BRIEFING NOTE

“YOU’RE GOING TO DIE HERE”

ABUSE IN ABU SALIM AND AIN ZARA DETENTION CENTRES
Refugees, asylum seekers and migrants held inside detention centres in Tripoli, Libya have been assaulted, sexually abused, beaten, killed and systematically deprived of the most basic humane conditions, including proper access to food, water, sanitation and medical care.

Over the course of 2023, until MSF ended its medical activities in Tripoli, MSF teams witnessed and documented living conditions and abuses inside Abu Salim and Ain Zara detention centres, where thousands of people, including women and children, continue to be arbitrarily detained.

After seven years of providing medical and humanitarian care to people held in detention centres in Tripoli, the situation remains largely unchanged. For seven years our teams have continued to witness the desperate situation of thousands of people, condemned to languish in detention centres or left to survive on their own outside, trapped in an endless cycle of violence. This appalling reality is a direct reverberation of the harmful European migration policies aimed at preventing people from leaving Libya at all costs and forcefully returning them to a country that is not safe for them.

MSF calls for an end to arbitrary detention in Libya, and calls for all refugees, asylum seekers and migrants to be released from detention and provided with meaningful protection, safe shelter, and safe and legal pathways out of Libya.

BACKGROUND

Until August 2023, teams from Médecins Sans Frontières/Doctors Without Borders (MSF) provided medical and humanitarian assistance to migrants, asylum seekers and refugees held in five detention centres in Tripoli, Libya, managed by the Libyan Directorate to Combat Illegal Migration (DCIM). MSF provided detained people with basic medical care, referral to secondary healthcare facilities for life-threatening conditions, mental health support and antenatal and postnatal care, and facilitated their access to protection services. MSF also treated patients for medical conditions and violence-related injuries sustained in the detention centres.

Teams from other international aid organisations, including the International Organization for Migration (IOM), the United Nations High Commissioner for Refugees (UNHCR) and the International Rescue Committee (IRC), also made regular visits to the detention centres.

Since 2016, MSF has regularly denounced the inhumane system by which migrants, asylum seekers and refugees in Libya are subjected to arbitrary detention and the cycle of abuse following EU-sponsored interceptions at sea and forced returns to Libya. The UN has described the treatment of migrants in Libya as a crime against humanity.1

Abu Salim detention centre reopened in mid-October 2022 after being closed for nine months for refurbishment.2 Since then, it has been used to detain women and children, and in many instances unaccompanied children, after the closure of Shari Al-Zawiya detention centre. Before January 2022, it was used as a detention facility for men and was notorious for the wide range of abuses committed there.

Ain Zara detention centre is currently the main detention centre in Tripoli.3 MSF teams provided medical care to detained people there from November 2021 to August 2023. During this time, MSF regularly expressed its concerns regarding mass and widespread violence in the detention centre, excessive overcrowding, and the limited access of detained people to protection services.

2 For Abu Salim DETENTION CENTRE, this note covers the period since its opening: October 2022 – July 2023.
3 For Ain Zara DETENTION CENTRE, this note covers the period following the issuance of the 2022 report: January – July 2023.
As a result of speaking out⁴, in January 2022, MSF teams were temporarily denied access to the centre.

In September 2023, a UN Panel of Experts⁵ reported to the UN Security Council⁶ about an “illegal business scheme” with the purpose of obtaining financial and other gains from unlawfully detained migrants under the de facto leadership of Ain Zara detention centre, in which detained people were subjected to “acts that amounted to unlawful detention, cruel, inhuman and degrading treatment, and forced labour.”⁷ The Panel of Experts also reported on the diversion of humanitarian aid by individual guards.⁸

In the course of 2023, MSF’s access to Tariq Al-Sikka and Tariq Al-Mattar detention centres was gradually restricted, but observations and medical data collected by MSF teams suggested that trends of inhumane detention conditions, indiscriminate violence, ill-treatment, forced labour and ransom for release continued unabated. During the first half of 2023, MSF teams visiting Shari Al-Zawiya detention centre were very concerned about the insufficient quantity of food distributed to unaccompanied children detained there, as well as the fact that people in one of the cells were only allowed access to sanitation facilities with the approval from guards, which was at the discretion of individual guards and resulted in severely curtailed access. The centre was closed in June 2023 and allegedly returned to the Ministry of Health.

