answer	Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.2. What are the primary obstacles to delivering services, from the perspective of service providers?	31	Education	Reasons for non- access to the school	(if no or other) Please clarify your response.	Text		Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.1. Where are operational services (schools, health centers, markets, bakeries, external aid) by DCU?	32	Education	% of non- displaced Libyans children attending school in the city	<i>(if administrator)</i> Can you estimate what percentage of children attending schools in Azzawya come from households that have never been displaced?	Integer		Purposive/Snowballing

2. To what extent are basic services functional and accessible for residents?	2.2. What are the primary obstacles to delivering services, from the perspective of service providers?	33	Education	Access to educational/peda gogical materials	<i>(if teacher)</i> Do you have access to all the pedagogical and/or educational materials you need to teach effectively?	Select one	Yes • No • Prefer not to answer	Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.2. What are the primary obstacles to delivering services, from the perspective of service providers?	34	Education	Type of missing materials	<i>(if no)</i> What types of materials are you missing?	Text		Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.2. What are the primary obstacles to delivering services, from the perspective of service providers?	35	Education	Cause of missing materials	<i>(if no)</i> In your opinion, what has been the root cause of these challenges?	Text		Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.2. What are the primary obstacles to delivering services, from the perspective of service providers?	36	Education provider	Functionality	Are there any educational facilities in the city that have particular issues with shortages of equipment or school supplies (desks, books, blackboards, etc.)?	Select one	Yes • No • Don't know • Prefer not to answer	Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.2. What are the primary obstacles to delivering services, from the perspective of service providers?	37	Education provider	Functionality	Please clarify which facilities are affected and what major needs you are aware of.	Text		Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.2. What are the primary obstacles to delivering services, from the perspective of service providers?	38	Education provider	Functionality	Are there any educational facilities in the city that have particular issues with shortages of female staff?	Select one	Yes • No • Don't know • Prefer not to answer	Purposive/Snowballing

2. To what extent are basic services functional and accessible for residents?	2.2. What are the primary obstacles to delivering services, from	39	Education provider	Functionality	Please clarify which facilities are affected, where, and what major	Text		Purposive/Snowballing
	the perspective of service providers?				needs you are aware of.			
2. To what extent are basic services functional and accessible for residents?	2.2. What are the primary obstacles to delivering services, from the perspective of service providers?	40	Education provider	Functionality	Are there any educational facilities in the city that have particular issues with shortages of female staff?	Select one	Yes • No • Don't know • Prefer not to answer	Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.2. What are the primary obstacles to delivering services, from the perspective of service providers?	41	Education provider	Functionality	Please clarify which facilities are affected and what major needs you are aware of.	Text		Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.2. What are the primary obstacles to delivering services, from the perspective of service providers?	42	Education provider	Functionality	Are there any educational facilities in the city that have particular issues with shortages of male staff?	Select one	Yes • No • Don't know • Prefer not to answer	Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.2. What are the primary obstacles to delivering services, from the perspective of service providers?	43	Education provider	Functionality	Please clarify which facilities are affected and what major needs you are aware of.	Text		Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.2. What are the primary obstacles to delivering services, from the perspective of service providers?	44	Education provider	Access	Are there any educational facilities in the city located in insecure environments?	Select one	Yes • No • Don't know • Prefer not to answer	Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.2. What are the primary obstacles to delivering services, from the perspective of service providers?	45	Education provider	Access	Please clarify which facilities are affected, in what ways, and where.	Text		Purposive/Snowballing

2. To what extent are basic services functional and accessible for residents?	2.2. What are the primary obstacles to delivering services, from the perspective of service providers?	46	Education provider	Access	Are there any educational facilities in the area that are sometimes difficult to access due to roadblocks, fighting, or access restrictions that affect certain groups of people?	Select one	Yes • No • Don't know • Prefer not to answer	Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.2. What are the primary obstacles to delivering services, from the perspective of service providers?	47	Education provider	Access	Please clarify which facilities, where, and which groups of people are affected.	Select one		Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.2. What are the primary obstacles to delivering services, from the perspective of service providers?	48	Education provider	Access	<i>(if teacher)</i> How safe are the main routes that most children take to reach your school?	Select one	Always safe • Usually safe • Sometimes unsafe • Usually unsafe • Not safe at all • Other (please specify) • Don't know • Prefer not to answer	Purposive/Snowballing
3. What are the perceptions and expectations of Libyans and migrants regarding delivery of basic services?	3.1. How adequate and acceptable are existing basic services?	49	Education provider	Barriers to access	Overall, how would you describe the quality of education in the city of Azzawya?	Select one	Excellent • Good • Acceptable • Poor • Very poor • Don't know • Prefer not to answer	Purposive/Snowballing
3. What are the perceptions and expectations of Libyans and migrants regarding delivery of basic services?	3.1. How adequate and acceptable are existing basic services?	50	Education provider	Barriers to access	In your opinion, has the quality of education in Azzawya changed since the beginning of 2018?	Select one	Increased • Stayed the same • Decreased • Other (please specify) • Don't know • Prefer not to answer	Purposive/Snowballing
3. What are the perceptions and expectations of Libyans and migrants regarding	3.1. How adequate and acceptable are existing basic services?	51	Education provider	Barriers to access	(<i>if increase, decrease, or other</i>) What are the reasons for this change?	Text		

delivery of basic services?							
3. What are the perceptions and expectations of Libyans and migrants regarding delivery of basic services?	3.2. What are the primary obstacles to accessing services?	52	Education provider	Barriers to access	In your opinion, what are the 3 main barriers preventing children in Azzawya from accessing high-quality education?	Select multiple	
		53	Education provider	Coping mechanisms	What do parents do when their children are unable to access education via formal schools in Azzawya?	Text	 Purposive/Snowballing
		54	Education provider	Coping mechanisms	What do parents do when the education available in their part of Azzawya is insufficient to meet their children's needs?	Text	Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.2. What are the primary obstacles to delivering services, from the perspective of service providers?	55	Education provider	Barriers to access	What are the main improvements that could help expand children's access to high-quality education?	Text	Purposive/Snowballing

2. To what extent are basic services functional and accessible for residents?	2.2. What are the primary obstacles to delivering services, from the perspective of service providers?	56	Education provider	Barriers to access	From your perspective, what are the 3 main barriers to delivering high-quality education in Azzawya?	Select multiple	No barriers • Not enough teachers/Overcrow ding in classrooms • Untrained teachers • Not enough school materials available • Lack of infrastructure in school buildings (electricity, latrines, furniture) • Cost of materials/books • School environment is insecure • Education is not seen as important • Schools are not separated by gender • Other (please specify) • Don't know • Prefer not to answer	Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.2. What are the primary obstacles to delivering services, from the perspective of service providers?	57	Education provider	Barriers to access	What are the main improvements that could help you do your work more effectively?	Text		Purposive/Snowballing
N/A	N/A	58	Healthcar e	Interviewee gender	Gender of interviewee	Select one	Female • Male	Purposive/Snowballing
N/A	N/A	59	Healthcar e	Interviewee age	Age of interviewee	Select one	18-30 • 31-64 • 65+	Purposive/Snowballing
N/A	N/A	60	Healthcar e	Interviewee place of residence	In which neighborhood do you live?	Select one	Neighborhood list from Phase 1	Purposive/Snowballing

N/A	N/A	61	Healthcar e	Interviewee place of work	In which neighborhood do you work?	Select one	Neighborhood list from Phase 1	Purposive/Snowballing
N/A	N/A	62	Healthcar e	Interviewee position	What is your role at this healthcare facility?	Text		Purposive/Snowballing
N/A	N/A	63	Healthcar e	Category of the KI	(Question for enumerator) Which of the following categories does this KI fall into?	Select one	City-level health official or administrator • Medical professional (doctor, nurse, etc.)	Purposive/Snowballing
N/A	N/A	64	Healthcar e	Type of health facility	(if medical professional) In what type of health facility do you work?	Select one	Hospital • Mobile clinic/field hospital • Informal emergency care point • Private clinic • Other private care facility • Pharmacy • Other (please specify)	Purposive/Snowballing
N/A	N/A	65	Healthcar e	Medicine field	(if medical professional) In what field of medicine do you work?	Text		Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.1. Where are operational services (schools, health centers, markets, bakeries, external aid) by DCU?	66	Healthcar e	# of functional healthcare facilities in the city	(if administrator) How many functional healthcare facilities (hospitals, clinics, etc.) would you estimate are present in the city of Azzawya?	Integer		Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.1. Where are operational services (schools, health centers, markets, bakeries, external aid) by DCU?	67	Healthcar e	# of functional healthcare facilities in the neighborhood	(if medical professional) How many functional healthcare facilities (hospitals, clinics, etc.) would you estimate are present in your	Integer		Purposive/Snowballing

					neighbourhood?			
2. To what extent are basic services functional and accessible for residents?	2.1. Where are operational services (schools, health centers, markets, bakeries, external aid) by DCU?	68	Healthcar e	Sites with specialists	Which of these sites offer specialist care? (Cardiologists, emergency medicine specialists, infectious disease specialists, neurologists, obstetricians and gynecologists, ophthalmologists, pediatricians, psychiatrists, radiologists	Select multiple	Neighborhood list from Phase 1	Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.1. Where are operational services (schools, health centers, markets, bakeries, external aid) by DCU?	69	Healthcar e	Sites with maternal care	Which of these sites offer maternal care?	Select multiple	Neighborhood list from Phase 1	Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.1. Where are operational services (schools, health centers, markets, bakeries, external aid) by DCU?	70	Healthcar e	Site with trauma care	Which of these sites offer trauma care?	Select multiple	Neighborhood list from Phase 1	Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.2. What are the primary obstacles to delivering services, from the perspective of service providers?	71	Healthcar e	# of non- operational healthcare facilities in the city	<i>(if administrator)</i> How many non-operational healthcare facilities (hospitals, clinics, etc.) would you estimate are present in the city of Azzawya, if any?	Integer		Purposive/Snowballing

2. To what extent are basic services functional and accessible for residents?	2.2. What are the primary obstacles to delivering services, from the perspective of service providers?	72	Healthcar e	Reasons of non operationality	(<i>if</i> > 0) For what reasons are these facilities not functioning?	Text		Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.2. What are the primary obstacles to delivering services, from the perspective of service providers?	73	Healthcar e	# of non- operational healthcare facilities in the neighborhood	<i>(if medical professional)</i> How many non- operational healthcare facilities (hospitals, clinics, etc.) would you estimate are present in your neighbourhood, if any?	Integer		Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.2. What are the primary obstacles to delivering services, from the perspective of service providers?	74	Healthcar e	Reasons of non operationality	(<i>if</i> > 0) For what reasons are these facilities not functioning?	Text		Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.2. What are the primary obstacles to delivering services, from the perspective of service providers?	75	Healthcar e	Shortages of medicine	Are there any health facilities in the area that have particular issues with shortages of medicine?	Select one	Yes • No • Don't know • Prefer not to answer	Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.2. What are the primary obstacles to delivering services, from the perspective of service providers?	76	Healthcar e	Facilities with shortages of medicine	Please clarify which facilities are affected and what major needs you are aware of.	Text		Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.2. What are the primary obstacles to delivering services, from the perspective of service providers?	77	Healthcar e	Shortages of equipment or medical supplies	Are there any health facilities in the area that have particular issues with shortages of equipment (beds, examination machines, etc.) or medical supplies	Select one	Yes • No • Don't know • Prefer not to answer	Purposive/Snowballing

