

MULTI SECTORAL INITIAL RAPID NEEDS ASSESSMENT

MENTAL HEALTH and PSYCHOSOCIAL SUPPORT, CHILD PROTECTION

KAHRAMANMARAS EARTHQUAKE

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ABBREVIATIONS

AFAD	Turkey Disaster and Management Authority
CEFM	Child, Early and Forced Marriages
СР	Child Protection
MHPSS	Mental Health and Psychosocial Support
MIRA	Multi-Sector Initial Rapid Assessment
MoFSS	Ministry of Family and Social Services
NGO	Non-Governmental Organizations
UaSC	Unaccompanied and Separated Children
WASH	Water, Sanitation and Hygiene

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I.BACKGROUND

A. CONTEXT



On February 6, 2023, two devastating earthquakes struck, the first with a magnitude of 7.8 at 04:17 and its epicenter in the Pazarcık district of Kahramanmaraş, and the second with a magnitude of 7.5 at 13:24 and its epicenter in the Ekinözü district of Kahramanmaraş in eastern and southeastern Anatolia, as well as northern Syria.

These earthquakes destroyed 11 provinces¹ and affecting 15.2 million people, including 5.4 million children, living in affected provinces. An estimated 9.1 million people, including 2.5 million are children required immediate support².

Humanitarian consequences are significant and increasing. As of 21 February, at least 42.310³ deaths and 108.068 injuries have been confirmed⁴, and up to 105.794 buildings have been affected⁵. Over 1 million people are staying in temporary accommodation, facing adverse winter conditions. Over 1.858 unaccompanied children have been identified⁶. Access to education is hampered for nearly 4 million children⁷, including 350.000 refugee

and migrant children. Schools in the impacted provinces will not open until March 1st.

The economic consequences are significant and increasing. The crop production areas, cereals, and other crops cultivated agricultural areas, livestock and small cattle areas in the provinces affected by the earthquake were also devastated. Roughly, this earthquake is expected to cause a total of \$84.06 billion in damage. The breakdown of this is as follows: 70.75 billion dollars of housing loss, 10.4 billion dollars of national income loss and 2.91 billion dollars of loss of working days⁸.

Search and rescue activities are still ongoing in the collapsed buildings. Humanitarian assistance for those in need continues with increasing momentum. At the time of writing this report, the number of casualties, injured, and missing persons continues to rise and responses to the earthquake have been insufficient due to coordination difficulties and the continuation of aftershocks in the past two days. The immediate needs of the affected



population include access to tents with sufficient shelter materials; clean water; heating; latrines (separate for men and women), sanitation; garbage collection; food and baby food; undergarments; sanitary napkins, and diapers. In addition, protection and security is problematic in some settings.

With only six days following the earthquake, there are no reliable, certain reports on the number of dead, injured, and missing people.

In response to the earthquake, Nirengi conducted a rapid needs assessment in Kahramanmaras and Hatay to gather information on the immediate needs of the affected population. The results of this survey will be used to inform and guide the response efforts of aid groups in the region, ensuring that the aid provided fulfills the needs of the affected population. Nirengi focused mainly on the mental health and psychosocial support (MHPSS) and child protection (CP) sectors when conducting the multisectoral needs assessment in two provinces.

¹ Kahramanmaraş, Hatay, Gaziantep, Kilis, Osmaniye, Malatya, Adıyaman, Diyarbakır, Şanlıurfa, Adana and Elazığ, all in the south- east of Türkiye ² UNICEF, Türkiye Earthquake Response Appeal,

Humanitarian Action for Children

https://www.uniceforg/appeals/turkive

3 Ministry of Interior Dispets and Emergancy

³ Ministry of Interior Disaster and Emergency Management Presidency (AFAD), as of 21 February 2023.

⁴ Ministry of Interior Disaster and Emergency Management Presidency (AFAD), as of 16 February 2023. https://alad.govtr/kahramanmarasto-meydana-gelen-depremier-bk-basin-

⁵ Ministry of Environment, Urbanisation and Climate Change, as of 19 February 2023.

bin-605-baaimsiz-birimde-hasar-tespit-calismasi-vapildi-bakanlik-faalivetleri-384

⁶ Ministry of Family and Social Services, 21 February

2023. https://twitter.com/tcailesosyal/status/1628031524258951173?cxt=HHwWisC96fW

⁷Ministry of National Education, as of 15 February 2023.

MITHSUTY OF NATIONAL EQUICATION, AS OF 15 FEDI UA https://meb.govtr/bakan-ozer-71-ile-nakil-saglayacak-kapasiteyi-olust

naber/29071/t

⁸ TÜRKONFED, 2023 Kahramanmaras Earthquake, Pre-Assessment& Status Report, 10.02.2023.