Abu Salim and Ain Zara are the detention centres where MSF teams gathered most evidence in the course of their medical activities in 2023 and where the most concerning human rights abuses emerged. The evidence presented in this briefing note unequivocally confirms MSF’s concerns about the harmful nature of the detention system; however, it may still present a partial view of the situation in the two centres, due to our teams’ access being impeded, and due to a likely under-reporting of events by detained people. A number of people expressed their fears of retaliation and general concerns for their security should they describe their experiences in the detention centres to MSF teams.

Key concerns in Abu Salim and Ain Zara detention centres

MSF teams visiting Abu Salim detention centre between October 2022 and August 2023 observed awful conditions of detained people, in the treatment of women and children, and in the opportunity for organisations to provide principled humanitarian aid. Particularly concerning were the increasing number of reports of sexual and physical violence, including systematic strip and intimate body searches and rape.

In Ain Zara detention centre, the level of physical violence against detained men was very high, and several deaths were reported to or recorded by MSF teams, who between January and August 2023 also heard reports and saw evidence of forced labour, extortion and other human rights abuses.

In both detention centres, people with particularly acute protection needs are arbitrarily detained for an indefinite period. In general, the physical and mental health conditions treated by MSF teams were directly attributable to or worsened by the extremely poor material conditions and treatment experienced by detained people.

Women, men, children, unaccompanied minors, toddlers, infants and newborn babies suffered greatly due to the arbitrary nature of their detention in inhumane conditions, where they were systematically denied sufficient access to food, water, sanitation, exercise, medical care and basic items such as blankets, clothes, diapers or sanitary pads. They were also detained without either procedural safeguards or legal counsel.

MSF teams experienced frequent obstructions to their provision of humanitarian assistance, including: being allowed only limited access to detention centres and cells in order to conduct medical triage and hold consultations; interference in MSF’s activities; being asked to distribute aid to the guards rather than to the women and children in Abu Salim detention centre; and the confiscation of humanitarian aid provided by MSF and other organisations.

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⁵ Established pursuant to Resolution 1973 (2011) concerning Libya.
⁶ (S/2023/673)
⁸ Ibidem.
I. DETENTION OF INDIVIDUALS WITH PARTICULARLY ACUTE PROTECTION NEEDS

MSF has repeatedly denounced the practice of arbitrary detention in Libya and has called for the release of all detained people. In Abu Salim and Ain Zara centres, MSF teams provided medical treatment to individuals with particularly acute protection needs, including:

- **Newborns, infants, toddlers and older children in Abu Salim detention centre**: Children of all ages are detained in Libya, despite the fact that the UN Convention on the Rights of the Child, ratified by Libya in 1993, provides specific international legal obligations against the arbitrary arrest, detention and imprisonment of children.9
  - **Unaccompanied children**: Following the closure of Shari Al-Zawiya detention centre at the end of June 2023, 93 unaccompanied children, including five girls, were transferred to Abu Salim detention centre, and transfers continued to take place. In Ain Zara detention centre, on multiple occasions MSF teams encountered unaccompanied children as young as 10 years old who were detained alongside unrelated adults.

- **Pregnant women and new mothers in Abu Salim detention centre**: MSF staff provided 306 sexual and reproductive health consultations for pregnant women, new mothers and women transferred to Abu Salim detention centre soon after giving birth. Most of these women showed symptoms of postpartum depression and postpartum psychosis.

- **People with severe mental health issues**: MSF teams visiting both detention centres observed people with severe mental health issues prompted or worsened by arbitrary detention. Two suicide attempts were medically recorded in Ain Zara in June 2023 and others were reported in Abu Salim. MSF teams also provided care to people with psychiatric illnesses in both centres.

- **People with physical disabilities, chronic illnesses and communicable diseases**: MSF teams observed detained people with physical disabilities, including being in a wheelchair; with chronic illnesses such as hypertension, diabetes, epilepsy, anaemia and cardiovascular diseases; and with communicable diseases, especially tuberculosis. This was a cause of particular concern as overcrowded and unsanitary detention conditions facilitate the spread of infectious diseases.

