

A lone apartment building standing amidst the rubble in Antakya, Türkiye.

# **Türkiye and Syria Earthquake** EMERGENCY SITUATION UPDATE #3

### **OVERVIEW**

One week after the devasting earthquakes that hit central Türkiye and Northwest Syria, the number of casualties continues to rise. As of February 14th, 2023, roughly 35.000 people lost their lives in Türkiye and an additional 5,800 in Syria, while hundreds of thousands of individuals remain injured, buried under the rubble and/or unaccounted for. The destruction in both countries is incomprehensible and the humanitarian needs are massive. While people are still sporadically being pulled from under the rubble alive one week after the earthquakes, the search and rescue operations have slowly been shifting to clean-up and recovery.

In **TÜRKIYE**, where over 3.6 million Syrians have been hosted for over a decade, humanitarian aid is stretched and basic needs are mounting. Although the estimated number of those affected remains unclear, the earthquake-hit zones had at least around 14 million people residing at the time of the crisis. The Turkish government is continuing to lead the response through coordination by the Disaster and Emergency Management Authority (AFAD), and INGOs are coordinating with authorities, UN agencies and other stakeholders to streamline response planning.

In **SYRIA**, although aid is slowly trickling in to the affected areas, the scale of response is far from matching the needs on the ground. According to UN OCHA, close to 9 million people in country have been affected by the quakes. It is estimated that humanitarian assistance will cost upwards of \$400 million to respond to the needs in



People setting up shelters amidst the rubble of their houses in Antakya, Türkiye.

# **UPDATES FROM THE FIELD**

#### **TÜRKIYE**

As RI had been operating in Türkiye since 2013, the country mission was well positioned to quickly procure emergency items through pre-identified suppliers. This coupled with a strong procurement line already established and managed from Gaziantep for the Northwest Syria mission, allows RI to continuing mobilizing resources quickly.

The emergency team alongside the Türkiye country staff completed scoping missions in Gaziantep, Osmaniye, Islahyie, and Antakya, in Hatay province. Accompanying the response team, are two Gaziantep- based structural engineers from the Shelter Centre, who provided preliminary building assessments of the RI office and guest houses. The structural review team are establishing tools for non-technical staff to collect photos for tele-analysis and support on the structural integrity of facilities and centers supported by RI.

#### **SYRIA**

RI operates in NWS through 1,248 staff, who were affected by the earthquake with varying degrees of severity, with many including fatalities, injuries, familial losses and displacement. Many were forced to leave their homes and possessions due to the severe damage to their houses. RI is ensuring staff safety and security by utilizing already supported women and girls' safe spaces as temporary shelters for staff and families, and assessing the market for a longer-term solution. The earthquake has also severely affected staff managing Syria programs from Türkiye, who are currently operating from different locations inside Türkiye, as the office in Gaziantep remains closed until it is deemed safe for return.



# **RELIEF INTERNATIONAL RESPONSE**

### TÜRKIYE

Distribution of shelter and winterization items began on the ground through partners in Adiyaman, Urfa and Antakya (just 90 km west of Salqin, Syria.) In Antakya, RI coordinated with the Ministry of Interior to deliver 500 blankets to 3,000 new Turkish residents of Boynuyogun Temporary Accommodation Shelter, which previously only supported 6000 Syrian refugees. This was the first installment of several distributions planned in the province. Additionally, 1000 blankets were distributed to vulnerable Turkish families and Afghan refugees in Adiyaman, while 300 blankets are planned to be distributed in Urfa in the coming days.

The next phase of implementation will be the procurement of hygiene kits, kits for elderly people, psychosocial kits for children, and shelter items. RI is also preparing to support health facilities with medical supplies and consumables as well mobilizing mobile medical units to provide psychological first aid and physical rehabilitation to those affected by the earthquake.

RI completed a multi-sectoral rapid needs assessment with the support of partners and volunteers in Gaziantep, Hatay, Mersin, and Kilis. This assessment tackled the status of shelters, the needs of the affected households, gaps in the response, and emerging needs in health facilities, the findings of which are summarized below.