B. ASSESSMENT AIM

The goal of the assessment was to gather information on the current situation in the affected area and determine the most pressing needs of the affected population. In addition to provide a foundation for humanitarian organizations to plan and implement assistance programs.

C. ASSESSMENT OBJECTIVES

The primary objectives of this mental health and psychosocial support (MHPSS) and Child Protection (CP) rapid situational analysis are to:

- obtain an understanding of perceived and identified MHPSS and CP needs among earthquake affected people and related public agencies.
- inform MHPSS and CP actors of critical MHPSS and CP needs in Kahramanmaraş and Hatay.
- provide recommendations to support the development of relevant MHPSS and CP programming to address the needs of earthquake affected people.





II. METHODOLOGY

A. TARGET POPULATION

The target group consists of earthquake affected people and key informants, senior government officials, and representatives of numerous non-governmental organizations (NGOs) from two provinces (Hatay and Kahramanmaraş).

B. METHODOLOGY

This assessment's methodology includes a desk review, interviews with key informants, focus groups and individual interviews with earthquake affected people in two provinces; Hatay and Kahramanmaraş, as well as team observations in the affected areas.

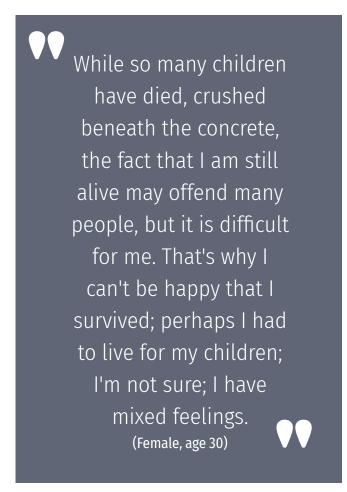
C. ASSESSMENT TOOL

We based the interview questions on free-listing questions described in the IASC Reference Group Mental Health and Psychosocial Support Assessment; Diagnostics and Statistical Manual of Mental Disorders (DSM-5); Child Protection Rapid Assessment Questionnaire; UNICEF Early Childhood Needs Assessment and the MIRA Multi-Sector Initial Rapid Assessment.

D. DATA COLLECTION

Three Nirengi team members conducted MHPSS, CP assessments, and MIRA in the field, with the participation of two earthquake-affected locals. All team members were experienced in the field of multisectoral needs assessment, MHPSS and/or child protection had been involved in previous similar situation- needs assessments. Informed consent of the interviewees were obtained after the team provided information on the purpose of the assessment, how the data would be used, data anonymization, and confidentiality.

Data collection was undertaken for four days in two provinces Hatay and Kahramanmaraş between Feb 12 and 16. It was considered to conduct interviews with affected persons of various sexes; ages, including children and socioeconomic backgrounds in two provinces.





III. RESULTS

A. DEMOGRAPHIC DATA of ASSESSMENT RESPONDERS



Age and sex

We interviewed 87 persons in total, including 23 children aged 5 to 17, both boys and girls, in focus groups and/or individual interviews. The remaining 64 were between the ages of 20 and 72, with 41 females and 23 males.

Furthermore, we conducted group and/or individual interviews with 42 earthquake responders/humanitarian aid workers from key public agencies, including Turkey Disaster and Management Authority (AFAD) Province Directorates staff, Ministry of Family and Social Services (MoFSS) Province Directorates staff, Ministry of Health (MoH) health workers at state hospitals and university hospitals, Gendarmes on patrol, NGOs from various sectors, including local civil society representatives, Province Bar Associations representatives, private sector representatives, and key informants, such as school principals, teachers, and religious officers (imams)



Education level

While just a few of the 64 interviewees have a university degree, the majority of women have completed primary school, while half of the males have completed primary school and the remainder have completed secondary school.

B. LIVING CONDITIONS

The earthquake had a devastating impact on settlements, shelter, housing, and businesses in most of the impacted locations, with extremely high levels of damage in highly populated areas. Total collapse and severe structural damage are all too prevalent.

In most of the impacted locations, there was highly severe damage and loss of life and property in densely populated areas. This has disrupted normal, continuous routines in critical human life sectors, particularly shelter, rendering a great number of people unable to live with dignity.

The Nirengi team's reflections on the severe impact of the earthquake and living conditions in several lifeline sectors, derived through field observations, data from interviewees, and, in part, desk research, are presented below.



Shelter

Aside from individuals who have lost their houses and businesses, many impacted households are afraid to return to their homes and businesses due to aftershocks. They attempt to survive by being outside, near houses, and in automobiles. As a result, many affected people desire to have tents/container and continue to stay where their homes and workplaces are.

Because of the severe winter season, especially at night, the temperature drops very low, making shelter one of the top priorities needs due to heavy and widespread damage and the unavailability of housing and workplaces, as well as a lack of a sufficient number of adequately equipped tents and containers.

A huge number of people need tents and containers with adequate equipment and heating.