- **Survivors of human trafficking and torture**: MSF teams on numerous occasions identified survivors of human trafficking and/or torture inside the detention centres.

- **Cases of family separation**: In several instances, children, women and men were separated from family members, leading to anxiety and depression due to not knowing their whereabouts.

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II. MEDICAL CONDITIONS DIRECTLY ATTRIBUTABLE TO MATERIAL CONDITIONS

The majority of medical conditions treated by MSF teams were either directly attributable to the extremely poor material conditions in detention centres or were worsened because of them. Living conditions in the centres were marked by overcrowding that regularly prevented MSF teams from carrying out medical triage inside the cells, poor hygiene levels, and denial of proper access to food, water, essential relief items, sanitation, exercise and medical care.

Medical conditions treated by MSF teams included respiratory tract infections, generalised non-specific pain, skin and soft tissue diseases, and upper gastrointestinal disorders. MSF staff also treated and provided follow-up to people living with chronic illnesses. Their detention, and in particular the associated poor nutrition, poor hygiene and lack of opportunity to exercise, had a detrimental impact on their health condition. MSF noted that detained people were frequently transferred between cells and detention centres, making follow-up and continuity of treatment extremely difficult.

The mental health and wellbeing of the detained people can be described as very poor. MSF teams observed over the months an increase in the number of detained people suffering from anxiety, insomnia, overthinking and psychological trauma. The severe stress of arbitrary detention, worsened by inhumane living conditions and ill-treatment, was a key factor leading to the observed symptoms.

The appalling conditions in the detention centres also had an adverse effect on people’s ability to rest. Patients visited by MSF staff were often agitated and, due to a lack of hope for the future, frequently presented with a depressed or ruminative mood and thoughts of suicide. Detained people further suffered from anxiety due to the separation from their families and the lack of an adequate support system to help them cope with stressful situations. For instance, one man said he had been arrested with his wife and two children, but while his wife and children were detained in Abu Salim detention centre, he was transferred to Ain Zara. Moreover, referrals of detained people to secondary health facilities were only possible when a severe presentation of symptoms was identified, negatively affecting their prognosis.

Overcrowding

Overcrowding was fluctuating yet chronic in both detention centres during the period in which MSF teams were able to make visits. This resulted in various medical conditions, including sleep deprivation among patients, who presented with hallucinations, disorganised behaviour and agitation. In June 2023, the total population of Ain Zara detention centre reached around 2,700. On several occasions, MSF teams estimated that between 450 and 550 people were accommodated in a single cell, with peaks of 675 people in one cell. Such overcrowding prevented MSF from performing adequate medical triage.

Due to insufficient space and a shortage of mattresses in Ain Zara detention centre, detained people reported being forced to share a mattress with up to five people, resorting to sleeping in the bathrooms, or even sleeping in a sitting position. Overcrowding also led to sanitary issues, including dirty and unhygienic cells, flooding of septic tanks, and clogged toilets. Detained people often refrained from eating and drinking to minimise bathroom use, making them prone to dehydration and constipation. In Abu Salim detention centre, women had to share a mattress between two or sleep on the ground. In April, MSF witnessed an increase in cases of suspected chicken pox, which spreads quickly in overcrowded places with inadequate hygiene.

Poor food and water

MSF staff treated detained people for medical conditions linked to limited and poor-quality food and water. In Abu Salim detention centre, the food quantity was insufficient and the quality not suitable for infants and children. The women reported always feeling hungry, while their children were irritable due to lack of food. During power cuts, the water treatment units could not provide drinking water. In Ain Zara detention centre, drinking water was sometimes cut off for extended periods of up to seven days; at other times it was only available for a few hours a day. Again, food quality was poor and food quantity was insufficient. MSF mental health teams attended to many patients with high levels of agitation symptoms, physical stress and fatigue due to insufficient food and water intake.
**Dire sanitary conditions**

The unhygienic environment also contributed to skin infections and acute watery diarrhoea, while the absence of infection prevention measures facilitated the spread of infectious diseases. In Abu Salim detention centre, toilets were often blocked and caused flooding. Because of limited cleaning materials, MSF teams frequently noted a strong smell of urine in the cells. In Ain Zara detention centre, water for washing and personal hygiene supplies were frequently unavailable, preventing detained people from maintaining adequate personal hygiene. MSF detected, treated and, when needed, referred to secondary healthcare facilities an increasing number of patients with scabies, conjunctivitis, chicken pox and diarrhoeal diseases.