#### **SYRIA**

RI utilized available funding under existing grants to deliver emergency supplies (nonmedical equipment, fuel to overcome power outages, other NFIs such as blankets) to staff and patients of RI-supported health facilities. Meals were procured for medical staff working around the clock at the health facilities, and consumables and pharmaceuticals were released from RI's warehouses to supported continuation of emergency health response. A total of 330 reproductive health kits and 5 emergency health kits have been distributed to RI facilities.

RI has an emergency procurement underway,

to provide urgent supplies including medical consumables, and RI team has identified equipment and consumables needs, to enable the facilities to accommodate the surge in needs and account for damage done by the earthquake.



Within NWS, RI supports two main offices, three warehouses, and 25 facilities (six hospitals, eight primary healthcare centers (PHCs), six mobile clinics (MCs), four Women and Girls Safe Spaces (WGSS), and a one-stop center (OSC) that provides protection, sexual and reproductive health, and nutrition services as well as community outreach). RI conducted a rapid infrastructure assessment from 8<sup>th</sup> – 10<sup>th</sup> February, to assess the condition of each of RI's health and protection facilities, warehouses, and offices. The assessment focused on the severity of the infrastructural damage and the need to undertake rehabilitation works at the affected buildings. Three facilities (one warehouse, one PHC, and the OSC) were rendered out of service due to severe infrastructure damage. Two PHCs and the four WGSS are partially working, operating only some of their essential services. The remaining facilities continue to operate (six hospitals - including two maternal hospitals, seven primary healthcare centers, and six mobile clinics). Two mobile clinics resumed operations on 12<sup>th</sup> of February, as they were initially nonoperational due to lack of access by the staff.

RI's services are thus far focused on emergency and trauma cases, intensive care units, reproductive health services, and maintaining operation of incubators. During the first three



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days, the four RI-supported hospitals exclusively provided emergency services, but have since resumed their scope of work. The two RIsupported women and children hospitals worked near total-capacity, serving as a backup to support general hospitals by receiving referred children and women who were affected by the earthquake. Seven PHCs have been working at full or partial capacity, but with very low number of consultations, especially in the first three days. A total of 7,813 cases were treated by RIsupported health facilities within the first week following the earthquake. As a rapid response by the PHCs, staff formed mobile teams and rushed, by the side of the mobile clinics, to provide essential services at the temporary collective centres scattered across the region.

RI's rapid response team targeted those who found shelter in collective centres, providing essential health services through mobile clinics with support of PHC staff. The mobile clinics are visiting 24 collective centres in 13 locations on a daily basis. The 2 MCs which cover six centres in Salqin and Harim were initially non-operational, but have resumed work as of February 12<sup>th</sup>. Prior to that, the above mentioned six collective centers were served by the four operational MMUs on a daily basis, according to the plan. MMUs will continue providing this kind of response for two coming months. The map below shows locations that MCs are covering (with bubble size representing the number of collective centres covered in each location).



Locations of the collective centers targeted by RI's mobile medical unts in Northwest Syria.

Protection work partially resumed on Sunday, February 12<sup>th</sup>. Within the WGSS, the protection team utilized textiles and clothes materials previously used as a part of life skills activities to make clothes for newly displaced persons at the collective centers who fled their homes and have only the clothes they were wearing when the ground started shaking. Additionally, RI protection team has been dispatched to RI's health facilities to provide psychosocial support services and referrals managed through the social assistant.

Volunteers at a women and girls' safe space in Taftanaz, Northwest Syria, sewing clothes for the newly displaced in the earthquake.







A doctor at RI's Binnish hospital in Northwest Syria providing emergency care to a child injured during the earthquake.