					(bandages, needles, etc.)?			
2. To what extent are basic services functional and accessible for residents?	2.2. What are the primary obstacles to delivering services, from the perspective of service providers?	78	Healthcar e	Facilities with shortages of equipement or medical supplies	Please clarify which facilities are affected and what major needs you are aware of.	Text		Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.2. What are the primary obstacles to delivering services, from the perspective of service providers?	79	Healthcar e	Shortages of female staff	Are there any health facilities in the area that have particular issues with shortages of female staff?	Select one	Yes • No • Don't know • Prefer not to answer	Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.2. What are the primary obstacles to delivering services, from the perspective of service providers?	80	Healthcar e	Facilities affected by female staff shortages	Please clarify which facilities are affected and in what ways.	Text		Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.2. What are the primary obstacles to delivering services, from the perspective of service providers?	81	Healthcar e	Shortages of male staff	Are there any health facilities in the area that have particular issues with shortages of male staff?	Select one	Yes • No • Don't know • Prefer not to answer	Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.2. What are the primary obstacles to delivering services, from the perspective of service providers?	82	Healthcar e	Facilities affected by male staff shortages	Please clarify which facilities are affected and in what ways.	Text		Purposive/Snowballing

2. To what extent are basic services functional and accessible for residents?	2.2. What are the primary obstacles to delivering services, from the perspective of service providers?	83	Healthcar e	Insecure environment	Are there any health facilities in the area located in insecure environments?	Select one	Yes • No • Don't know • Prefer not to answer	Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.2. What are the primary obstacles to delivering services, from the perspective of service providers?	84	Healthcar e	Facilities affected by insecure environment	Please clarify which facilities are affected and in what ways.	Text		Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.2. What are the primary obstacles to delivering services, from the perspective of service providers?	85	Healthcar e	Access restrictions to certain groups of population to travel	Are there any health facilities in the area that are sometimes difficult to access due to roadblocks, fighting, or access restrictions that affect certain groups of people?	Select one	Yes • No • Don't know • Prefer not to answer	Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.2. What are the primary obstacles to delivering services, from the perspective of service providers?	86	Healthcar e	Facilities affected by access restrictions to certain groups of population	Please clarify which facilities and which groups of people are affected.	Text		Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.2. What are the primary obstacles to delivering services, from the perspective of service providers?	87	Healthcar e	Access restrictions to certain groups of population to travel to health facilities in the city	<i>(if administrator)</i> Are non-Libyans, including refugees and migrants, free to use the health facilities in Azzawya?	Select multiple	Yes, non-Libyans are free to use health facilities • No, some non- Libyans face administrative access restrictions (Libyan ID required, permanent Libyan residence required, etc.) • No, some non-Libyans face	Purposive/Snowballing

							other types of access restrictions (not admitted to facility, unable to afford healthcare, etc.) • Other (please specify) • Don't know • Prefer not to answer	
2. To what extent are basic services functional and accessible for residents?	2.2. What are the primary obstacles to delivering services, from the perspective of service providers?	88	Healthcar e	Reasons of restrictions for non-Libyans	<i>(if no or other)</i> Please clarify your response.	Text		Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.2. What are the primary obstacles to delivering services, from the perspective of service providers?	89	Healthcar e	Access restrictions to certain groups of population to travel to this health facility	<i>(if medical professional)</i> Are non-Libyans, including refugees and migrants, free to use the health facility where you work?	Select multiple	Yes, non-Libyans are free to use health facilities • No, some non- Libyans face administrative access restrictions (Libyan ID required, permanent Libyan residence required, etc.) • No, some non-Libyans face other types of access restrictions (not admitted to facility, unable to afford healthcare, etc.) • Other (please specify) •	Purposive/Snowballing

							Don't know • Prefer not to answer	
2. To what extent are basic services functional and accessible for residents?	2.2. What are the primary obstacles to delivering services, from the perspective of service providers?	90	Healthcar e	Reasons of restrictions for non-Libyans in this health facility	(if no or other) Please clarify your response.	Text		Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.2. What are the primary obstacles to delivering services, from the perspective of service providers?	91	Healthcar e	3 main needs of patients in the city	<i>(if administrator)</i> In your estimation, what were the top 3 medical needs of patients across health facilities in Azzawya over the past 3 months?	Select multiple	Emergency care (accident/injuries) • Antibiotics • Surgery • Mental healthcare • Skilled care during childbirth • Treatment for chronic disease (diabetes, high blood pressure, heart problems, kidney problems, etc.) • Rehabilitation (for those who have recently experienced injuries) • Assistive devices (e.g.	Purposive/Snowballing

							wheelchairs, prosthetics) • Nutrition assistance • Other (please specify) • Don't know • Prefer not to answer	
2. To what extent are basic services functional and accessible for residents?	2.2. What are the primary obstacles to delivering services, from the perspective of service providers?	92	Healthcar e	3 main needs of patients in this health facility	(if medical professional) In your estimation, what were the top 3 medical needs of patients at the health facility where you work over the past 3 months?	Select multiple	Emergency care (accident/injuries) • Antibiotics • Surgery • Mental healthcare • Skilled care during childbirth • Treatment for chronic disease (diabetes, high blood pressure, heart problems, kidney problems, etc.) • Rehabilitation (for those who have recently experienced injuries) • Assistive devices (e.g. wheelchairs, prosthetics) • Nutrition assistance • Other	Purposive/Snowballing

							(please specify) • Don't know • Prefer not to answer	
2. To what extent are basic services functional and accessible for residents?	2.2. What are the primary obstacles to delivering services, from the perspective of service providers?	93	Healthcar e	% of patients receiving the healthcare they need	<i>(if medical professional)</i> In your estimation, what proportion of patients arriving at your health facility in the last two weeks were able to receive the healthcare they needed?	Select one	All (100%) • Almost all (75-99%) • More than half (50-74%) • Less than half (25-49%) • Very few (1-24%) • None (0%) • Don't know • Prefer not to answer	Purposive/Snowballing
3. What are the perceptions and expectations of Libyans and migrants regarding delivery of basic services?	3.1. How adequate and acceptable are existing basic services?	94	Healthcar e	Quality of heatlhcare	Overall, how would you describe the quality of healthcare in the city of Azzawya?	Select one	Excellent • Good • Acceptable • Poor • Very poor • Don't know • Prefer not to answer	Purposive/Snowballing
3. What are the perceptions and expectations of Libyans and migrants regarding delivery of basic services?	3.1. How adequate and acceptable are existing basic services?	95	Healthcar e	Evolution of the level of healthcare	In your opinion, has the quality of healthcare in Azzawya changed since the beginning of 2018?	Select one	Increased • Stayed the same • Decreased • Other (please specify) • Don't know • Prefer not to answer	Purposive/Snowballing

3. What are the perceptions and expectations of Libyans and migrants regarding delivery of basic services?	3.1. How adequate and acceptable are existing basic services?	96	Healthcar e	Reasons of change of quality of healthcare	(if increase, decrease, or other) In what ways has the quality changed, and what are the reasons for this change?	Text		Purposive/Snowballing
3. What are the perceptions and expectations of Libyans and migrants regarding delivery of basic services?	3.2. What are the primary obstacles to accessing services?	97	Healthcar e	Barriers preventing residents from accessing high quality healthcare	In your opinion, what are the 3 main barriers preventing residents of Azzawya from accessing high-quality healthcare?	Select multiple	No barriers • Lack of facilities • Distance to facilities • Lack of medicine/medical items • Lack of medical equipment • Lack of medical personnel • Healthcare is being provided by unqualified members of the community • Unsafe for patients to travel to medical facilities • Lack of female doctors • Healthcare is available but unaffordable • Healthcare is available only for certain groups • Healthcare is available only in certain areas not easily accessible to all city residents • Other (please	Purposive/Snowballing

							specify) • Don't know • Prefer not to answer	
4. To what extent do Libyans and migrants develop coping capacities and strategies to compensate for lack of access to basic services?	4.1 How do Libyans and migrants cope with a lack of access to services?	98	Healthcar e	Coping mechanisms	What do residents of Azzawya do when they are unable to access healthcare via formal health facilities in the city?	Text		Purposive/Snowballing
4. To what extent do Libyans and migrants develop coping capacities and strategies to compensate for lack of access to basic services?	4.1 How do Libyans and migrants cope with a lack of access to services?	99	Healthcar e	Coping mechanisms	What do residents of Azzawya do when the healthcare available in their part of the city is insufficient to meet their needs?	Text		Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.2. What are the primary obstacles to delivering services, from the perspective of service providers?	100	Healthcar e	Improvement in access to high- quality healthcare	What are the main improvements that could help expand access to high-quality healthcare?	Text		Purposive/Snowballing

2. To what extent are basic services functional and accessible for residents?	2.2. What are the primary obstacles to delivering services, from the perspective of service providers?	101	e	Barriers to deliver healthcare	From your perspective, what are the 3 main barriers to delivering high-quality healthcare in Azzawya?	Select multiple	No barriers • Lack of facilities • Distance to facilities • Lack of medicine/medical items • Lack of medical equipment • Lack of medical personnel • Healthcare is being provided by unqualified members of the community • Unsafe to travel to medical facilities • Lack of female doctors • Healthcare is available only for certain groups • Other (please specify) • Don't know • Prefer not to answer	Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.2. What are the primary obstacles to delivering services, from the perspective of service providers?	102	Healthcar e	Improvement to help medical staff's work	What are the main improvements that could help you do your work more effectively?	Text		Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.1. Where are operational services (schools, health centers, markets, bakeries, external aid) by DCU?	103	Healthcar e	Institutions or organisations improving access of healthcare or medicine in the city	Are you aware of any governmental or non- governmental organisations that have been providing medical services in Azzawya, or	Select one	Yes • No • Don't know • Prefer not to answer	Purposive/Snowballing

					that have been working to improve access to healthcare or medicine in the city?			
2. To what extent are basic services functional and accessible for residents?	2.1. Where are operational services (schools, health centers, markets, bakeries, external aid) by DCU?	104	Healthcar e	Activities of organisations	<i>(if yes)</i> Which organisations? To the best of your knowledge, what did they do, and where?	Text		Purposive/Snowballing
N/A	N/A	105	Markets	Interviewee gender	Gender of interviewee	Select one	Female • Male	Purposive/Snowballing
N/A	N/A	106	Markets	Interviewee age	Age of interviewee	Select one	18-30 • 31-64 • 65+ • Prefer not to answer	Purposive/Snowballing
N/A	N/A	107	Markets	Interviewee place of residence	In which neighborhood do you live?	Select one	Neighborhood list from Phase 1	Purposive/Snowballing
N/A	N/A	108	Markets	Interviewee place of work	In which neighborhood do you work?	Select one	Neighborhood list from Phase 1	Purposive/Snowballing
N/A	N/A	109	Markets	Name of the business	What is the name of your business?	Text		Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.1. Where are operational services (schools, health centers, markets, bakeries, external aid) by DCU?	110	Markets	Type of products sold	What types of products do you sell?	Text		Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.1. Where are operational services (schools, health centers, markets, bakeries, external aid) by DCU?	111	Markets	# of similar shops	In your neighbourhood, how many shops or vendors do you estimate there are that carry products similar to yours?	Integer		Purposive/Snowballing

2. To what extent are basic services functional and accessible for residents?	2.1. Where are operational services (schools, health centers, markets, bakeries, external aid) by DCU?	112	Markets	Evolution of the #	Has this number changed over the past year?	Select one	Increased • Stayed the same • Decreased • Other (please specify) • Prefer not to answer	Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.1. Where are operational services (schools, health centers, markets, bakeries, external aid) by DCU?	113	Markets	Reasons of change	For what reasons do you believe this has happened?	Text		Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.1. Where are operational services (schools, health centers, markets, bakeries, external aid) by DCU?	114	Markets	Change of price	Have your prices changed since the beginning of 2018?	Select one	Yes • No • Prefer not to answer	Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.1. Where are operational services (schools, health centers, markets, bakeries, external aid) by DCU?	115	Markets	Type of products that have price changed	<i>(if yes)</i> What prices have changed, and what were they at the beginning of 2018?	Text		Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.1. Where are operational services (schools, health centers, markets, bakeries, external aid) by DCU?	116	Markets	Change of produts	Have the products you sell changed since the beginning of 2018?	Select one	Yes • No • Prefer not to answer	Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.1. Where are operational services (schools, health centers, markets, bakeries, external aid) by DCU?	117	Markets	Type of products that have changed	<i>(if yes)</i> Which products have changed, and how?	Text		Purposive/Snowballing