**Shortage of essential relief items**

Essential relief items such as clothing, sandals, mattresses, blankets, hygiene kits and diapers were distributed irregularly and were reportedly regularly confiscated by the guards. In Abu Salim detention centre, MSF noticed the impact on babies’ skin from makeshift diapers made from towels and plastic bags, or from the prolonged use of diapers. Due to a lack of menstrual hygiene products, women reportedly used pieces of blanket or T-shirt as makeshift tampons or sanitary pads. In Ain Zara detention centre, many detained people lacked blankets and winter clothes to protect themselves from the cold and from rain leaking into the cells from holes in the ceilings. Newly arrested individuals sometimes went for extended periods without basic essentials such as mattresses, blankets and clothing if they arrived between distributions.

**III. LACK OF ACCESS TO LIFESAVING CARE**

People detained in Abu Salim and Ain Zara detention centres had insufficient access to lifesaving medical care. International aid organisations, including MSF, were often refused entry to the detention centres and to cells, and had a limited possibility of conducting medical triage inside the cells, either due to being refused entry by the centre’s administration or due to severe overcrowding. As a consequence, detained people in need of medical care were at risk of being excluded from receiving assistance. Symptoms and medical consequences for people with chronic illnesses or life-threatening conditions, such as tuberculosis or HIV/AIDS, can worsen and sometimes have irreversible effects due to delayed or lack of timely medical attention.

In Abu Salim detention centre, people with chronic illnesses were prevented from seeing a doctor, which led to them needing hospital care. Women in need of urgent antenatal care were ignored, despite asking for assistance.

**IV. DEATHS IN DETENTION**

MSF teams heard reports of at least five deaths in Ain Zara detention centre as a result of violence or lack of access to lifesaving medical care. In March 2023, an unconscious man with severe head trauma was referred to Al-Rayan clinic. MSF was informed that the man had tried to escape and had fallen from the roof – an account of events that is impossible to confirm. He later died from his injuries. In another incident in April 2023, a Sudanese man was shot dead allegedly during an escape attempt.

“Guards took 15 to 20 detainees out to the yard, the ones they had identified as the ones trying to escape. In the yard, one of the Sudanese attempted escaping, but he was shot and is reportedly dead. From the group of 15 to 20 people, one was returned to the cell. The others were taken to the administration building for isolation.”

- Anonymous

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10 All people who shared a testimony with MSF requested it to remain anonymous, given the elevated risk of retaliation in the context of Libya.
MSF was informed of three detained people who died inside Ain Zara detention centre due to a lack of access to timely and appropriate medical assistance. One Nigerien man allegedly died in January 2023 due to sickness and lack of access to medical care. In April 2023, another young Nigerien man died: the man was allegedly seen by IOM’s medical team two days prior to his death. On the day of his death, detained people reportedly called for medical assistance but were ignored.

Detained people further reported the death of a Cameroonian man in mid-June 2023. The man reportedly asked for medical assistance to a ‘detainee guard’ but was refused access to a doctor. His death was confirmed by other international organisations.

MSF also heard reports of deaths in Abu Salim detention centre. A video was shared publicly by Refugees in Libya in August 2023, showing the apparent corpse of a woman believed to have died of tuberculosis.

“On the day of [the Nigerien man’s] death, he looked extremely sick and could not move. They knocked on the door asking for medical assistance. The guards did not respond. The man passed away inside the cell. Afterwards guards asked for the body. When the detainees all refused to carry the body outside the cell, a big number of guards entered the cell. They hit detainees and took the body outside along with two other detainees who knew the victim.”