## **EMERGING NEEDS ON THE GROUND**

WHO's emergencies chief, Dr. Mike Ryan, indicated that the impacts of these earthquakes will require sustained response for months to come, especially for those who were already in need of humanitarian aid. Access to clean water is expected to be a challenge, which exacerbates the risk of waterborne illnesses such as cholera. This is a particular concern given the recent cholera outbreak (September 2022) in Syria. Severe weather continues to be an added risk to the health and safety of the affected population, necessitating urgent action to provide life-saving provisions.

### TÜRKIYE

The RI team's assessment consisted of visits to 88 collective shelters in Hatay, Kilis, Kahramanmaraş, Gaziantep, and Adıyaman, the preliminary findings of which are the following:

- 27% of the shelters have persons with disabilities, 10% of which were accessible
- 31% of people living in the shelters did not have clean water for drinking, while 80% did not have clean water for washing.
- 56% of the shelters did not provide privacy, especially women and girls; in 85% of shelters children did not have enough spaces to play.

As reported by authorities, organizations and affected people, shelter items, hygiene kits, dignity kits and winterization items are the most critical items needed in the immediate term. However, beyond the initial response phase, humanitarian assistance and services will be required to provide those in need with long-term support. Long-term humanitarian aid needs include:

- Mental health and psychosocial support services for children, adults and elders.
- Provision of medical, consumables and supplies to health facilities.
- Physical rehabilitation of persons with disabilities, especially with the spike of injured people post-earthquake.
- Provision of safe and clean water for drinking and washing.
- Cash assistance for shelter and basic needs.



### **SYRIA**

One of the key challenges remains availability of cash to purchase basic essentials such as food, water, fuel and other urgent items, as agencies in charge of cash transfers between Türkiye and Syria operate intermittently, and under an unprecedented pressure of increased demand. The immediate needs include shelter, heating materials, clothes, cash support, NFIs, ready to eat food, and medical response for injuries.

- Covering any gap in funding for facilities that are without funds or will end soon
- Medical supplies and reproductive health kits
- Fuel and generators for facilities
- Minor maintenance or rehabilitation for damaged facilities
- Rehabilitation of health facilities
- Support to hospitals, reproductive health

facilities, PHCs, and blood banks.

• Ambulance vehicles and maintenance.

Responses under consideration by RI include:

- Repurposing WGSS to serve as temporary shelter.
- Mobilization of additional/relocation of existing medical clinics, repurposing in-tact protection centers, procurement of tents (to function as additional space for HFs or as shelters for those displaced), and provision of food and non-food items.
- Provision of psychosocial support and psychological first aid to affected communities and to patients within the operational health facilities.
- Re-opening Protection Centers (WGSS), to receive critical cases.



A mobile medical unit providing services at one of the collective centers in Jendaris, Northwest Syria.

### **RESPONSE COORDINATION AND PLANNING** TÜRKIYE

Coordination efforts continue with AFAD, municipalities and other INGOs in the field. As working groups and clusters are activated, RI is actively participating in the forums, including the cash, livelihoods and health working groups. Meanwhile RI continues to maintain its role as co-chair of the Disability and inclusion task team under the 3RP mechanism.

### **SYRIA**

RI is engaging with Syrian NGO partners, and other organizations active in the affected area, and cluster working groups to identify needs and arrange a coordinated way forward. For instance, establishing referral pathways with other organizations based on services available is a key priority in order to cover needs without duplication of services.



Buildings destroyed in the earthquake in Antakya, Türkiye

## **DONOR MESSSAGING**

RI would like to thank donors for their continued flexibility under existing funding agreements, to enable quick deployment of resources to where they are most urgently needed. In order to mobilize a full-scale response, additional resources will continue to be required, and RI appreciates donors continued and elevated support as we as a humanitarian community work together to prevent further loss of life and aid in the recovery of survivors.

In this critical time where communities are in urgent need of life-saving support, immediate support is needed to enable response to meet the aforementioned urgent humanitarian needs across Türkiye and NWS, including provision of non-food items, basic shelter supplies, first-aid kits and medical consumables to meet the surge in needs that are compounded by pre-existing vulnerabilities – especially for those in NWS.

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