2. To what extent are basic services functional and accessible for residents?	2.2. What are the primary obstacles to delivering services, from the perspective of service providers?	118	Markets	Price controls	Are you free to set your own prices for all products you sell, or are there any price controls?	Select one	Free to set prices for all products sold • Price controls on some products sold • Price controls on all products sold • Other (please specify) • Prefer not to answer	Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.2. What are the primary obstacles to delivering services, from the perspective of service providers?	119	Markets	Price controls list	(if not "free to set prices") Please summarise these price controls.	Text		Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.2. What are the primary obstacles to delivering services, from the perspective of service providers?	120	Markets	Time of price controls	(if not "free to set prices") For how long have these price controls been in place?	Text		Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.1. Where are operational services (schools, health centers, markets, bakeries, external aid) by DCU?	121	Markets	Type of payment accepted	What types of payment do you accept from your customers?	Select multiple	Cash • Credit/debit cards • Certified cheques • Bank transfers • Store credit • Mobile money • Other (please specify) • Prefer not to answer	Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.1. Where are operational services (schools, health centers, markets, bakeries, external aid) by DCU?	122	Markets	Mark-ups to other payment modalities than cash	Do you add any mark- ups to, or place any other conditions on, transactions that do not take place in cash?	Select one	Yes • No • Prefer not to answer	Purposive/Snowballing

2. To what extent are basic services functional and accessible for residents?	2.1. Where are operational services (schools, health centers, markets, bakeries, external aid) by DCU?	123	Markets	Conditions fixed to other payment modalities	<i>(if yes)</i> Please describe these conditions.	Text		Purposive/Snowballing
4. To what extent do Libyans and migrants develop coping capacities and strategies to compensate for lack of access to basic services?	4.1 How do Libyans and migrants cope with a lack of access to services?	124	Markets	Coping mechanisms	What do your customers most often do when they are unable to access enough cash to make their payments in full?	Text		Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.2. What are the primary obstacles to delivering services, from the perspective of service providers?	125	Markets	Opening of the shop	Has your business stayed open consistently since the beginning of 2018?	Select one	Yes • No • Prefer not to answer	Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.2. What are the primary obstacles to delivering services, from the perspective of service providers?	126	Markets	Reason of closure	<i>(if no)</i> Why not? When specifically did they close down and for how long?	Text		Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.1. Where are operational services (schools, health centers, markets, bakeries, external aid) by DCU?	127	Markets	Type of customers	Who are your primary customers? Do they belong to any particular groups?	Text		Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.1. Where are operational services (schools, health centers, markets, bakeries, external aid) by DCU?	128	Markets	Area of residence of customers	In what parts of the city do most of your customers live?	Select multiple	Neighborhood list from Phase 1	Purposive/Snowballing

2. To what extent are basic services functional and accessible for residents?	2.1. Where are operational services (schools, health centers, markets, bakeries, external aid) by DCU?	129	Markets	Evolution of the amount of business	Has the amount of business you do changed since the beginning of 2018?	Select one	Increased • Stayed the same • Decreased • Other (please specify) • Prefer not to answer	Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.1. Where are operational services (schools, health centers, markets, bakeries, external aid) by DCU?	130	Markets	Reasons of evolution of the amount of business	(if increase, decrease, or other) What are the reasons for this change?	Text		Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.1. Where are operational services (schools, health centers, markets, bakeries, external aid) by DCU?	131	Markets	Perspective of business	Do you think the amount of business you currently do is likely to change within the next six months?	Select one	Will increase • Will stay the same • Will decrease • Other (please specify) • Prefer not to answer	Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.1. Where are operational services (schools, health centers, markets, bakeries, external aid) by DCU?	132	Markets	Reasons of business predictions	(if increase, decrease, or other) Why do you predict this change?	Text		Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.2. What are the primary obstacles to delivering services, from the perspective of service providers?	133	Markets	Issues to meet customers' demand	Have you faced any issues with meeting your customers' demand for your products since the beginning of 2018?	Select one	Yes • No • Prefer not to answer	Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.2. What are the primary obstacles to delivering services, from the perspective of service providers?	134	Markets	Type of issues to meet customers' demand in this shop	<i>(if yes)</i> Please describe these issues.	Text		Purposive/Snowballing

2. To what extent are basic services functional and accessible for residents?	2.2. What are the primary obstacles to delivering services, from the perspective of service providers?	135	Markets	Predictions of issues to meet customers' demand	Do you foresee any issues with meeting your customers' demand for your products over the next six months?	Select one	Yes • No • Prefer not to answer	Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.2. What are the primary obstacles to delivering services, from the perspective of service providers?	136	Markets	Type of issues predicted to meet customers' demand	<i>(if yes)</i> Please describe these issues.	Text		Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.2. What are the primary obstacles to delivering services, from the perspective of service providers?	137	Markets	Type of payment used to pay suppliers	What types of payment do you use to pay your suppliers?	Select multiple	Cash • Credit/debit cards • Certified cheques • Bank transfers • Store credit • Mobile money • Other (please specify) • Prefer not to answer	Purposive/Snowballing
4. To what extent do Libyans and migrants develop coping capacities and strategies to compensate for lack of access to basic services?	4.1 How do Libyans and migrants cope with a lack of access to services?	138	Markets	Access to cash to make payment	<i>(if cash)</i> Are you regularly able to access enough cash to make your payments?	Select one	Yes • No • Prefer not to answer	Purposive/Snowballing
4. To what extent do Libyans and migrants develop coping capacities and strategies to compensate for lack of access to basic services?	4.1 How do Libyans and migrants cope with a lack of access to services?	139	Markets	Coping mechanisms to lack of cash	<i>(if no)</i> How do you compensate for this lack of cash? Has your business been affected by this?	Text		Purposive/Snowballing

2. To what extent are basic services functional and accessible for residents?	2.2. What are the primary obstacles to delivering services, from the perspective of service providers?	140	Markets	Issues to meet customers' demand for basic food items in the city	In general, have merchants in Azzawya had any difficulty meeting their customers' demand for basic food items since the beginning of 2018?	Select one	Yes • No • Don't know • Prefer not to answer	Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.2. What are the primary obstacles to delivering services, from the perspective of service providers?	141	Markets	Type of issues to meet customers' demand for basic food items in the city	<i>(if yes)</i> Please describe these issues.	Text		Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.2. What are the primary obstacles to delivering services, from the perspective of service providers?	142	Markets	Issues to meet customers' demand for basic hygiene items in the city	In general, have merchants in Azzawya had any difficulty meeting their customers' demand for basic hygiene items since the beginning of 2018?	Select one	Yes • No • Don't know • Prefer not to answer	Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.2. What are the primary obstacles to delivering services, from the perspective of service providers?	143	Markets	Type of issues to meet customers' demand for basic hygiene items in the city	<i>(if yes)</i> Please describe these issues.	Text		Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.2. What are the primary obstacles to delivering services, from the perspective of service providers?	144	Markets	Issues to meet customers' demand for other basic items in the city	In general, have merchants in Azzawya had any difficulty meeting their customers' demand for any other basic items since the beginning of 2018?	Select one	Yes • No • Don't know • Prefer not to answer	Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.2. What are the primary obstacles to delivering services, from the perspective of service providers?	145	Markets	Type of issues to meet customers' demand for other basic items in the city	(<i>if yes</i>) Please describe these issues.	Text		Purposive/Snowballing

2. To what extent are basic services functional and accessible for residents?	2.2. What are the primary obstacles to delivering services, from the perspective of service providers?	146	Markets	Main barriers for residents to buy basic food and NFI	In your opinion, what are the main barriers that residents of Azzawya face in being able to buy core food and non-food items?	Select multiple	Market items are sometimes not available • Market items are available, but are too expensive for some people to afford • Quality of market items is low • Stores or marketplaces are closed or non- functional • Stores or marketplaces are functioning, but at unpredictable times • Insecurity or checkpoints make it difficult to access markets • Other (please specify) • Don't know • Prefer not to answer	Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.1. Where are operational services (schools, health centers, markets, bakeries, external aid) by DCU?	147	Markets	Institutions or organisations to support access to food	Are you aware of any governmental or non- governmental organisations that have been distributing core food or non-food items to your customers, or that have been distributing money to help your customers afford your products?	Select one	Yes • No • Don't know • Prefer not to answer	Purposive/Snowballing

2. To what extent are basic services functional and accessible for residents?	2.1. Where are operational services (schools, health centers, markets, bakeries, external aid) by DCU?	148	Markets	Activities of organisations	<i>(if yes)</i> Which organisations? To the best of your knowledge, what did they do, and where?	Text		Purposive/Snowballing
N/A	N/A	149	Bakeries	Interviewee gender	Gender of interviewee	Select one	Female • Male	Purposive/Snowballing
N/A	N/A	150	Bakeries	Interviewee age	Age of interviewee	Select one	18-30 • 31-64 • 65+ • Prefer not to answer	Purposive/Snowballing
N/A	N/A	151	Bakeries	Interviewee place of residence	In which neighborhood do you live?	Select one	Neighborhood list from Phase 1	Purposive/Snowballing
N/A	N/A	152	Bakeries	Interviewee place of work	In which neighborhood do you work?	Select one	Neighborhood list from Phase 1	Purposive/Snowballing
N/A	N/A	153	Bakeries	Name of the business	What is the name of your business?	Text		Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.1. Where are operational services (schools, health centers, markets, bakeries, external aid) by DCU?	154	Bakeries	Type of products sold	What products do you sell?	Select multiple	Wheat bread • Wheat flour • Other types of bread • Other types of flour • Other products (please specify)	Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.1. Where are operational services (schools, health centers, markets, bakeries, external aid) by DCU?	155	Bakeries	Form of bread selling	<i>(if wheat bread)</i> Do you sell bread by the bag?	Select one	Yes•No	Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.1. Where are operational services (schools, health centers, markets, bakeries, external aid) by DCU?	156	Bakeries	Price of a bag	<i>(if yes)</i> How much, in LYD, do you charge for a standard bag of wheat bread?	Integer		Purposive/Snowballing

2. To what extent are basic services functional and accessible for residents?	2.1. Where are operational services (schools, health centers, markets, bakeries, external aid) by DCU?	157	Bakeries	# of pieces of bread per bag	<i>(if yes)</i> How many pieces of bread do you include in a standard bag?	Integer		Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.1. Where are operational services (schools, health centers, markets, bakeries, external aid) by DCU?	158	Bakeries	Price of 1 piece of bread	<i>(if no)</i> How much, in LYD, do you charge for a standard piece of bread?	Integer		Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.1. Where are operational services (schools, health centers, markets, bakeries, external aid) by DCU?	159	Bakeries	Price wheat flour	<i>(if wheat flour)</i> How much, in LYD, do you charge for 1 kg of standard wheat flour?	Integer		Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.1. Where are operational services (schools, health centers, markets, bakeries, external aid) by DCU?	160	Bakeries	Type of payment accepted	What types of payment do you accept from your customers?	Select multiple	Cash • Credit/debit cards • Certified cheques • Bank transfers • Store credit • Mobile money • Other (please specify)	Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.1. Where are operational services (schools, health centers, markets, bakeries, external aid) by DCU?	161	Bakeries	Mark-ups to other payment modalities than cash	Do you add any mark- ups to, or place any other conditions on, transactions that do not take place in cash?	Select one	Yes • No • Prefer not to answer	Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.1. Where are operational services (schools, health centers, markets, bakeries, external aid) by DCU?	162	Bakeries	Conditions fixed to other payment modalities	<i>(if yes)</i> Please describe these conditions.	Text		Purposive/Snowballing

