

Input to the OHCHR consultation for the Human Rights of Migrants report 2020 February, 28

The International Rescue Committee (IRC) is a leading global humanitarian organisation working with people whose lives and livelihoods have been shattered by conflict and disaster, helping them to not only survive, but to recover and gain control over their futures.

This input is intended to provide an overview of the situation of migrants in Libya and Niger where IRC has been working in mixed migration since 2017, while also highlighting challenges and achievements from our work on the ground.

Central Mediterranean protection overview as based on IRC's experience & programs:

- Migration through Africa is not a new phenomenon, and Europe was not the intended destination for up to two-thirds of those migrants who have come to Libya. In fact, more than 80 percent of migrants in Africa have no intention of leaving the continent (<u>IOM</u>).
- Though north-bound flows have appeared to decrease since surges in 2015 and 2016, irregular migration in West Africa has become more dangerous and abuse and exploitation are common. The situation of migrants taking the Central Mediterranean route remains one of the most dangerous journeys in comparison with the Eastern and Western routes¹. According to IRC's experience working in mixed migration in West and North Africa since 2017 this includes: physical and sexual abuse (including from security forces and criminal gangs), detention (in Libya), death (at sea and on land/desert), and forced returns (especially from Algeria to Niger).
- The absence of legal channels for both migrants, asylum seekers as well as refugees waiting to be resettled in Europe fuels *smuggling* something which exposes refugees and migrants to *abuse* and *exploitation*. Evidence shows that many migrants only turn to smugglers having exhausted all possible legal options available.
- The number of irregular migrants crossing the Central Mediterranean in January 2020 more than doubled from December 2019 to nearly 1 500. Simultaneously, the number of interceptions at sea have increased² despite ongoing conflict leading to further protection risks of migrants caught in the frontlines of the fighting.
- Due to the lack of accepted systems to track those who are intercepted at sea, we cannot know the fate of migrants who are brought back to Libya by the Libyan Coast Guard (LCG). Those who are intercepted at sea, are still disembarked in country and sent to one of the detention centers³ that are under the sight of the Ministry of Interior (commonly called "official DCs"). These facilities are often overcrowded, exposing migrants to dire conditions such as poor daily intake of nutrients, unsanitary conditions, and increased risk of tuberculosis.
- Conditions across DCs are known to be equally dire, with the detained population exposed to
 human rights violations, including forced labour, extortion, and torture. In Tripoli, some of these
 centres are in the vicinity of the active conflict, or are being used as weapon storage, making

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¹ Despite the number of arrivals having considerably decreased in comparison with 2018 and 2017, the Central Mediterranean accounts for the most number of deaths recorded: <u>1,866 in 2019</u>.

²https://www.infomigrants.net/en/post/22100/nearly-1-000-migrants-taken-back-to-libya-in-the-first-two-weeks-of-2020

³ Estimated number: 26 DCs



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them *vulnerable to targeted attacks*. As violence intensifies, this remains one of the highest risks for those trapped in detention.

- Number of people crossing this route in both directions is expected to increase. Fighting in Libya is getting worse, and the protection environment for those recently released from the Gathering and Departure facility is shrinking while significant immediate needs remain unmet⁴. The most vulnerable released people are in urgent need of *physical protection* following release, in the form of cash assistance and safe shelter, among other basic needs that are not being adequately addressed.
- Migrants remain trapped in Libya due to a lack of options to safely reach Europe, and, in many cases, the inability to return home due to lack of funds and regular mechanisms facilitating returns. The majority of migrants in Libya reside in communities as opposed to detention centres. The situation is equally dire for those in urban areas, who fear arrest, further harm, and detention. Consequently, the majority of them remain invisible and without access to lifesaving services, including healthcare and protection.
- Situation is not better for migrants in Niger, a country at the crossroads of increased instability and political violence. Although reported numbers of people moving towards North Africa is higher than those returning⁵, migrants in Niger report feeling stuck in transit in *protracted vulnerable situations in need of health care, livelihoods, and other basic services*, according to our staff on the ground. Many stay in Agadez unwilling to continue their dangerous journey. Returning home is also not an option. Social pressures to migrate, fuel *fears of shame, stigmatization and marginalization by their family and/or communities for coming back with less than what they had when they began their journey, and in some cases in dept as many migrants leave with financial support from their peers and families. These migrants are in urgent need of <i>psychosocial support and counselling*, while more needs to be done to raise awareness about the social impacts of reintegration to avoid negative coping mechanisms.
- Equally, donors must invest in and address the needs of communities: communities of origin who shape migrants' perceptions of migration as the only opportunity to succeed amid scarce resources fueled by climate change and lack of livelihood opportunities to thrive, as well as the needs of communities along the route who are affected by migration. More investment is needed in social cohesion programs as well as initiatives that tackle barriers to voluntary returns, particularly reintegration.
- Many migrants returning from the Sahara region are not only suffering from a sense of shame or guilt – they are also under *severe psychological strain* as a result of what has happened to them since their departure⁶.
- While much attention has been given to the search and rescue operations at sea, saving lives in the desert needs an equal attention. IOM say they have rescued nearly 20,000 people from the

⁴ 200 detained migrants and refugees have been relocated into urban settings while an additional 300 were provided assistance via the UNHCR led Community Development Center.