Water, Sanitation and Hygiene (WASH)

A large number of individuals who live outside, surrounding houses, and in cars must use the area in which they live for toilet and waste disposal. As a result, feces, organic waste, and other types of trash can be seen in living places. Humans must put up with foul smells, pollution, and rubbish. On the other hand, the lack of water and power in the area makes life tough for the afflicted people and limits their resilience.

A huge number of people need tap (using) water and drinking* water; latrines (separate for men and women); sanitation; garbage collection; enough spare traditional underwear; sanitary pads and diapers.

* Tap water for latrines and personal hygiene is a major issue in both of these provinces, but drinking water is distributed by trucks in some areas.







Food, food items, and bottled water are supplied in numerous locations, however not enough food is distributed to meet all of the affected areas' basic needs. Serious conflicts are reported during and after food distribution in some locations. The mukhtars and some NGOs are organizing food distribution cooperation with gendarme or police however it has not been possible every time as required due to the high demand to safety & security forces in other locations as well.

It has seen that crop production areas, cereals and other crops, cultivated agricultural areas, livestock and small cattle areas in the provinces affected by the earthquake were also devastated. The earthquake-affected provinces produce 20.9% of the country's crop production, 12% of cereals and other crops, 14.5% of total cultivated agricultural land, 12% of cattle and 16.3% of sheep and goats

Small-scale farm and livestock farming sectors were also harmed, disrupting household activities and income sources. Household greenhouse spaces were destroyed by demolitions or removed to accommodate households and their family and relatives. Interviewees stated that they, particularly greenhouses and poultry houses, were extremely curious about meeting their family's healthy various nutrition demands, ranging from vegetables, fruits, eggs, chicken meat, and so forth.

A huge number of people need adequate and quality food for a healthy life. A considerable number of household need to resume/leverage their small-scale farm and livestock family activities.



The following are the most pressing health requirements, according to district health directorate officials, hospital staff, and mukhtars interviewed:

Personnel in the medical field; the Ministry of Health and university hospitals are sending health workers to impacted regions on a rotating basis, but there is still a strong demand for health personnel. Additionally, patient transportation vehicles, ambulances, and medicines; medicines for chronic diseases (heart, blood pressure, thyroid, and diabetes medications); medicines for acute skin and skin diseases; colds, green prescription medicines, children's pain relievers, first aid supplies, and adult diapers for the elderly.

There were issues with the distribution of medical assistance parcels, particularly medications, when we were in the region; distributions without medical personnel and/or assuring the security of vehicles carrying medical aid parcels were troublesome.

Transportation to hospitals is impossible owing to the large number of badly injured persons, and they are unable to get health care. The number of casualties among the critically injured in hospitals is quite high. Because there is no body bag, the remains waiting to be buried for different reasons, even on the fourth day, are wrapped in blankets, posing a major risk to both mental distress and public health.

A huge number of people need to access health services and medical supplies.



Psychological support for traumatized children and adults is an essential need throughout the earthquake zone. Provincial Directorates of Family and Social Services and Provincial Directorates of National Education from several provinces are deploying Psychosocial First Aid (PFA) teams to affected provinces on a rotating basis, coordinated by the Ministry of Family and Social Services, but there is still a high need for specialized PSS teams.

Interviewees in both provinces told similar stories of children, teens, and adults who couldn't sleep, were continually afraid, shouted at night, and wanted to visit and even remain at the cemetery. Children are unable to process the earthquake, what happened in the earthquake, the loss of loved ones and friends, recognize and express their emotions, or link what happened to their feelings. Nonetheless, the affected parents interviewed claimed that owing to a lack of space, they sometimes had to argue loudly in front of their children or express their own fears and worries in front of them. They observed that this increased the anxiety and stress levels of children and adolescents.

Adolescents are also unable to express themselves, struggle to make sense of what is going on, and struggle to tolerate ambiguity. The elder people appear to be one of the most ignored groups in this phase. During all this chaos, they have little opportunities to express their thoughts, and because other members of the family are also struggling to survive, their emotional connection with the elderly is limited. Elderly people remarked that they were unable to get together with their neighbors because of the earthquake, or that their close neighbors, with whom they used to meet on a regular basis, had moved to another city, or that they had lost some of their neighbors in the earthquake.

A huge number of people need to access both PFA and MHPSS (including medications and supplements for mental health).







There are a few important points about the child protection in these settings as given below:

Unaccompanied and separated children (UASC):

There was a lot of news about children who were not heard from in earthquake regions, children who were taken out of the rubble and transported to hospitals, or children who were injured in the earthquake and treated in hospitals unaccompanied or separated from their families; this news was spread verbally across the country as well as extensively on social media. Against criminal risks such as child abduction, child abuse, child trafficking, organ mafia, and so on, society in general, non-governmental organizations (NGOs), and childfriendly media closely tracked this subject. Owing to the severe effects of the earthquake and the large number of individuals impacted, 112 and 183 lines were unable to react to calls adequately in the first four days. Therefore, MoFSS created a centralized system where 10 numbers are open to calls 24/7.