4. To what extent do Libyans and migrants develop coping capacities and strategies to compensate for lack of access to basic services?	4.1 How do Libyans and migrants cope with a lack of access to services?	163	Bakeries	Coping mechanisms to lack of cash	What do your customers most often do when they are unable to access enough cash to make their payments in full?	Text		Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.1. Where are operational services (schools, health centers, markets, bakeries, external aid) by DCU?	164	Bakeries	Change of price	Have your prices changed since the beginning of 2018?	Select one	Yes • No • Prefer not to answer	Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.1. Where are operational services (schools, health centers, markets, bakeries, external aid) by DCU?	165	Bakeries	Type of products that have price changed	<i>(if yes)</i> What prices have changed, and what were they at the beginning of 2018?	Text		Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.1. Where are operational services (schools, health centers, markets, bakeries, external aid) by DCU?	166	Bakeries	Change of produts	Have the products you sell changed since the beginning of 2018?	Select one	Yes • No • Prefer not to answer	Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.1. Where are operational services (schools, health centers, markets, bakeries, external aid) by DCU?	167	Bakeries	Type of products that have changed	<i>(if yes)</i> Which products have changed, and how?	Text		Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.2. What are the primary obstacles to delivering services, from the perspective of service providers?	168	Bakeries	Price controls	Are you free to set your own prices for all products you sell, or are there any price controls?	Select one	Free to set prices for all products sold • Price controls on some products sold • Price controls on all products sold •	Purposive/Snowballing

							Other (please specify)	
2. To what extent are basic services functional and accessible for residents?	2.2. What are the primary obstacles to delivering services, from the perspective of service providers?	169	Bakeries	Price controls list	(if not "free to set prices") Please summarise these price controls.	Text		Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.2. What are the primary obstacles to delivering services, from the perspective of service providers?	170	Bakeries	Time of price controls	(if not "free to set prices") For how long have these price controls been in place?	Text		Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.2. What are the primary obstacles to delivering services, from the perspective of service providers?	171	Bakeries	Opening of the shop	Has your bakery stayed open consistently since the beginning of 2018?	Select one	Yes • No • Prefer not to answer	Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.2. What are the primary obstacles to delivering services, from the perspective of service providers?	172	Bakeries	Reason of closure	<i>(if no)</i> Why not? When specifically did they close down and for how long?	Text		Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.1. Where are operational services (schools, health centers, markets, bakeries, external aid) by DCU?	173	Bakeries	Type of customers	Who are your primary customers? Do they belong to any particular groups?	Text		Purposive/Snowballing

2. To what extent are basic services functional and accessible for residents?	2.1. Where are operational services (schools, health centers, markets, bakeries, external aid) by DCU?	174	Bakeries	Area of residence of customers	In what parts of the city do most of your customers live?	Select one	Neighborhood list from Phase 1	Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.1. Where are operational services (schools, health centers, markets, bakeries, external aid) by DCU?	175	Bakeries	Evolution of the amount of business	Has the amount of business you do changed since the beginning of 2018?	Select one	Increased • Stayed the same • Decreased • Other (please specify)	Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.1. Where are operational services (schools, health centers, markets, bakeries, external aid) by DCU?	176	Bakeries	Reasons of evolution of the amount of business	(if increase, decrease, or other) What are the reasons for this change?	Text		Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.1. Where are operational services (schools, health centers, markets, bakeries, external aid) by DCU?	177	Bakeries	Perspective of business	Do you think the amount of business you currently do is likely to change within the next six months?	Select one	Will increase • Will stay the same • Will decrease • Other (please specify)	Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.1. Where are operational services (schools, health centers, markets, bakeries, external aid) by DCU?	178	Bakeries	Reasons of business predictions	(if increase, decrease, or other) Why do you predict this change?	Text		Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.2. What are the primary obstacles to delivering services, from the perspective of service providers?	179	Bakeries	Issues to meet customers' demand	Have you faced any issues with supplying your customers with sufficient amounts of bread or flour since the beginning of 2018?	Select one	Yes • No • Prefer not to answer	Purposive/Snowballing

2. To what extent are basic services functional and accessible for residents?	2.2. What are the primary obstacles to delivering services, from the perspective of service providers?	180	Bakeries	Type of issues to meet customers' demand in this shop	<i>(if yes)</i> Please describe these issues.	Text		Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.2. What are the primary obstacles to delivering services, from the perspective of service providers?	181	Bakeries	Predictions of issues to meet customers' demand	Do you foresee any issues with supplying your customers with sufficient amounts of bread or flour over the next six months?	Select one	Yes • No • Prefer not to answer	Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.2. What are the primary obstacles to delivering services, from the perspective of service providers?	182	Bakeries	Type of issues predicted to meet customers' demand	<i>(if yes)</i> Please describe these issues.	Text		Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.2. What are the primary obstacles to delivering services, from the perspective of service providers?	183	Bakeries	Type of payment used to pay suppliers	What types of payment do you use to pay your suppliers?	Select multiple	Cash • Credit/debit cards • Certified cheques • Bank transfers • Store credit • Mobile money • Other (please specify)	Purposive/Snowballing
4. To what extent do Libyans and migrants develop coping capacities and strategies to compensate for lack of access to basic services?	4.1 How do Libyans and migrants cope with a lack of access to services?	184	Bakeries	Access to cash to make payment	(if cash) Are you regularly able to access enough cash to make your payments?	Select one	Yes • No • Prefer not to answer	Purposive/Snowballing

4. To what extent do Libyans and migrants develop coping capacities and strategies to compensate for lack of access to basic services?	4.1 How do Libyans and migrants cope with a lack of access to services?	185	Bakeries	Coping mechanisms to lack of cash	<i>(if no)</i> How do you compensate for this lack of cash? Has your business been affected by this?	Text		Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.1. Where are operational services (schools, health centers, markets, bakeries, external aid) by DCU?	186	Bakeries	Main flour supplier	What is currently your main flour supplier?	Select one	Private Libyan retailer, wholesaler, or importer • Libyan authorities or other public body • Import flour directly from abroad • Other (please specify)	Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.1. Where are operational services (schools, health centers, markets, bakeries, external aid) by DCU?	187	Bakeries	Details about the flour supplier	Please provide more detail about this supplier.	Text		Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.1. Where are operational services (schools, health centers, markets, bakeries, external aid) by DCU?	188	Bakeries	Location of the main flour supplier	Where is your current main flour supplier located?	Select multiple	List of Libya mantikas and baladiyas + an "international" mantika with a "please specify" follow-up question	Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.1. Where are operational services (schools, health centers, markets, bakeries, external aid) by DCU?	189	Bakeries	Supplier providing subsidised or unsubsidised flour	Does this supplier offer flour at a subsidised or an unsubsidised price?	Select one	Subsidised • Unsubsidised • Other (please specify)	Purposive/Snowballing

2. To what extent are basic services functional and accessible for residents?	2.1. Where are operational services (schools, health centers, markets, bakeries, external aid) by DCU?	190	Bakeries	Change of flour suppliers	Have your flour suppliers changed since the beginning of 2018?	Select one	Yes • No • Prefer not to answer	Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.1. Where are operational services (schools, health centers, markets, bakeries, external aid) by DCU?	191	Bakeries	Reasons of change of flour suppliers	<i>(if yes)</i> Why have your flour suppliers changed?	Text		Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.2. What are the primary obstacles to delivering services, from the perspective of service providers?	192	Bakeries	Impact of the mid-2018 events	Was your business affected by the events of mid-2018 in which many bakeries had difficulty purchasing enough flour to meet their needs?	Select one	Strongly affected • Moderately affected • Mildly affected • Not affected at all • Other (please specify)	Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.2. What are the primary obstacles to delivering services, from the perspective of service providers?	193	Bakeries	Impact of the mid-2018 events on this bakery	(if not "not affected") In what way was your business affected?	Text		Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.2. What are the primary obstacles to delivering services, from the perspective of service providers?	194	Bakeries	Perception of the events	In your opinion, why did these events happen? What were the root causes behind the difficulties these bakeries faced?	Text		Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.2. What are the primary obstacles to delivering services, from the perspective of service providers?	195	Bakeries	Impact of the mid-2018 events on bakeries in the city	In your opinion, how strongly have other bakeries in Azzawya been affected by these events?	Select one	Strongly affected • Moderately affected • Mildly affected • Not affected at all • Other (please specify)	Purposive/Snowballing

2. To what extent are basic services functional and accessible for residents?	2.2. What are the primary obstacles to delivering services, from the perspective of service providers?	196	Bakeries	Areas most heavily affected	Were there particular areas of the city where bakers were affected most strongly by the events of mid-2018?	Select one	Yes • No • Don't know • Prefer not to answer	Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.2. What are the primary obstacles to delivering services, from the perspective of service providers?	197	Bakeries	Reasons of most affected areas	<i>(if yes)</i> Which areas were most heavily affected, and why?	Text		Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.2. What are the primary obstacles to delivering services, from the perspective of service providers?	198	Bakeries	Level of impact of the events on bakeries in the city vs. Libya	In your opinion, were bakeries in Azzawya generally affected more strongly or less strongly than those in other areas of Libya?	Select one	Much more strongly • A bit more strongly • About the same as other areas • A bit more weakly • Much more weakly • Other (please specify)	Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.2. What are the primary obstacles to delivering services, from the perspective of service providers?	199	Bakeries	Impact of the events on bakeries in the city vs. Libya	Please provide more detail.	Text		Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.1. Where are operational services (schools, health centers, markets, bakeries, external aid) by DCU?	200	Bakeries	Institutions or organisations to support access to food	Are you aware of any governmental or non- governmental organisations that have been distributing bread or flour to your customers, or that have been distributing money to help your customers afford your products?	Select one	Yes • No • Don't know • Prefer not to answer	Purposive/Snowballing

2. To what extent are basic services functional and accessible for residents?	2.1. Where are operational services (schools, health centers, markets, bakeries, external aid) by DCU?	201	Bakeries	Activities of organisations	<i>(if yes)</i> Which organisations? To the best of your knowledge, what did they do, and where?	Text		Purposive/Snowballing
N/A	N/A	202	Humanita rian Aid	Interviewee gender	Gender of interviewee	Select one	Female • Male	Purposive/Snowballing
N/A	N/A	203	Humanita rian Aid	Interviewee age	Age of interviewee	Select one	18-30 • 31-64 • 65+	Purposive/Snowballing
N/A	N/A	204	Humanita rian Aid	Interviewee place of residence	In which neighborhood do you live?	Select one	Neighborhood list from Phase 1	Purposive/Snowballing
N/A	N/A	205	Humanita rian Aid	Interviewee place of work	In which neighborhood do you work?	Select one	Neighborhood list from Phase 1	Purposive/Snowballing
N/A	N/A	206	Humanita rian Aid	Interviewee position	Position of interviewee	Text		Purposive/Snowballing
N/A	N/A	207	Humanita rian Aid	Interviewee organisation	Organisation of interviewee	Text		Purposive/Snowballing
N/A	N/A	208	Humanita rian Aid	Type of organisation	Type of organisation	Select one	Local council • Other government body • Religious organisation • Libyan NGO or civil society organisation • International NGO • United Nations or other international agency • Other (please specify)	Purposive/Snowballing

2. To what extent are basic services functional and accessible for residents?	2.1. Where are operational services (schools, health centers, markets, bakeries, external aid) by DCU?	209	Humanita rian Aid	Type of organisation active in the city	What types of aid organisations are active in Azzawya (meaning that they currently provide or soon plan to provide aid)?	Select multiple	No organisations actively provide aid • Local council • Other government body • Religious organisation • Libyan NGO or civil society organisation • International NGO • United Nations or other international agency • Other (please specify) • Don't know • Prefer not to answer	Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.1. Where are operational services (schools, health centers, markets, bakeries, external aid) by DCU?	210	Humanita rian Aid	# of governmental bodies providing aid in the city	Can you estimate roughly how many GOVERNMENT bodies, including local councils, actively provide aid to Azzawya residents?	Integer		Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.1. Where are operational services (schools, health centers, markets, bakeries, external aid) by DCU?	211	Humanita rian Aid	# of local organisations providing aid in the city	Can you estimate roughly how many LOCAL aid organisations are active in Azzawya?	Integer		Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.1. Where are operational services (schools, health centers, markets, bakeries, external aid) by DCU?	212	Humanita rian Aid	# of international organisations providing aid in the city	Can you estimate roughly how many INTERNATIONAL aid organisations, including UN agencies, are active in Azzawya?	Integer		Purposive/Snowballing

