

MARCH, 2023

# On the edge

Effects of the earthquake  
disaster on mental health  
in Northwest Syria



Funded by  
European Union  
Humanitarian Aid

# Context

When the first earthquake with magnitude 7.8 hit Türkiye and Syria in the morning of February 6<sup>th</sup> 2023, **needs for psychosocial support and mental health services in Northwest Syria (NWS) had already been alarming**, while availability of and access to such services had largely been unable to meet those needs. While Syrian and international NGOs inside Northwest Syria could use their existing stocks to offer basic health and rescue services in the immediate aftermath of the earthquakes, **late arrival of the much needed cross-border humanitarian aid** due to access constraints **further exacerbated the sense of panic and despair among the population**.

The disaster came in the context of **12 years of conflict and instability** marked with widespread destruction of property and infrastructure, protracted displacement, and incessant economic decline. These, in combination with limited income opportunities and lack of control over resources, have been **a source of recurring trauma for Syrians and had a negative impact on people's wellbeing and abilities to cope**. Child labour among boys and adolescents, various forms of gender-based violence (GBV) including early/forced marriage among girls and drug abuse across the board are only some of

the reported most recurring coping strategies. Particularly concerning are reports from RI's protection team who, **in 2022, recorded double the number of people ideating or considering suicide in Northwest Syria than the annual world average recorded by the WHO**. Suicide ideation was particularly **high among women** (double than the number among men) – especially among women with **average age of 24** years old – who named gender-based violence, as well as experiencing a traumatic event as main reasons to ideate and/or consider suicide. The **risks are especially highlighted among women living in displacement and female-headed households**, where vulnerability and exposure to various forms of GBV is higher.

In order to identify key effects that the earthquakes had on the population to be able to better tailor humanitarian response to resulting needs, RI conducted a **rapid needs assessment (RNA) in the immediate aftermath of the disaster**. The quantitative part of the needs assessment was rolled out between 9-11<sup>th</sup> of February, while key informant interviews (KIIs) followed between 16-19<sup>th</sup> of February. The needs assessment engaged **699 respondents** and covered RI's sectoral areas of expertise while



Rescuers searching for survivors under the rubble a day after the first earthquake. Jenderis, February 7, 2023. Photo: Relief International staff.

taking into consideration community needs. Priority needs including health, protection, shelter, rehabilitation, psychosocial wellbeing were all incorporated in the questionnaires used during the RNA. Key findings uncovered that the **earthquakes and aftershocks had a profoundly negative effect on people's physical and mental health**, their living conditions and ability to meet basic needs, **leading to worrying behavioural changes among both adults and children**.



# Impact of earthquakes on living conditions in NWS

The earthquakes and their aftershocks have killed more than 4.500 people, injured more than 8.700 and **destroyed over 10.000 buildings** across large swaths of Idlib, Afrin and Aleppo governorates. **More than 86.000 displacement movements have been recorded**, with numbers continuing to rise as harsh weather conditions and increased demand and prices continue to dictate people's ability to access safe shelter. In absence of adequate housing, people were forced to either continue living in their partially destroyed houses, or find refuge in unfinished buildings, tents or collective centers that offer little privacy and are unsafe,

with exposure to hazards from constructional deficiencies, such as open electric wiring, unfinished balconies, mold, etc.

Among the respondents who participated in RI's RNA, **91% reported that their houses were damaged** in the earthquakes, with **19% having their houses completely destroyed**. Roughly a half of families were able to stay in their partially damaged housing, a quarter moved in with their relatives, while the remainder found shelter in tents or collective shelters. Nonetheless, **three quarters of respondents maintained that the condition of their current**

**shelter is either average, poor or very poor**, with overwhelming majority having **difficulties accessing basic yet vital services** such as water and electricity, or are **concerned over safety and/or privacy**. Particularly affected are **32% of respondent families with persons with special needs**, with about a half reporting their current housing being inadequate in terms of accessibility for people with disabilities, causing additional vulnerabilities. **The state of their living conditions, as more than half of respondents reported, has had a direct negative impact on their physical and mental wellbeing.**



A family sitting outdoors in anticipation of a shelter in Jenderis, February, 2023. Photo: Mohamad Abdullah for Relief International.