⁵ https://reliefweb.int/sites/reliefweb.int/files/resources/FCR%20December%202019-6 published.pdf ⁶https://www.infomigrants.net/en/post/20182/one-failed-journey-is-not-the-end-of-your-life-fighting-the-stigma-of-return



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Sahara in Niger in the past three years.⁷ But the actual number is probably much higher. Most of them were sub-Saharan African migrants rounded up in Algeria by authorities who sent them back over the border into Niger

- The perils migrants face in Niger are also due to the *ongoing expulsion of sub-Saharan migrants from Algeria* that get "dropped off" at the Algerian border at "point zero". They have to make their way across the desert by foot, without water and food, for 15 km until the nearest village of Assamaka. Not all of them make it to the village under these conditions.
- Amongst the migrants deported from Algeria are also unaccompanied children who were separated from their families and caregivers and expelled by the Algerian authorities after being arbitrarily detained with little to eat and no mattresses⁸. There is no consideration given to international conventions that prohibit expulsion of migrant workers and their families as well as the detention of children, including family separation.⁹ More needs to be done to ensure the principle of non-refoulement is applied to refugees and migrants equally.
- The respect for human rights and the principle of non-refoulement should be at the core of any bilateral action including forced returns.

What is the IRC doing to address these challenges?

Libya:

- The IRC has been operating in Libya since September 2016, where we provide life-saving healthcare and protection services to Libyans and non-Libyans impacted by chronic instability and conflict. Our health teams work in Misrata, Tripoli and Zliten, while our protection teams work also in Tawergha, in an integrated and mobile approach to ensure the most at risk and invisible people on the move are reached and their needs addressed.
 - To address the humanitarian needs of those intercepted at sea, IRC will provide immediate lifesaving emergency health care services, such as medical emergency screening and emergency referrals, for those disembarked in western Tripoli to Misrata and in urgent need of medical care, starting March 2020. While acknowledging that Libya is not a place of safety for anyone, we abide by the humanitarian imperative to save lives in a country with limited protection mechanisms for people on the move.
 - To address the needs of migrants and refugees in detention, the IRC:

⁷https://www.euractiv.com/section/global-europe/news/20000-migrants-rescued-from-sahara-in-three-years-iom/

⁸ https://www.hrw.org/news/2017/10/30/algeria-surge-deportations-migrants

⁹ Such as: International Convention on the Protection of the Rights of All Migrant Workers and Members of their Families,he 1987 Convention against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment, UNCRC (all binding international agreements)



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- has continuously advocated with the Humanitarian Country Team, the Migrants and Refugee Platform and with the European governments, to scale up diplomatic efforts with the Libyan authorities, in order to put an end to the practice of arbitrary detention, to immediately release migrants and refugees in a safe and dignified manner and to provide appropriate durable solutions such as resettlement and short term and longer term solutions for migrants and refugees in urban settings.
- has developed the Principled Framework for Working in Detention as part of the Migrants and Refugee Platform (that IRC Libya is also co-chairing with IOM and UNHCR) which will regularise the humanitarian interventions in these facilities in line with the humanitarian principles, standards and laws.
- is currently operating in Triq al Sikka detention centre, in Tripoli, where we provide critical primary health care services to between 500 and 700 refugees and migrants. The centre was affected by a tuberculosis outbreak in 2019 to which IRC responded and ensured emergency referrals for 122 cases.
- o To address the needs of those released from detention, IRC also works closely with UNHCR and the Libyan Red Cross to relocate migrants from detention via the Emergency Transit Mechanism to Rwanda and Niger. The IRC provides food, primary health care and recreational activities. So far, around 100 migrants have been relocated from detention via this system in the last 2 months.
- To ensure vulnerable migrants in urban areas are reached with services, the IRC
 - has adopted a mobile approach by working through existing health facilities and community centers, as well as directly in the migrant communities through key focal migrant focal points that the IRC hires as Community Outreach Volunteers; CoVs are migrants themselves from the communities we target. Last year, we provided almost 10,000 outreach activities to raise awareness of the IRC's service delivery for the most vulnerable migrants and refugees in urban areas in Tripoli and Misrata.
 - is working to change the negative attitudes of Libyan medical staff in providing the necessary care to migrants and refugees. Since September 2019, the IRC has also been providing systems strengthening support in the form of training and mentorship to combat discriminatory practices against migrants and ensure the provision of quality medical services, thus increasing access for migrants to the much needed health care. The ongoing conflict only exacerbates their needs while funding for direct medical service delivery, especially for communicable and non-communicable diseases remains scarce.

Niger:

Since 2017, the IRC has been operating in Agadez and Arlit to meet the most urgent needs of
migrants, refugees, returnees and host communities. We provide life-saving protection services,
food and legal assistance to migrants while strengthening social cohesion among migrants and the
local community. More than 8,000 migrants have been reached through sensitization sessions on
the risks and dangers of irregular migration while more than 500 benefitted from legal assistance
and protection services in 2019.

INTERNATIONAL RESCUE

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- O To address the needs of Nigerien returnees, the IRC provides assistance through the registration and distribution of food, non-food items, dignity and baby kits to allow them to transit in the best conditions. The latest distribution occurred on February 27, 2020; our team distributed non-food items to 378 Nigerien migrants who were expelled from Algeria two days prior. Our team has supported almost 2,100 forcibly returned migrants only this month.
- O To support migrants in reception sites and ghettos in Agadez and Arlit, the IRC provides psychosocial support and case management for survivors of gender based violence, unaccompanied children who were forcibly separated from their families and caregivers, and people with specific needs. The IRC Niger team provides referrals to the most vulnerable migrants to appropriate care facilities, provides access to a free telephone line to those who seek to reconnect with family, and cash assistance to cover immediate basic needs.
- o To address the legal barriers that expose migrants to protection risks, IRC is providing legal assistance to migrants by supporting the regularization of their status, sensitizing them on their rights and duties and raising state and non-state actors awareness of the international and regional conventions governing migrants' rights.