2. To what extent are basic services functional and accessible for residents?	2.1. Where are operational services (schools, health centers, markets, bakeries, external aid) by DCU?	213	Humanita rian Aid	Areas receiving aid	Are there any areas of the city that tend to receive more aid than others?	Select one	Yes • No • Don't know • Prefer not to answer	Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.1. Where are operational services (schools, health centers, markets, bakeries, external aid) by DCU?	214	Humanita rian Aid	Areas receiving aid	(if yes) Which areas?	Select multiple	Neighborhood list from Phase 1	Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.2. What are the primary obstacles to delivering services, from the perspective of service providers?	215	Humanita rian Aid	Areas difficult to provide aid	Are there any areas of the city where it is more difficult than elsewhere to provide humanitarian aid?	Select one	Yes • No • Don't know • Prefer not to answer	Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.2. What are the primary obstacles to delivering services, from the perspective of service providers?	216	Humanita rian Aid	Areas difficult to provide aid	(if yes) Which areas?	Select multiple	Neighborhood list from Phase 1	Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.2. What are the primary obstacles to delivering services, from the perspective of service providers?	217	Humanita rian Aid	Type of issues	<i>(if yes)</i> Please describe the issues that humanitarian aid workers face in these areas.	Text		Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.1. Where are operational services (schools, health centers, markets, bakeries, external aid) by DCU?	218	Humanita rian Aid	Groups of population targeted	Are there specific parts of the population in Azzawya that tend to be targeted for aid more often than others?	Select multiple	No specific groups • Non-displaced residents • IDPs • Returnees • Refugees and migrants • Other (please specify) • Don't know • Prefer not to answer	Purposive/Snowballing

2. To what extent are basic services functional and accessible for residents?	2.1. Where are operational services (schools, health centers, markets, bakeries, external aid) by DCU?	219	Humanita rian Aid	Types of aid	What types of aid does your organisation currently provide or plan to provide in the city of Azzawya?	Select multiple	No current or planned aid projects • Food • Non-food items (NFIs) • Shelter • Water • Sanitation or hygiene • Health • Education • Protection • Other (please specify)	Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.1. Where are operational services (schools, health centers, markets, bakeries, external aid) by DCU?	220	Humanita rian Aid	Types of aid of other organisations	To the best of your knowledge, what types of aid are other organisations currently providing or planning to provide in the city of Azzawya?	Select multiple	No current or planned aid projects • Food • Non-food items (NFIs) • Shelter • Water • Sanitation or hygiene • Health • Education • Protection • Other (please specify)	Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.1. Where are operational services (schools, health centers, markets, bakeries, external aid) by DCU?	221	Humanita rian Aid	Modality of aid provided	What modalities of aid does your organisation currently provide or plan to provide in the city of Azzawya?	Select multiple	No current or planned aid projects • In-kind aid • Cash-based interventions • Services or service referrals • Other (please specify)	Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.1. Where are operational services (schools, health centers, markets, bakeries, external aid) by DCU?	222	Humanita rian Aid	Modality of aid provided of other organisations	To the best of your knowledge, what modalities of aid are other organisations currently providing or planning to provide in the city of Azzawya?	Select multiple	No current or planned aid projects • In-kind aid • Cash-based interventions • Services or service referrals • Other (please specify)	Purposive/Snowballing

2. To what extent are basic services functional and accessible for residents?	2.1. Where are operational services (schools, health centers, markets, bakeries, external aid) by DCU?	223	Humanita rian Aid	Food assistance provided	Within the past three months, have any residents of Azzawya, or any organisations within Azzawya, received food- related assistance from aid organisations or local councils, including cash or vouchers for the purpose of buying food?	Select one	Yes • No • Don't know • Prefer not to answer	Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.1. Where are operational services (schools, health centers, markets, bakeries, external aid) by DCU?	224	Humanita rian Aid	Population targeted for food assistance	<i>(if yes)</i> Did this food assistance target a specific part of the population?	Select multiple	No specific groups • Non-displaced residents • IDPs • Returnees • Refugees and migrants • Other (please specify) • Don't know • Prefer not to answer	Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.1. Where are operational services (schools, health centers, markets, bakeries, external aid) by DCU?	225	Humanita rian Aid	Areas of food assistance	<i>(if yes)</i> Did this food assistance target specific areas of the city?	Select multiple	Neighborhood list from Phase 1	Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.1. Where are operational services (schools, health centers, markets, bakeries, external aid) by DCU?	226	Humanita rian Aid	Criteria for selection to receive food assistance	<i>(if yes)</i> Were there any other criteria for selection?	Text		Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.1. Where are operational services (schools, health centers, markets, bakeries, external aid) by DCU?	227	Humanita rian Aid	Type of food assistance	<i>(if yes)</i> What type of food assistance was provided?	Select multiple	Food baskets • Dry rations • Hot meals (on site) • Cash to purchase food • Vouchers to purchase food • Other (please	Purposive/Snowballing

							specify) • Don't know • Prefer not to answer	
2. To what extent are basic services functional and accessible for residents?	2.1. Where are operational services (schools, health centers, markets, bakeries, external aid) by DCU?	228	Humanita rian Aid	Frequency of food assistance	(if yes) Was this food assistance provided as part of a one-time intervention or a recurring/ongoing series of interventions?	Select one	One-time • Recurring • Other (please specify) • Don't know • Prefer not to answer	Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.1. Where are operational services (schools, health centers, markets, bakeries, external aid) by DCU?	229	Humanita rian Aid	Current situation of food provision	<i>(if yes)</i> Is this food assistance still ongoing?	Select one	Yes • No • Don't know • Prefer not to answer	Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.1. Where are operational services (schools, health centers, markets, bakeries, external aid) by DCU?	230	Humanita rian Aid	Education support provided	Within the past two months, have any residents of Azzawya, or any educational facilities within Azzawya, received education- related assistance from aid organisations or local councils, including cash or vouchers for the purpose of buying educational items?	Select one	Yes • No • Don't know • Prefer not to answer	Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.1. Where are operational services (schools, health centers, markets, bakeries, external aid) by DCU?	231	Humanita rian Aid	Population targeted for education support	<i>(if yes)</i> Did this education assistance target a specific part of the population?	Select multiple	No specific groups • Non-displaced residents • IDPs • Returnees • Refugees and migrants • Other (please specify) • Don't know • Prefer	Purposive/Snowballing

							not to answer	
2. To what extent are basic services functional and accessible for residents?	2.1. Where are operational services (schools, health centers, markets, bakeries, external aid) by DCU?	232	Humanita rian Aid	Areas of education support	<i>(if yes)</i> Did this education assistance target specific areas of the city?	Select multiple	Neighborhood list from Phase 1	Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.1. Where are operational services (schools, health centers, markets, bakeries, external aid) by DCU?	233	Humanita rian Aid	Criteria for selection to receive education support	<i>(if yes)</i> Were there any other criteria for selection?	Text		Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.1. Where are operational services (schools, health centers, markets, bakeries, external aid) by DCU?	234	Humanita rian Aid	Type of education support	<i>(if yes)</i> What type of education assistance was provided?	Select multiple	Remedial education or catch- up classes • Recreational activities for children • Child- friendly spaces • Rehabilitation of school buildings • Teacher training • Provision of school supplies to children • Provision of educational items to schools • Cash • Vouchers • Other (please specify) • Don't know • Prefer not to answer	Purposive/Snowballing

2. To what extent are basic services functional and accessible for residents?	2.1. Where are operational services (schools, health centers, markets, bakeries, external aid) by DCU?	235	Humanita rian Aid	Frequency of education support	(if yes) Was this education assistance provided as part of a one-time intervention or a recurring/ongoing series of interventions?	Select one	One-time • Recurring • Other (please specify) • Don't know • Prefer not to answer	Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.1. Where are operational services (schools, health centers, markets, bakeries, external aid) by DCU?	236	Humanita rian Aid	Current situation of education support	<i>(if yes)</i> Is this education assistance still ongoing?	Select one	Yes • No • Don't know • Prefer not to answer	Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.1. Where are operational services (schools, health centers, markets, bakeries, external aid) by DCU?	237	Humanita rian Aid	Healthcare assistance provided	Within the past three months, have any residents of Azzawya, or any health providers within Azzawya, received health-related assistance from aid organisations or local councils, including cash or vouchers for the purpose of buying medicine or health supplies?	Select one	Yes • No • Don't know • Prefer not to answer	Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.1. Where are operational services (schools, health centers, markets, bakeries, external aid) by DCU?	238	Humanita rian Aid	Population targeted for healthcare assistance	<i>(if yes)</i> Did this health assistance target a specific part of the population?	Select one	No specific groups • Non-displaced residents • IDPs • Returnees • Refugees and migrants • Other (please specify) • Don't know • Prefer not to answer	Purposive/Snowballing

2. To what extent are basic services functional and accessible for residents?	2.1. Where are operational services (schools, health centers, markets, bakeries, external aid) by DCU?	239	Humanita rian Aid	Areas of healthcare assistance	<i>(if yes)</i> Did this health assistance target specific areas of the city?	Select multiple	Neighborhood list from Phase 1	Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.1. Where are operational services (schools, health centers, markets, bakeries, external aid) by DCU?	240	Humanita rian Aid	Criteria for selection to receive healthcare assistance	<i>(if yes)</i> Were there any other criteria for selection?	Text		Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.1. Where are operational services (schools, health centers, markets, bakeries, external aid) by DCU?	241	Humanita rian Aid	Type of healthcare assistance	<i>(if yes)</i> What type of health assistance was provided?	Select multiple	Emergency care (accident/injuries) • Antibiotics • Surgery • Mental healthcare • Skilled care during childbirth • Treatment for chronic disease (diabetes, high blood pressure, heart problems, kidney problems, etc.) • Rehabilitation (for those who have recently experienced injuries) • Assistive devices (e.g. wheelchairs, prosthetics) • Nutrition assistance • Other (please specify) • Don't know • Prefer	Purposive/Snowballing

							not to answer	
2. To what extent are basic services functional and accessible for residents?	2.1. Where are operational services (schools, health centers, markets, bakeries, external aid) by DCU?	242	Humanita rian Aid	Frequency of healthcare assistance	(if yes) Was this health assistance provided as part of a one-time intervention or a recurring/ongoing series of interventions?	Select one	One-time • Recurring • Other (please specify) • Don't know • Prefer not to answer	Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.1. Where are operational services (schools, health centers, markets, bakeries, external aid) by DCU?	243	Humanita rian Aid	Current situation of healthcare assistance	<i>(if yes)</i> Is this health assistance still ongoing?	Select one	Yes • No • Don't know • Prefer not to answer	Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.1. Where are operational services (schools, health centers, markets, bakeries, external aid) by DCU?	244	Humanita rian Aid	Evolution of humanitairan needs	Overall, has the need for humanitarian aid in Azzawya changed since the beginning of 2018?	Select one	Increased • Stayed the same • Decreased • Other (please specify) • Don't know • Prefer not to answer	Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.1. Where are operational services (schools, health centers, markets, bakeries, external aid) by DCU?	245	Humanita rian Aid	Reason of evolution of humanitarian needs	(if increase, decrease, or other) What are the reasons for this change?	Text		Purposive/Snowballing

2. To what extent are basic services functional and accessible for residents?	2.1. Where are operational services (schools, health centers, markets, bakeries, external aid) by DCU?	246	Humanita rian Aid	Evolution of humanitairan needs in specific areas	<i>(if increase)</i> Are there specific areas of the city where the need for humanitarian aid has increased the most?	Select multiple	Neighborhood list from Phase 1	Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.1. Where are operational services (schools, health centers, markets, bakeries, external aid) by DCU?	247	Humanita rian Aid	Evolution of humanitairan needs for specific groups of population	<i>(if increase)</i> Are there specific groups of population for whom the need have increased the most?	Select multiple		
2. To what extent are basic services functional and accessible for residents?	2.2. What are the primary obstacles to delivering services, from the perspective of service providers?	248	Humanita rian Aid	Main barriers to deliver humanitairian aid	From your perspective, what are the 3 main barriers to delivering effective humanitarian aid in Azzawya?	Select multiple	No barriers • Not enough funding • Items needed are not available in Azzawya • Liquidity crisis / Lack of hard cash • Not enough staff • Staff do not have specialised expertise • Difficult to access people in most need • Aid cannot be delivered to intended recipients • Obstruction to the delivery of aid • Threats against aid workers • Insecure environment • Not enough information about needs • Other (please specify) • Don't know • Prefer not to answer	Purposive/Snowballing