- Anonymous

V. SEXUAL VIOLENCE: FORCED STRIP AND INTIMATE BODY SEARCHES, SEXUAL ASSAULT AND RAPE

MSF received reports of sexual violence taking place inside Abu Salim detention centre, including forced strip and intimate body searches, sexual assault and rape. MSF teams received multiple accounts of the systematic strip searching of newly arrived women and children. Women were reportedly gathered in the hangar and ordered to line up before being forced to undress completely. One woman described how they were told to place their clothes and other belongings in front of them and to spread their legs, after which a female guard examined their bodies – including touching their genital areas and their hair – to search for any hidden items. In another reported incident, men from outside the detention centre carried out intimate searches of women, forcing them to strip naked and touching their genitals and breasts. Other women had their genital areas physically searched by female guards while male guards looked on. Children were also forced to strip, and their clothes and diapers were searched. One woman told MSF staff that she was sexually assaulted during a strip search by female guards, who touched and squeezed her breasts to humiliate her. As a result of these experiences, many women and children reported feeling shame, fear and anxiety in addition to other medical conditions.

MSF also received reports of rapes occurring inside Abu Salim detention centre. On one occasion, a woman described how she was taken by a man to a separate room inside the centre, where he assaulted her and ordered her to undress. When she started to cry, he slapped her and told her to be quiet, before threatening to hit her with his gun and then raping her.

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11 “Refugees in Libya” Twitter account, 21.08.2023: https://twitter.com/refugeesinlibya/status/1695733530377534373?s=48&t=FCIn8m66nCzOMnTTZsQ (accessed 15.09.2023)


13 Given the context in which these sexual violence events are taking place, and given the perpetrators and victims, they could be considered to fall under the definition of “conflict-related sexual-violence”.

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BRIEFING NOTE “YOU’RE GOING TO DIE HERE” ABUSE IN ABU SALIM AND AIN ZARA DETENTION CENTRES

MSF, Tripoli, Libya
Another woman recounted how she was taken outside the cell by a female guard, along with two other women:

“As soon as those who work at the prison see women with shapes like mine, they take us to the men. That night, she [the guard] took us to another room in the prison, where there were men without uniforms, but maybe they were guards or policemen. When it was my turn, the woman told me that if I had sex with him, I could get out. I started screaming. She pulled me out and hit me with a pipe and I was taken back to the big room with the other women. There she told me: ‘You’re going to die here.’”

- Anonymous

A third woman recounted how she was kidnapped by an alleged policeman and taken to Abu Salim detention centre, where he took her to a room, pulled out his gun and raped her.

MSF teams increasingly noted the presence of male guards armed with Kalashnikovs inside the detention centre, ostensibly to help manage food distributions and for crowd control. This was a cause of concern to MSF teams since the presence of men inside the detention centre heightens the risk of sexual and gender-based violence.

“[In this prison, the men come during the night to sexually abuse the women and some of them accept to have sex, hoping that it will facilitate their release. They didn’t come to take me at nights because I was really sick when I was there. They don’t allow us to have phones so that we don’t film what they do to us there. They beat us with sticks. When I arrived there, I learned that two women had died because of their very poor health condition. And one had committed suicide by cutting her wrists.]”

- Anonymous

VI. PHYSICAL VIOLENCE

MSF staff treated injuries related to violent events that took place in detention centres, perpetrated by detention centre guards or groups of men from outside.

In Abu Salim detention centre, indiscriminate violence perpetrated by male and female guards against women and children took place regularly. Violence was also used as a means of crowd control and as punishment for disobeying orders, requesting to speak to an embassy, asking to be released or asking for extra food. In May 2023, for example, guards responded with violence when a group of women asked to be released. They were beaten with a plastic hose and with rigid pipes, then targeted with the spray from fire extinguishers. MSF staff also heard reports of a violent incident that took place when four women were severely beaten by male guards after requesting additional food. One of the women had her head banged against the iron gate. The four women were then taken outside the cell where the beating continued with rigid plastic pipes. One woman was left seriously weak and injured, with marks all over her body from being beaten with plastic pipes.

MSF teams also heard reports about men coming into Abu Salim detention centre from outside and using violence against the people detained there. In February 2023, women reported an incident of mass violence when men without uniforms entered the cell and physically beat the women with pipes in an indiscriminate manner. The women were taken outside the cell, while all their belongings left inside were confiscated, including medication, chronic illness cards, money, clothing and hygiene items. The men ordered the women to remove their clothes, before strip and intimate body searching them and touching their genitals.