# Wellbeing and mental health – Key concerns among the earthquake-affected populations

The prospect of long-term displacement and **poor living conditions have had an overarching negative impact on people's mental health.** Concerns over safety, shelter, cash, basic food items, clean water, medications and hygiene items have significantly contributed to change in behavior of adults, with **overwhelming majority displaying key markers for depression and anxiety, such as sadness, sleeping and eating problems, unexplained fatigue and excessive worrying.** Roughly half of respondents reported suffering from chronic illnesses (particularly hypertension, diabetes, and cardiovascular disease), with **only 50% stating to have access to necessary medications,** majority due to lack of funds/income. When the third strong earthquake hit southern Türkiye and Northwest Syria on February 20<sup>th</sup>, reports of people jumping off buildings in fear or families insisting to remain outdoors long after the ground stopped shaking were not uncommon. This was confirmed by RI's medical teams inside Syria who reported receiving a **rush of patients with panic attacks, heart attacks and hypertension,** pointing further to the **immense psychological stress and reduced abilities to cope.**

Roughly a quarter of respondents are either

pregnant and lactating women, or families with newborns, further contributing to vulnerabilities and worrying over abilities to meet basic needs. Particularly concerning are reports of **post-earthquake behavioral change in children,** with symptoms such as excessive fear, excessive crying, violence, agitation and chronic tiredness highlighting the need to extend humanitarian assistance beyond the current emergency response to include long-term PSS and mental health interventions. **Vulnerability of women-led households and unaccompanied children to risks from GBV, exploitation and exposure to negative coping mechanisms** have been a genuine concern even before February earthquakes. These have now been exacerbated especially due to added trauma, loss of livelihoods, increase in displacement, and overcrowding of collective centers that have little or no privacy.



32% of respondents in RNA had mobility issues, with current shelters not being accessible for persons with disabilities, February, 2023. Photo: Mohamad Abdullah for Relief International.

Addressing these would require long-term integrated programming that combines cash assistance, shelter, health and protection (GBV and child protection (CP)), with particular focus on provision of psychosocial support in combination with emergency cash to help minimize those risks. To enable such a comprehensive response, maintaining unimpeded access and a steady flow of humanitarian assistance that extends beyond the current dependency on UN Security Council's semi-annual decision to renew the existing cross-border resolution is an imperative.



# RI's earthquake emergency response



RI mobile clinic arriving to one of the earthquake-affected areas to provide much needed health services and deliver medications, February, 2023. Photo: Relief International staff.

In the immediate aftermath of earthquakes, RI adapted its regular integrated health, nutrition, and protection programming to respond to immediate needs compounded by the disaster. Within health and nutrition, of 20 RI directly-run static and mobile health facilities, **all but the four damaged HFs remained operational throughout the crisis** to address injuries and immediate health concerns resulting from the disaster. In total eight mobile clinics were deployed to and continue to deliver necessary health services in temporary and collective shelters.

Delivery of protection programming in the majority of women and girls' safe spaces (WGSS) was temporarily halted to open premises to host staff and their families who lost their homes in the earthquake. Instead, **protection teams were deployed to health facilities to provide psychological first aid (PSA) and PSS sessions to survivors** who sought medical services in RI's static facilities. WGSS not hosting displaced families opened the doors to volunteers who turned supplies used in skills development activities to produce warm clothing for families who lost their

possessions and were living in inadequate shelter under harsh weather conditions. While waiting for WGSS to reopen, the teams provided **PSA and PSS sessions in collective shelters** as a part of their outreach activities, while PSS sessions for clients who sought support before February 6<sup>th</sup> continued as normal. RI's WASH staff was immediately engaged in assessing structural integrity of health facilities to continue operations safely and extended their expertise to assess the status of water and sanitation in collective shelters and communities affected by the earthquake in general.

# Continued PSS support as a way to reduce risks

Based on RI's pre-earthquake GBV-focused protection programming, roughly **two thirds of RI's clients reported immediate relief after talking to somebody** about their main concerns. Psychological first aid that offers immediate support has proven to be an important gateway to more focused PSS provided over an extended period of time. As PSS sessions progress, clients report their **overall wellbeing and ability to cope exponentially increasing**, with **RI being able to close 97% of client files**. The vast majority of clients have sought services directly from PSS workers in women and girls' safe spaces, while roughly 12% were referred to PSS services by their physicians in health facilities, indicating on the need to continue **strengthening the link between health and protection**, and to further simplify and expand the referral system between the two.