2. To what extent are basic services functional and accessible for residents?	2.2. What are the primary obstacles to delivering services, from the perspective of service providers?	249	Humanita rian Aid	Main improvements to facilitate humanitarian work	What are the main improvements that could help you do your work more effectively?	Text		Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.2. What are the primary obstacles to delivering services, from the perspective of service providers?	250	Humanita rian Aid	Perception of safety at work	In general, how safe do you feel as a humanitarian aid worker in Azzawya?	Select one	Always safe • Usually safe • Sometimes unsafe • Usually unsafe • Not safe at all • Other (please specify) • Don't know • Prefer not to answer	Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.2. What are the primary obstacles to delivering services, from the perspective of service providers?	251	Humanita rian Aid	Perception of safety at work	<i>(if unsafe)</i> Please clarify your response.	Text		Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.2. What are the primary obstacles to delivering services, from the perspective of service providers?	252	Humanita rian Aid	Unsafe areas	Are there any areas of the city that are particularly unsafe for humanitarian aid workers?	Select one	Yes • No • Don't know • Prefer not to answer	Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.2. What are the primary obstacles to delivering services, from the perspective of service providers?	253	Humanita rian Aid	Unsafe areas	(if yes) Which areas?	Select multiple	Neighborhood list from Phase 1	Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.2. What are the primary obstacles to delivering services, from the perspective of service providers?	254	Humanita rian Aid	Impact of the liquidity crisis on the provision of humanitarian aid	Has the current liquidity crisis in Libya negatively affected your organisation's ability to provide humanitarian aid?	Select one	Yes • No • Don't know • Prefer not to answer	Purposive/Snowballing

2. To what extent are basic services functional and accessible for residents?	2.2. What are the primary obstacles to delivering services, from the perspective of service providers?	255	Humanita rian Aid	Coping mechanisms to lack of cash	<i>(if yes)</i> In what ways has your organisation needed to change its operating procedures or the aid it delivers to compensate for a lack of cash?	Text		Purposive/Snowballing
2. To what extent are basic services functional and accessible for residents?	2.2. What are the primary obstacles to delivering services, from the perspective of service providers?	256	Humanita rian Aid	Main barriers of access to high- quality education	In your opinion, what are the 3 main barriers preventing children in Azzawya from accessing high-quality education?	Select multiple	No barriers • Not enough teachers/Overcrow ding in classrooms • Untrained teachers • Not enough school materials available • Lack of infrastructure in school buildings (electricity, latrines, furniture) • Cost of school fees • Cost of materials/books • School environment is insecure • Education is not seen as important • Children have to work • Difficult for children to return to education after being displaced or absent • Early marriage causes children to leave school • Schools are not separated	Purposive/Snowballing

							by gender • Other (please specify) • Don't know • Prefer not to answer	
2. To what extent are basic	2.2. What are the	257	Humanita	Main barriers of	In your opinion, what are	Select	No barriers • Lack	Purposive/Snowballing
services functional and accessible for residents?	primary obstacles to delivering services, from the perspective of service providers?	201	rian Aid	access to high- quality healthcare	the 3 main barriers preventing residents of Azzawya from accessing high-quality healthcare?	multiple	of facilities • Distance to facilities • Lack of medicine/medical items • Lack of medical equipment • Lack of medical personnel • Healthcare is being provided by unqualified members of the community • Unsafe for patients	
							Unsafe for patients to travel to medical facilities • Lack of female doctors •	

							Healthcare is available but unaffordable • Healthcare is available only for certain groups • Healthcare is available only in certain areas not easily accessible to all city residents • Other (please specify) • Don't know • Prefer not to answer	
2. To what extent are basic services functional and accessible for residents?	2.2. What are the primary obstacles to delivering services, from the perspective of service providers?	258	Humanita rian Aid	Main barriers for residents to buy basic food and NFI	In your opinion, what are the 3 main barriers preventing residents of Azzawya from accessing core food and non-food items through markets?	Select multiple	No barriers • Core items are not available • Core items are available but are too expensive • Products in markets are of poor quality • Markets do not function • Markets function, but at unpredictable times • Other (please specify) • Don't know • Prefer not to answer	Purposive/Snowballing

3.2 Migrant KIIs (DCU-level)

uestions		collection method				level
Metadata	1	KII	Date of interview	Date of interview	Azzawya Area-Based Assessment (LBY1803), I	PECU-fevel ¹⁸
	2	KII	Enumerator's name or code	Enumerator name or code		DCU-level
	3	KII	Name of data collection unit (DCU)	Name of data collection unit (DCU)	DCU1 DCU2 DCU3 DCU4 DCU5 DCU6 DCU7	DCU-level
	4	KII	Consent	Hello, my name is (name), and I work with the organisation Bassmet Amal. We are conducting a survey to better understand the availability and accessibility of key services and infrastructure for migrants in this part of the city of Azzawya, especially those relating to healthcare, education, markets, bakeries, and humanitarian aid. Your responses to the questions that follow will be very valuable in helping humanitarian and development actors to better understand the needs that exist in different areas of the city. We estimate that this survey will take approximately 60 minutes to complete.		DCU-level
	5	KII	Consent	Do you consent to participate in this survey?	Yes • No	DCU-level
	6	KII	Gender of interviewee	Gender of interviewee	Female • Male	DCU-level
	7	KII	Age of interviewee	Age of interviewee	18-30 • 31-64 • 65+	DCU-level

8	KII	KI's neighbourhood of residence	In which neighborhood do you	Al-Ariwi	DCU-level
			live?	Ouza	
				Abou Ghelasha	
				Al-Anqar	
				Albarnawi	
				Alhaj Mohamed	
				Alhajbeya	
				Alharra	
				Al-Harsha	
				Al-Khedarwa	
				Alkhanafis	
				Arrzaka	
				Arrimha	
				Arruis	
				Azzhiwi	
				Achaib Aynouh	
				Alfassi	
				Al-kradhbiya	
				Al-Mrayma	
				The teaching Hospital	
				Almotrad	
				Amankaa	
				Abou Sorra	
				Abu Issa	
				Awlad Jarboo	
				Awlad Sakr	
				Awlad Sula	
				Awlad Ajina	
				Balbi	
				Bahr Assamah	
				Ben Osman	
				Bir Arrtimat	
				Bir Terfas	
				Bir Maamer	
				South of Al-Harsha	

		Joudaim Dila Saban Souk Al-khoudhra Souk Alsai Souk Alasr Street Al-jomla Street Jamal Abdul Nasser Shaabiyat Hay Alwehda Shabiyat Huissa Dhay Al-Helal Tariq Azzahra, Shohadaa Azzawya Qamouda Nasrat Al-Istithmar Assmariyat Sayda Zeinab Achourafaa Assabreya Adhaman Al-Iyada Al-Mujamaa Akalfat Almidan Alwalani Ben Youssef Bir Bni Hsin Street Omar Almokhta Shaabiyat Al-Mouthalath Abd Al-Wahed Uqba ibn Nafi	
--	--	---	--

9	KII	KI's employment location	In which neighborhood do you	Al-Ariwi	DCU-level
			work?	Ouza	
				Abou Ghelasha	
				Al-Anqar	
				Albarnawi	
				Alhaj Mohamed	
				Alhajbeya	
				Alharra	
				Al-Harsha	
				Al-Khedarwa	
				Alkhanafis	
				Arrzaka	
				Arrimha	
				Arruis	
				Azzhiwi	
				Achaib Aynouh	
				Alfassi	
				Al-kradhbiya	
				Al-Mrayma	
				The teaching Hospital	
				Almotrad	
				Amankaa	
				Abou Sorra	
				Abu Issa	
				Awlad Jarboo	
				Awlad Sakr	
				Awlad Sula	
				Awlad Ajina	
				Balbi	
				Bahr Assamah	
				Ben Osman	
				Bir Arrtimat	
				Bir Terfas	
				Bir Maamer	
				South of Al-Harsha	

		Joudaim Dila Saban Souk Al-khoudhra Souk Alsai Souk Alasr Street Al-jomla Street Jamal Abdul Nasser Shaabiyat Hay Alwehda Shabiyat Huissa Dhay Al-Helal Tariq Azzahra, Shohadaa Azzawya Qamouda Nasrat Al-Istithmar Assmariyat Sayda Zeinab Achourafaa Assabreya Adhaman Al-Iyada Al-Mujamaa Akalfat Almidan Alwalani Ben Youssef Bir Bni Hsin Street Omar Almokhta Shaabiyat Al-Mouthalath Abd Al-Wahed Uqba ibn Nafi	
--	--	---	--

10	KII	Kis's professional occupation	What is your professional occupation?	Select multiple: 1. Baker 2. Cleaner 3. Construction worker 4. Cook 5. Driver 6. Farmer 7. Fisher 8. Mechanic 9. Merchant 10. Metal worker 11. Shepherd 12. Tailor 13.Teacher 14. Waiter Other, please specify	DCU-level
----	-----	-------------------------------	---------------------------------------	---	-----------

11	KII	KI's country of origin	What is your country of origin?	 Afghanistan Algeria Burkina Faso Cote d'Ivoire Egypt Eritrea Ethiopia The Gambia Ghana Guinea-Bissau Guinea-Conakry Equatorial Guinea Iraq Mali Niger Nigeria Palestine Senegal South Sudan Syria Tunisia Yemen Chad 97. Other: (specify) 	DCU-level
12		KI's region of origin	(Question for enumerator) From which region of origin is the KI from?	West Africa • East Africa • MENA	DCU-level

	13	KII	KI's date of arrival in Libya	When did you arrive in Libya? (mm/yy)		DCU-level
	14	KII	KI's date of arrival in Azzawya	When did you arrive in Azzawya? (mm/yy)	-	DCU-level
	15	KII	KI's household composition in Azzawya	Who do you currently live with?	I am alone here • I live here with my spouse • I live here with my spouse and children • Other (please specify) • I live with my brother/sister • I live with my friends • Prefer not to answer	DCU-level
1. What are the neighborhood and DCU boundaries and how are residents grouped within each in Azzawya?	16	KII	% of migrants out of total population residing in Azzawya	Can you estimate what percentage of residents in this part of the city is composed by migrants?	0% • 10% or less • 11 -20% • 21-30% • 31- 40% • 41-50% • 51-60% • 61-70% • 71-80% • 81-90%; 91-100% • Don't know • Prefer not to answer	DCU-level
in Allan ya i	17	KII	% of East African migrants out of total migrant population residing in this DCU	Can you estimate what proportion (%) of the migrant population living in this part of the city is from East Africa?	0% • 10% or less • 11 -20% • 21-30% • 31- 40% • 41-50% • 51-60% • 61-70% • 71-80% • 81-90%; 91-100% • Don't know • Prefer not to answer	DCU-level
	18	KII	% of West African migrants out of total migrant population residing in this DCU	Can you estimate what proportion (%) of the migrant population living in this part of the city is from West Africa ?	0% • 10% or less • 11 -20% • 21-30% • 31- 40% • 41-50% • 51-60% • 61-70% • 71-80% • 81-90%; 91-100% • Don't know • Prefer not to answer	DCU-level
	19	KII	% of MENA migrants out of total migrant population residing in this DCU	Can you estimate what proportion (%) of the migrant population living in this part of the city is from North Africa and the Middle East?	0% • 10% or less • 11 -20% • 21-30% • 31- 40% • 41-50% • 51-60% • 61-70% • 71-80% • 81-90%; 91-100% • Don't know • Prefer not to answer	DCU-level