Women also reported to MSF staff that the violence to which they were subjected was often combined with inhumane and dehumanising treatment. For example, in October 2022, a group of men from outside the detention centre threw dirty water and sewage from the blocked toilets at a group of women, before beating them with plastic pipes.
VII. FORCED LABOUR

MSF received regular reports of forced labour taking place inside and outside Ain Zara detention centre. On several occasions, MSF witnessed detained people being taken away by groups of men from outside the centre in pick-up trucks. In addition, detained people reported and were witnessed carrying out manual labour inside the detention centre. They reported that in most cases they were not given the opportunity to refuse orders to do manual labour, nor did they receive any remuneration for the work they did.

Incidents of forced labour were often combined with threats, intimidation and incidents of violence. MSF staff treated a patient who reported being shot at while trying to escape, after being led to believe he would be released in return for doing manual labour. Many detained people who were forced to do manual labour suffered medical and mental health consequences, frequently displaying anger and experiencing sleeping problems and overthinking.

VIII. GENERAL TREATMENT OF MEN, WOMEN AND CHILDREN

MSF teams were told by detained people that they were allowed only limited time outside the cells, and that this generally happened only during visits by UN agencies or international organisations. In Ain Zara, people were sometimes allowed outside the cells during food distributions and when they were counted by guards.

Throughout their arbitrary detention, detained people were subjected to various forms of intimidation and degrading treatment. In Abu Salim detention centre, this included the withholding of meals from both women and children as a form of punishment. One woman reported that sometimes the guards left their food outside the cells before distributing it and cats were seen urinating on the food. In Ain Zara, detained people reported that in February 2023 they spent four days without light in an attempt by the guards to discover any hidden phones. As a consequence, they spent their evenings and nights, including eating their meals and using the toilets, in total darkness.

Pregnant women and children were not spared the violence inside Abu Salim detention centre. MSF teams received frequent reports of pregnant women being hit on their stomachs with plastic pipes. MSF was informed that, in anticipation of a visit by a UN representative in May 2023, pregnant women and mothers with young children were told that they would be released, but instead were temporarily transferred to another detention centre to give the impression that no pregnant women or young children were being detained. As they were being taken away, a commotion broke out among the women, which was met with excessive violence. Pregnant women reported to MSF that they were indiscriminately hit with plastic pipes on their backs, pelvises, wrists and abdomens, leading them to fear for the safety of their unborn children. A mother with a one-month-old baby was also hit, while her baby was hit on the head.

In Ain Zara detention centre, MSF was informed of 71 violent incidents that took place between January and July 2023. MSF teams treated injuries related to violent events that took place there, including fractures, cuts, wounds on arms and legs, black eyes, impaired vision, scratches, bruises, swelling, pain and general weakness. Mass and indiscriminate violence was frequently used by detention centre guards as a means of crowd control during moments of tension or fighting between detained people, and in retaliation for escape attempts and protests. MSF received reports of guards hitting detained people with iron bars, wooden sticks, metal and plastic pipes and other objects. Violence was also used as means of punishment for disobeying orders, requesting additional food portions, requesting medical assistance, or asking to pay to be released.

MSF was very concerned about reports of men coming into the Ain Zara detention centre from outside and using violence against the detained people. On a number of occasions, MSF teams observed the presence of unidentified armed individuals and unidentified pick-up trucks transporting detained people away from detention centres. MSF teams also witnessed guards carrying concealed weapons in close proximity to MSF medical activities.
The situation in Libya is inexplicable. It is too much in the sense that I don’t even know where to start. In the detention centres they are keeping people without any fault. They just ask people for ransom. This is how they are enriching themselves and continue the circle.

- Anonymous

### IX. NO HUMANE WAY OUT: TRAFFICKING, EXTORTION AND ‘VOLUNTARY RETURNS’

"The situation in Libya is inexplicable. It is too much in the sense that I don’t even know where to start. In the detention centres they are keeping people without any fault. They just ask people for ransom. This is how they are enriching themselves and continue the circle."