While emergency response focused on providing immediate food, water, shelter and health needs is necessary to respond to immediate post-earthquake shocks, varied **programming that combines integrated, multi-sectoral interventions will be essential to address the long-term needs** of communities

living in Northwest Syria. **Community participation in designing such programming** will be essential, with closer coordination with local councils and administration deemed essential to support the long-term relief efforts.

Furthermore, relevant stakeholders need to ensure **continuity of aid flow** into the region that extends beyond the dependency on semi-annual extension of the UN Security Council cross-border resolution.



While physical wounds can swiftly be attended to, addressing the psychological wellbeing will need long-term, multi-sectoral interventions, February, 2023.  
Photo: Mohamad Abdullah for Relief International.

# Recommendations

## FOR DONORS

- **Release immediate and flexible funding** that implementing organisations in NWS can use to tailor programming according to emerging needs on the ground.
- Make sure that the **funding provided not only addresses emergency response to immediate needs** of the earthquake-affected populations, but that such funding **also guarantees support to multi-sectoral integrated programming** that can address long-term needs, especially relating to mental health and PSS.
- Given that PSS services are generally provided as part of child protection or GBV programming, **ensure that adolescent boys and men are not excluded** from meaningful access to this key service.
- Support efforts to **ensure unimpeded flow of humanitarian aid into Northwest Syria** that extends beyond dependency on semi-annual extension of the UN Security Council cross-border resolution, and allows more flexibility to purchase needed goods from vetted vendors inside Syria.

## FOR IMPLEMENTING ORGANISATIONS

- **Expand existing services to include referrals to PSS and mental health services** to actively work on enhancing overall wellbeing of Syrians in Northwest Syria beyond earthquake-related emergency response.
- **Ensure that PSS services are tailored in a way to be accessible from all population groups** (women, girls, men and boys, older persons, persons with disabilities, etc.)
- **Enhance coordination between different actors implementing multi-sectoral programming** in delivery of humanitarian aid and services so as to **better cover emerging gaps** while avoiding duplication of support, as well as to **enhance linkages between humanitarian assistance and early recovery efforts**, considering that improved living conditions play a key role in supporting positive outcomes of MHPSS services, and contribute to long-term impact.
- **Enhance coordination with relevant local/community councils** in order to better understand the **changing needs** of the population and **ensure sustainability of service delivery**.





Temporary shelters for the earthquake-affected Syrians in Afrin, February, 2023.  
Photo: Mohamad Abdullah for Relief International.



*Lifesaving Emergency Assistance for Protracted Conflict in Syria (LEAP VIII) is a project supported by the European Civil Protection and Humanitarian Aid Operations delivering lifesaving health and protection services across northern Syria implemented between beginning of June 2022 and end of March 2023.*

*Health activities in LEAP VIII focus on direct support to health facilities (HFs), including medical and non-medical staff incentives, running costs, pharmaceuticals, medical consumables, as well as medical and non-medical equipment. Throughout the duration of LEAP VIII, RI was able to provide support to 21 health facilities across northern Syria, including hospitals, primary healthcare centers and mobile clinics. In addition to primary and secondary health services, RI also supported vaccination teams and outpatient nutrition centers, while teams of community health workers delivered health- and protection-related messages.*

*Protection teams in seven HFs ensured access to GBV response and prevention services for women and girls, while in one health facility male protection staff supported men and boys' engagement in GBV programming. RI continued conducting protection monitoring exercise, in order to better understand vulnerability trends and develop evidence-based protection programming based on data collected through standard observation tools. Protection monitoring exercise includes mapping of protection needs and risks, linking of needs to service actors, and evidence-based advocacy.*

**COVER PHOTO:** Patients at RI's Kinana hospital, February 2023.  
Mohamad Abdullah for Relief International.



Funded by  
European Union  
Humanitarian Aid

*This document covers humanitarian aid activities implemented with the financial assistance of the European Union. The views expressed herein should not be taken, in any way, to reflect the official opinion of the European Union, and the European Commission is not responsible for any use that may be made of the information it contains.*