20	KII	% of Asian migrants out of total migrant population residing in this DCU	Can you estimate what proportion (%) of the migrant population living in this part of the city is from Asia ?	0% • 10% or less • 11 -20% • 21-30% • 31- 40% • 41-50% • 51-60% • 61-70% • 71-80% • 81-90%; 91-100% • Don't know • Prefer not to answer	DCU-level
21	KII	% of migrants living alone in this DCU	Do the majority of migrants (from your region of origin) in this part of the city live here alone or with others?	Live with family • Live alone • Live with other migrant friends • Live with their employer • Live with their smuggler • Other • Don't know • Prefer not to answer	DCU-level
22	KII	Drivers of migrants' migration to Azzawya	For what purpose do the majority of migrants (from your region of origin) come to Azzawya?	To work permanently • To work in seasonal jobs and then return home • To go to Europe • Other (please specify) • Don't know • Prefer not to answer	DCU-level
23	KII	Migrants' professional occupations	What are their most common professional occupations?	Select multiple: 1. Baker 2. Cleaner 3. Construction worker 4. Cook 5. Driver 6. Farmer 7. Fisher 8. Mechanic 9. Merchant 10. Metal worker 11. Shepherd 12. Tailor 13. Teacher 14. Waiter Other, please specify • Don't know • Prefer not to answer	DCU-level

24	КІІ	N/A	Google Maps: Can you please tell me where the largest concentrations of migrants (from your region of origin) are hosted in this part of the city? Can you please indicate which of these areas are regular settlements or informal sites (= sites not intended for shelter, i.e. warehouses, unfinished buildings, construction sites, etc.) ? Please select the layer "migrants areas" to draw the areas and answer the questions for each area.		DCU-level
25	KII	Type of shelters accessed by migrants in this DCU	In what kind of shelter do migrants (from your region of origin) live in in this part of the city?	Select multiple: Connection houses with freedom of movement • Connection houses with no freedom of movement • Apartment • House • Unfinished room(s) • Public space not usually used for shelter (school, mosque, etc.) • Private space not usually used for shelter (basement, garage, store, warehouse, etc.) • Workplace • Outdoors • Don't know • Prefer not to answer	DCU-level

2. To what extent are basic services functional and accessible to residents in Azzawya?	26	KII	N/A	Google Maps: "Where are the health facilities accessed by migrants (from your region of origin)? Have a look at the health facilities that are already mapped. Please select the layer "Health" and click on each health facility. Indicate "Yes" if migrants are using the facility and "No" if they don't. If any facility is being used by migrants but is not yet on the map, please add a new marker. Indicate their type in the appropriate box (hospital, private	DCU-level
				appropriate box (hospital, private clinic, pharmacy,)	

27	KII	Barriers faced by migrants in accessing healthcare in this DCU	What are the main barriers that may have prevented some migrants (from your region of origin) from accessing healthcare that meets their needs in this part of the city?	 Select multiple: No barriers Healthcare is available but unaffordable Non-Libyans are not allowed in healthcare facilities Only migrants from certain countries of origin are allowed in healthcare facilities (please specify which ones) Healthcare is available only in certain areas of the city not easily accessible to all migrants Migrants are offered a different treatment than Libyans Lack of facilities Access is allowed only if accompanied by a Libyan national Distance to facilities (lack of means of transportation) Lack of medical equipment Lack of medical personnel Healthcare is being provided by unqualified members of the community Unsafe for patients to travel to medical facilities Lack of female doctors Lack of information about available healthcare facilities Fear to be arrested Other (please specify) • Don't know • Prefer not to answer 	DCU-level
20		received by migrants in this DCU	humanitarian actors providing healthcare to migrants (from your region of origin) in this part of the city?	Tes • NO • Don t know • Prefer not to answer	UCU-level

	29	KII	Most vulnerable migrant groups in relation to access to healthcare Most vulnerable migrant groups in relation to access to healthcare / Reasons of vulnerability	Are there any particular groups among migrants (from your region of origin) that have greater difficulty meeting their specific needs in relation to healthcare in this part of the city? (<i>If yes</i>) Can you please specify which ones and why?	Select multiple: Non-Arabic speakers • Recently arrived migrants • Transit migrants • Migrant women • Migrant children • Migrant elderly people • Other • Don't know • Prefer	DCU-level
	31	KII	Barriers faced by vulberable migrant groups in accessing healthcare in this DCU	Please explain the difficulties faced by each group you mentioned	not to answer	DCU-level
3. What are the perceptions and expectations of Libyans and migrants regarding delivery of basic services in Azzawya?	32	KII	Migrants' perceived quality of healthcare provided in this DCU	How do you consider the quality level of the healthcare provided to migrants (from your region of origin) in this part of the city?	Excellent • Good • Acceptable • Poor • Very poor • Don't know • Prefer not to answer	DCU-level
	33	КІІ	Reasons behind perceived quality of healthcare in this DCU	Why?		DCU-level
2. To what extent are basic services	34	KII	DCU-specific barriers faced by migrants in accessing healthcare compared to other DCUs	Do you think that migrants (from your region of origin) have greater difficulty accessing healthcare that meets their	Yes • No • Don't know • Prefer not to answer	DCU-level

functional and accessible to residents in Azzawya?				specific needs in this part of the city compared to other areas?		
	35	KII	Neigbourhood names where access to healthcare is more difficult for migrants	(<i>If yes</i>) can you please name the neighbourhood(s) where migrants (from your region of origin) have easier access to healthcare facilities in this city?	Select multiple: Al-Ariwi Ouza Abou Ghelasha Al-Anqar Albarnawi Alhaj Mohamed Alhajbeya Alharra Al-Harsha Al-Harsha Al-Khedarwa Alkhanafis Arrzaka Arrimha Arruis Azzhiwi Achaib Aynouh Alfassi Al-Kradhbiya Al-Mrayma The teaching Hospital Almotrad Amankaa Abou Sorra Abu Issa Awlad Jarboo Awlad Sakr Awlad Sula Awlad Ajina Balbi	DCU-level

i		1	,	
			Bahr Assamah	
			Ben Osman	
			Bir Arrtimat	
			Bir Terfas	
			Bir Maamer	
			South of Al-Harsha	
			Joudaim	
			Dila	
			Saban	
			Souk Al-khoudhra	
			Souk Alsai	
			Souk Alasr	
			Street Al-jomla	
			Street Jamal Abdul Nasser	
			Shaabiyat Hay Alwehda	
			Shabiyat Huissa	
			Dhay Al-Helal	
			Tariq Azzahra, Shohadaa Azzawya	
			Qamouda	
			Nasrat	
			Al-Istithmar	
			Assmariyat	
			Sayda Zeinab	
			Achourafaa	
			Assabreya	
			Adhaman	
			Al-Iyada Al-Mujamaa	
			Akalfat	
			Almidan	
			Alwalani	
			Ben Youssef	
			Bir Bni Hsin	
			Street Omar Almokhta	
			Shaabiyat Al-Mouthalath	
			Abd Al-Wahed	

					Uqba ibn Nafi Other (please specify) Don't know Prefer not to to answer	
	36	KII	Reasons behind difficult access to healthcare among DCUs	(<i>If yes</i>) Why is access easier there compared to this part of the city?		DCU-level
4. To what extent do Libyans and migrants develop coping capacities and strategies to compensate for a lack of access to basic services in Azzawya?	37	КІІ	Migrants' coping strategies to a lack of healthcare-related services in this DCU	<i>(If yes)</i> How do migrants from your region of origin cope with a lack of access to healthcare services in this part of the city?	Select multiple: Use alternative medicine • Moving to another part of the city • Resorting to individuals with no professional training • Using expired medicines • Self-medication • Other (please specify) • Don't know • Prefer not to answer	DCU-level
	38	КІІ	Type of means of transportation used to move across DCUs to access healthcare	(If moving to another part of the city)With which means of transportation?	Select multiple: By foot on their own • by car on their own • by taxi on their own • With the support of a smuggler • With the support of the employer • Other (please specify) • Don't know • Prefer not to answer	DCU-level

2. To what extent are basic services functional and accessible to residents in Azzawya?	39	KII	% of migrant children accessing education in this DCU	Can you estimate what percentage of migrant children (from your region of origin) attend schools in this part of the city?	0% • 10% or less • 11 -20% • 21-30% • 31- 40% • 41-50% • 51-60% • 61-70% • 71-80% • 81-90%; 91-100% • Don't know • Prefer not to answer	DCU-level
Azzawya :	40	KII	Type of school accessed by migrant children in this DCU	What kind of schools do migrants access in this part of the city?	Select multiple: Public schools • Private schools • Religious institutions • International schools • Other (please specify) • Don't know • Prefer not to answer	DCU-level
	41	KII	N/A	Google Maps: "Which education facilities are accessed by migrants children? (from your region of origin) Have a look at the schools that are already mapped. Please select the layer "Education" and click on each education facility. Indicate "Yes" if migrants children are using the facility and "No" if they don't. If any facility is being used by migrants but is not yet on the map, please add a new marker. Indicate their type in the appropriate box (public, private, informal,) and the level of education (primary school, secondary school,)		DCU-level
	42	КІІ	Type of education facilities accessed by migrant children in this DCU	Do you know about any humanitarian actors providing education and vocational training	Yes • No • Don't know • Prefer not to answer	DCU-level

			to migrants from your region of origin in this part of the city?		
43	KII	Barriers faced by migrants in accessing education in this DCU	What are the main barriers that may have prevented some migrant children (from your region of origin) from accessing education in this part of the city?	Select multiple: No barriers • Unable to afford education (please specify of which type of facility) • Unable to speak Arabic • Access is not allowed to any migrant children • Access to school is allowed only to migrnt children from some countries of origin (please specify) • Lack of means of transportation to reach the facility • The road to school is unsafe • Lack of information about accessible education facilities • Fear to be arrested • Not interested to access education (migrant workers) • Not enough teachers/Overcrowding in classrooms • Untrained teachers • Not enough school materials available • Lack of infrastructure in school buildings (electricity, latrines, furniture) • Cost of materials/books • School environment is insecure • Education is not seen as important • Early marriage causes children to leave school • Schools are not separated among Libyans and non-Libyans • Mismatch between Libyan schools curricula and curricula in countries of origin • Other (please specify) • Don't know • Prefer not to answer	DCU-level

	44	KII	Most vulnerable migrant groups in relation to access to education	What are the groups of migrant children (from your region of origin) of origin that have greater difficulty accessing education in this part of the city?	Select multiple: No group has greater difficulty accessing education than others • Girls • Children of certain age groups • Non- Arabic speaking children • Children from some countries of origin • Unaccompanied and separated children (UASC) • Other (please specify) • Don't know • Prefer not to answer	DCU-level
4. To what extent do Libyans and migrants develop coping capacities and strategies to compensate for a lack of access to basic services in Azzawya?	45	KII	Migrants' coping strategies to a lack of education-related services in this DCU	How do migrant children (from your region of origin) cope with a lack of access to education services in this part of the city?	Select multiple: No access to any form of education because no informal options available • No access to any form of education because it is not a priority • Moving to another area • Taking individual classes • Learning through the support of other migrants • Courses provided by humanitarian actors • Religious institutions (mosques, churches, etc.) • Other (please specify) • Don't know • Prefer not to answer	DCU-level
Azzawya :	46	KII	Type of means of transportation used to move across DCUs to access education	<i>(If moving to another part of the city)</i> With which means of transportation?	Select multiple: By foot on their own • by car on their own • by taxi on their own • With the support of a smuggler • With the support of the employer • Other (please specify) • Don't know • Prefer not to answer	DCU-level
	47	КІІ	Reasons behind education not being perceived as a priority by migrants	(If no access because it is not a priority) Can you explain why it is not a priority?		DCU-level

2. To what extent are basic services functional and	48	migrants in accessing education compared to other DCUs	Do migrant children (from your region of origin) have greater difficulty accessing education in this part of the city compared to other areas?	Yes • No • Don't know • Prefer not to answer	DCU-level
accessible to residents in Azzawya?					