- Anonymous

Women and children had very limited options for release from the detention centres. One woman reported having been sold from Abu Salim detention centre to a Libyan man by a guard, for whom she had to work for six months before being released. Four other women were reportedly sold to other men at the same time.

Detained people regularly spoke about a ‘payment-for-release’ scheme, amounting to extortion, which appeared to involve several hierarchical levels in the detention centres. In Abu Salim detention centre, women reportedly paid 2,000-8,000 Libyan dinars \(\text{€380-€1,530}\) to be released. One woman told MSF staff that she was asked for 12,000 Libyan dinars \(\text{€2,300}\) to secure freedom for herself and her two young children. She said she felt “lucky” as other women were allegedly asked for 7,000 Libyan dinars \(\text{€1,340}\) or even 8,000 Libyan dinars \(\text{€1,530}\) per person. In January 2023, MSF was told that some 20 women had been released through the payment-for-release scheme. People detained in Ain Zara detention centre reportedly paid 4,000-12,000 Libyan dinars \(\text{€770-2,320}\) for their release.

Detained women, men and children could also apply for the ‘voluntary return’ programmes through the IOM or their respective embassies. However, the UN Office of the High Commissioner for Human Rights (OHCHR) describes how these assisted returns do not meet human rights standards and are not always voluntary:

"Many migrants in Libya are compelled to accept assisted returns in conditions that do not meet international human rights laws and standards, […] to escape an environment of impunity, abusive detention conditions, threats of torture, ill-treatment, sexual violence, enforced disappearance, extortion, and other human rights violations and abuses."

- OHCHR

OHCHR also states that returns “may not be truly voluntary due to the lack of free, prior and informed consent.” Even when detained people ‘accept’ returning to their country of origin, many remain in detention until their return has been arranged – a process that can take months.

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15 Idem.

16 In its Out of Libya report (2022), MSF highlighted the flawed concept of ‘voluntary returns’, particularly when it is the only way out of arbitrary detention: https://www.msf.org/out-of-libya-opening-safe-pathways-migrants-stuck-libya
X. OBSTACLES TO AID PROVISION IN DETENTION CENTRES

Working conditions for MSF teams in Abu Salim and Ain Zara detention centres were restrictive and difficult. They required constant negotiations with the guards, the detention centre commanders and the DCIM administration, not always with positive results. MSF is concerned that the need to maintain dialogue with the detaining authorities may reduce the willingness of other aid organisations to negotiate for a principled approach to visits, which should include indiscriminate access to all groups of people and the direct provision of aid to detained people.

In Abu Salim detention centre, MSF teams were granted only limited access to the cells to conduct medical triage; on some occasions, only two or three staff members were allowed to enter a cell to conduct triage, and on other occasions access to cells was denied completely. Such barriers limit the ability of aid organisations to uphold medical neutrality and monitor the situation inside the detention centres. In December 2022, MSF lost access to Abu Salim detention centre (and other detention centres) for a period of two weeks, apparently in retaliation for sharing its concerns on the situation in detention centres with the DCIM. Access was restored, but regular access issues continued. Between October 2022 and July 2023, MSF carried out 33 visits and was denied access to Abu Salim detention centre on 10 occasions. From August 2023 onwards, MSF lost access to Abu Salim detention centre completely.

Between October 2022 and July 2023, MSF teams working in Abu Salim observed and were informed of more than 62 incidents of interference in MSF’s medical and humanitarian assistance. This included several breaches of confidentiality due to guards staying close to the consultation area or interfering in the teams’ activities. It also included obstacles to providing humanitarian aid, notably by MSF staff being refused permission to distribute medication, milk and diapers directly to the detained people. For example, between April and May 2023, it was reported to us that guards regularly confiscated medication provided by international organisations from detained people, allegedly to prevent them from misusing the medication to attempt self-harm or suicide.

MSF further received reports of frequent confiscation of other items, such as blankets and clothes distributed by IOM, and diapers and baby milk formula distributed by MSF. Confiscation of women’s personal items also occurred on several occasions, with guards reportedly going through women’s belongings and taking away their medication, money, the few remaining phones and other items.

MSF replaced by a UN agency after being denied access to detained people in Ain Zara detention centre

On 19 June 2023, MSF was officially notified that it would no longer be granted access to the cells to conduct medical triage. The ability of MSF teams to access the cells was already inconsistent and subject to recurring negotiations. The new policy gave the guards responsibility for identifying and bringing sick people out of the cells. This created concerns about discrimination and the risk of sick people being excluded from medical care. It also prevented MSF from observing the situation in the cells. At the same time, MSF’s regular visit days were reduced from Mondays, Thursdays and Sundays to Sundays only. IOM agreed to take over MSF’s visit days and comply with the new medical triage rule.

In Ain Zara detention centre, MSF noted a significant deterioration in the opportunity to provide humanitarian aid from June 2023 onwards. Between January and July 2023, MSF teams carried out 71 visits and were denied access to Ain Zara detention centre on 10 occasions. On four other occasions their visit was cancelled on arrival or activities were suspended. Various reasons were given, including a delayed handover of guards, too few guards on duty, and a recent escape attempt. On a further seven occasions, MSF teams were denied access to one or more cells. From early July and following the change in policy on visits, MSF lost access to Ain Zara detention centre completely.
Over the months, MSF teams working in Ain Zara observed and were informed of more than 37 incidents of interference in medical and humanitarian assistance. This included several breaches of confidentiality due to guards standing close to the consultation area or interfering in the teams’ activities; access issues to the detention centre generally as well as to specific cells; and confiscation of humanitarian aid. On two occasions, MSF received reports of guards confiscating hygiene materials distributed by IOM and IRC. For example, in February 2023, guards confiscated hygiene products distributed by IOM, causing significant tensions among the detained people. Searches also took place regularly in the cells, with guards confiscating phones, money and other personal items belonging to detained people. On one occasion, a man living with a chronic illness had money confiscated by the guards, after initially being told he could keep this money with him to buy additional food portions and keep his symptoms stable. Searches also took place regularly in the cells, with guards confiscating phones, money and other personal items belonging to detained people. On one occasion, a man living with a chronic illness had money confiscated by the guards, after initially being told he could keep this money with him to buy additional food portions and keep his symptoms stable.

“*They go inside and take what they like, money, soap, slippers etc...*”

- Anonymous

MSF teams frequently faced extended waiting periods before being granted access to detention centres or individual cells, significantly limiting the time left to conduct medical and mental health activities. On many occasions, not all patients with a consultation card could be seen because of a lack of time.

These obstacles severely curtail the ability of international aid organisations to ensure an impartial, neutral and independent response that does not undermine human rights standards and humanitarian principles.

**MSF CALLS TO ACTION**

**MSF calls on Libyan authorities to:**

- End the system of arbitrary arrest and detention in Libya and to release all migrants, refugees and asylum seekers from detention centres, providing them instead with safe shelters in urban settings.

**Pending the end of arbitrary detention, MSF calls for:**

- Libyan authorities to ensure that people arbitrarily detained are not subjected to physical violence, sexual violence or other human rights violations.

- Material conditions in detention centres to be improved to ensure dignified and humane treatment of all people detained.

- An effective and independent system to be established to monitor the material conditions and treatment of people arbitrarily detained.

- Independent investigations to be carried out into incidents of deaths, violence, including physical and sexual violence, forced labour and extortion taking place in detention centres.

- Libyan authorities to guarantee safe, independent and unimpeded access to detention centres by humanitarian organisations providing direct and lifesaving assistance to people in detention.

**MSF calls on European institutions and member states to:**

- Urgently review their migration policies to ensure that they provide solutions in line with human rights and international law, and to stop pursuing a short-sighted focus on migration containment in Libya.

- End their political, material and financial support to the system of interceptions and forced returns to Libya, where people are at constant risk of arbitrary detention and grave human rights violations, which the UN considers as crimes against humanity.

- Ensure that migrants, refugees and asylum seekers attempting to flee via the Central Mediterranean are given their fundamental rights, particularly the right to life, to leave a country and to seek asylum.

- Provide direct humanitarian evacuation corridors out of Libya and to increase resettlement solutions.