Awlad Jarboo Awlad Sakr Awlad Sula Awlad Ajina Balbi Bahr Assamah Ben Osman Bir Arrtimat Bir Terfas Bir Maamer					Awlad Sula Awlad Ajina Balbi Bahr Assamah	
---	--	--	--	--	--	--

South of Al-Harsha
Joudaim
Dila
Saban
Souk Al-khoudhra
Souk Alsai
Souk Alasr
Street Al-jomla
Street Jamal Abdul Nasser
Shaabiyat Hay Alwehda
Shabiyat Huissa
Dhay Al-Helal
Tariq Azzahra, Shohadaa Azzawya
Qamouda
Nasrat
Al-Istithmar
Assmariyat
Sayda Zeinab
Achourafaa
Assabreya
Adhaman
Al-Iyada Al-Mujamaa
Akalfat
Almidan
Alwalani
Ben Youssef
Bir Bni Hsin
Street Omar Almokhta
Shaabiyat Al-Mouthalath
Abd Al-Wahed
Uqba ibn Nafi
Other (please specify)
Don't know
Prefer not to to answer

	50	KII	Reasons behind migrants' easier access in given neighbourhoods	(If yes) Why is access easier there?		DCU-level
3. What are the perceptions and expectations of Libyans and migrants regarding delivery of basic services in Azzawya?	51	KII	Migrants' perceived quality of education in this DCU	How do you judge the level of quality of the education accessed by migrant children (from your region of origin) in this part of the city?	Excellent • Good • Acceptable • Poor • Very poor • Don't know • Prefer not to answer	DCU-level
	52	КІІ	Reasons behind perceived quality of education in this DCU	Why?		DCU-level
2. To what extent are basic services functional and accessible to residents in Azzawva?	53	KII	Migrants' greatest expenditure	What is the greatest expenditure of migrants (from your region of origin) in this part of the city?	Food • water • fuel • non-food items • transportation (including smuggler) • healthcare • education • shelter • other (please specify) • Don't know • Prefer not to answer	DCU-level
Azzawya?	54	KII	Migrants' second greatest expenditure	What is the second greatest expenditure of migrants (from your region of origin) in this part of the city?	Food • water • fuel • non-food items • transportation (including smuggler) • healthcare • education • shelter • other (please specify) • Don't know • Prefer not to answer	DCU-level

55	KII	Migrants' third greatest expenditure	What is the third greatest expenditure of migrants (from your region of origin) in this part of the city?	Food • water • fuel • non-food items • transportation (including smuggler) • healthcare • education • shelter • other (please specify) • Don't know • Prefer not to answer	DCU-level
56	KII	Migrants' greatest priority need	What is the greatest priority need of migrants (from your region of origin) in this part of the city?	Food • water • fuel • non-food items • transportation (including smuggler) • saving for an emergency situation • sending money home • healthcare • education • shelter • other (please specify) • Don't know • Prefer not to answer	DCU-level
57	KII	Migrants' second greatest priority need	What is the second greatest priority need of migrants (from your region of origin) in this part of the city?	Food • water • fuel • non-food items • transportation (including smuggler) • saving for an emergency situation • sending money home • healthcare • education • shelter • other (please specify) • Don't know • Prefer not to answer	DCU-level
58	KII	Migrants' third greatest priority need	What is the third greatest priority need of migrants (from your region of origin) in this part of the city?	Food • water • fuel • non-food items • transportation (including smuggler) • saving for an emergency situation • sending money home • healthcare • education • shelter • other (please specify) • Don't know • Prefer not to answer	DCU-level
59	KII	Type of core food items bought by migrants in this DCU	What are the core food items that migrants (from your region of origin) buy in this part of the city?	Select multiple: bread • flour • rice • pasta • couscous • beans • meat • fish • eggs • milk • fresh vegetables • cooking oil • salt • sugar • Other (please specify) • Don't know • Prefer not to answer	DCU-level
60	KII	Type of NFIs bought by migrants in this DCU	What are the non-food items that migrants (from your region of origin) buy in this part of the city?	Select multiple: fuel • cooking fuel • hygiene items • bottled water • cooking utensils • clothing • shoes • blankets • Other (please specify) • Don't know • Prefer not to answer	DCU-level

61	KII	N/A	Google Maps: "Where are the marketplaces accessed by migrants? Have a look at the marketplaces that are already mapped. Please select the layer "Marketplaces" and click on each of the marketplaces. Indicate "Yes" if migrants are using them and "No" if they don't. If migrants are using marketplaces that are not yet on the map, please add a new marker or area. Indicate what types of goods are mostly purchased (meat, fresh vegetables, clothing,)		DCU-level
62	KII	N/A	Aside from marketplaces, from what other sources do migrants from your region of origin commonly purchase core food and non-food items? Possible answers may include small neighbourhood groceries, large standalone supermarkets, or pharmacies, among others. If respondents mention specific businesses, please place these businesses into more general categories.	Select multiple: small neighbourhood groceries • large standalone supermarkets • pharmacies • Other (please specify) • Don't know • Prefer not to answer	DCU-level

63	KII	Barriers faced by migrants to access to food and non food items in this DCU	What are the main barriers that prevent migrants (from your region of origin) from purchasing core food and non-food items in this part of the city?	Select multiple:No barriers • Migrants are not accepted (discrimination) • Migrants pay more for the same items than Libyans • Linguistic barriers • Unsafe for migrants to shop in this part of the city • Access to some stores not allowed to migrants • Access to some stores not allowed to some migrant groups (please specify) • Deterioration of economic means to meet basic needs • Market items are sometimes not available • Market items are available, but are too expensive • Libyan markets do not offer items that migrants use • Stores or marketplaces are closed or non- functional • Access to marketplaces is unsafe • Fear to be arrested • Stores or marketplaces are functioning, but at unpredictable times • Insecurity or checkpoints make it difficult to access markets • Other (please specify) • Don't know • Prefer not to answer	DCU-level
64	KII	N/A	Google Maps: Please select the layer "poor access to markets" and draw any area where finding core food or non-food items of interest to migrants (from your region of origin) is particularly challenging? For each area that you add, please mention why they are particularly challenging in the relevant box: is it due to geographical reasons (for example, too far from the nearest market, checkpoints make it difficult to move goods in and out, etc.) or due to characteristics of		DCU-level

				the local population (for example, residents of this area are marginalised due to poverty or some other reason).		
3. What are the perceptions and expectations of Libyans and migrants regarding delivery of basic services in Azzawya?	65	KII	Migrants' perceived quality of marketplaces in this DCU	How do you judge the quality of marketplaces in this part of the city?	Excellent • Good • Acceptable • Poor • Very poor • Don't know • Prefer not to answer	DCU-level
	66	КІІ	Reasons behind perceived quality of marketplaces in this DCU	Why?		DCU-level
2. To what extent are basic services functional and accessible to residents in Azzawya?	67	KII	Migrants' sources to access cash	What are the main sources that migrants (from your region of origin) use to obtain Libyan dinars for day-to-day use?		DCU-level

	68	KII	Migrants' barriers to access cash in this DCU	What are the greatest barriers that migrants (from your region of origin) face in accessing cash in this part of the city?	Select multiple: Insecurity (risk of robbery) • not being paid by the employer • the employer faces liquidity problems • other (please specify) Don't know • Prefer not to answer	DCU-level
4. To what extent do Libyans and migrants develop coping capacities and strategies to compensate for a lack of access to basic services in Azzawya?	69	KII	Migrants' coping strategy to mitigate a lack of access to cash in this DCU	What strategies do migrants (from your region of origin) from your region of origin use to try to mitigate this issue?	Select multiple: Get debt from shop owners • Borrow money from friends • Pay in kind • Begging • Borrow from employer • Find employment paying in-kind accommodation or food • Ask the mosque / church for help • Ask local NGO for help • Ask international organisation for help • Other, please specify • Don't know • Prefer not to answer	DCU-level
2. To what extent are basic services functional and accessible to residents in Azzawya?	70	KII	N/A	Google maps: Where are the bakeries accessed by migrants? Have a look at the bakeries that are already mapped. Please select the layer "Bakeries" and click on each of the bakeries. Indicate "Yes" if migrants are using them and "No" if they don't. If migrants are using bakeries that are not yet on the map, please add a new marker.		DCU-level

	71	KII	Humanitarian aid provided by local or religious authorities in this DCU	Since January 2018, have any local or religious authorities offered any type of humanitarian assistance to migrants (from your region of origin) in this part of the city? "Humanitarian assistance"= Any aid distributed to help people cope with or recover from the effects of the current conflict, whether it is distributed by the local authorities, a religious organisation, a Libyan civil society organisation, or an international organisation (including the United Nations). Humanitarian assistance can come in many different forms: in- kind (i.e. physical boxes of food or supplies), cash (i.e. a sum of money that does not need to be repaid to help a household meet certain needs), services (i.e. a medical check-up, legal aid, or some other type of help offered for free), or a mixture of all of these. Humanitarian assistance should not include any programs that existed before 2011, such as social welfare programs, zakat, etc., unless these programs have been specifically repurposed to help people cope with or recover from the effects of the current conflict.	Yes • No • Don't know • Prefer not to answer	DCU-level
--	----	-----	--	--	--	-----------

	72	КІІ	Type of humanitarian assistance provided by local or religious authorities in this DCU	(if yes) What kind of humanitarian assistance did they provide?	Select multiple: Food • Non-food items (NFIs) • Shelter • Water • Sanitation or hygiene • Health • Education • Protection • Cash-based interventions • Other (please specify) • Don't know • Prefer not to answer	DCU-level
	73	KII	Humanitarian assistance provided by Libyan organisations in this DCU	Since January 2018, have any Libyan organisations offered any type of humanitarian assistance to migrants in this part of the city?	Yes • No • Don't know • Prefer not to answer	DCU-level
	74	КІІ	Type of humanitarian assistance provided by Libyan organisations in this DCU	(if yes) What kind of humanitarian assistance did they provide?	Select multiple: Food • Non-food items (NFIs) • Shelter • Water • Sanitation or hygiene • Health • Education • Protection • Cash-based interventions • Other (please specify) • Don't know • Prefer not to answer	DCU-level
2. To what extent are basic services functional and accessible to residents in Azzawya?	75	КІІ	Humanitarian assistance provided by international organisations in this DCU	Within the past year, have any international organisations offered any type of humanitarian assistance to migrants (from your region of origin) in this part of the city?	Yes • No • Don't know • Prefer not to answer	DCU-level
	76	КІІ	Type of humanitarian assistance provided by international organisations in this DCU	(if yes) What kind of humanitarian assistance did they provide?	Select multiple: Food • Non-food items (NFIs) • Shelter • Water • Sanitation or hygiene • Health • Education • Protection • Cash-based interventions • Other (please specify) • Don't know • Prefer not to answer	DCU-level
	77	KII	N/A	Google Maps: Have these offers of humanitarian assistance been restricted to any particular areas of this part of the city? Please select the layer		DCU-level

				"Humanitarian Assistance" and draw the areas in which humanitarian assistance has been distributed.		
	78	KII	Most vulnerable migrant groups tageted by humanitarian aid	Are there particular groups among migrants (from your region of origin) who have been the focus of humanitarian assistance efforts in this part of the region?	Yes • No • Don't know • Prefer not to answer	DCU-level
	79	KII	Type of vulnerable groups targeted by humanitarian aid	(If yes) which groups, and why?		DCU-level
	80	KII	Known migrant groups having received humanitarian assistance	Have you or any other migrant (from your region of origin) received any type of humanitarian assistance?	Yes • No • Don't know • Prefer not to answer	DCU-level
3. What are the perceptions and expectations of Libyans and migrants regarding delivery of basic services in Azzawya?	81	KII	Migrants' perceived quality of humanitarian assistance received	<i>(If yes)</i> How would you judge its quality?	Excellent • Good • Acceptable • Poor • Very poor • Don't know • Prefer not to answer	DCU-level
	82	KII	Reasons behind perceived quality of humanitarian assistance in this DCU	(If yes) Why?		DCU-level