The interviewees in Kahramanmaraş and Hatay did not disclose any cases of unaccompanied or separated children in their neighborhood. They stated that because everyone knows everyone else in the communities in the districts, a new person draws notice here, and such malicious people do not come here because they know they would draw attention.

The two gendarmes on patrol in Kahramanmaraş said that they turned over 267 children to the provincial FSS Directorate in the first 5 days, but they had not received such a warning as of the 7th day after the earthquake. Child protection is a growing issue, with large numbers of unaccompanied and separated children, overcrowded shelters and displacement conditions¹⁰.

¹⁰ Ministry of Family and Social Services, 21 February 2023.

¹¹ DEEP, Türkiye Earthquake February 2023, Daily Highlights

Foster care/family for affected UASC: Because of the significant number of UASCs as a result of the earthquake, MoFSS has activated the online application system to incorporate these children in the state foster care system. According to MoFSS, 1.858¹¹ unaccompanied adolescents have been recorded in the MoFSS database since the earthquake. Furthermore, MoFSS claimed that over 95,000 foster applications were received in the two days after the call for foster families.

This system aims to match children with foster families who will care for them until they are reunited with their biological families or until the families are able to care for their own children. One of the main concern that there is a possibility of an increase in areas where child marriage is already prevalent in eleven earthquake affected provinces, particularly among homes that have taken in UASC.

Disruption of care and support systems for children: While the devastating earthquake disrupted the care and support services provided to children under the State protection in the existing system, new risk factors arising from the earthquake, such as damage to buildings, damage to public employees themselves, the high number of USAC children, and malicious people targeting these children, can cause children to lose their lives or suffer permanent physical harm. Children can be abused physically, sexually, emotionally, or digitally. Furthermore, the means for reporting these abuses, protecting the children, providing legal counseling and psychosocial assistance to the child, identifying the perpetrator, carrying out the legal process, and punishing the crime, if any, are hampered.

Ultimately, in each case, the child is harmed in a multiple, repetitive manner, which is contrary to children's rights and needs to be addressed urgently.

TOO MANY CHILDREN ARE UNPROTECTED. FACE NUMEROUS RISKS, AND ARE VULNERABLE AND EASILY TARGETED BY MALICIOUS INDIVIDUALS OR GROUPS.





For multiple reasons, including the high number of teachers and students who lost their lives, were injured, and whose homes were destroyed or damaged in the earthquake; the use of undamaged school buildings and dormitories as shelters for the homeless; and the continuation of major aftershocks, the Ministry of National Education announced the following decisions.

It was announced that pre-school, primary, middle, and high schools will be opened gradually in the affected provinces. According to the announcement made by the Ministry of National Education on February 20, 202312; schools will open on March 1 in Adana, Kilis, Diyarbakır and Şanlıurfa, on March 13 in Gaziantep and Osmaniye, and on March 27 in Adıyaman, Malatya, Kahramanmaraş and Hatay. Education in all provinces other than the 11 earthquake-affected provinces started on February 20, 2023.

In addition, the Council of Higher Education announced that universities will continue online (distance) education in the spring semester¹³.

Due to the devastating earthquake, all educational activities were completely disrupted. However, given the restorative, healing, protective, and preventive roles of education, it is critical that education begin as soon as possible, particularly in disaster zones.

A huge number of children and adolescence need to access quality, safe, inclusive education.

¹² Ministry of National Education, 20.02.2023.

Council of Higher Education, 11.02.2023.



Two topics stand out in terms of safety and security:

Human-caused safety and security issues: The extensive looting in Hatay and Kahramanmaras soon following the earthquake caused a severe security issue for the affected population. Looting appeared at a variety of small and big enterprises, including stores, marketplaces, shops, and workshops. Automobile showrooms, electrical and electronic stores, pharmacies, hairdressing salons, optical repair shops, perfumeries, heavy furniture showrooms, and other businesses were looted. There isn't a single property on the major streets in both city that hasn't been looted. Several Gendarmerie patrol teams in both cities said that the number of looting complaints had dropped since the fourth day and that no looting reports had been received as of the sixth day. Gendarmerie and police patrol teams stated that it is difficult to track malicious people due to rapid population mobility, which poses a high security risk. Mukhtars reported continuing looting of households in high-rise buildings abandoned due to damage, particularly in better-off neighborhoods. They also noted security concerns relating to conflicts during and after the unscheduled delivery of aid materials. Given the enormous quantity of traumatized and very needy individuals, they stated it was extremely difficult to organize the distribution of relief materials in safety and security.

Damaged buildings and infrastructure-based safety and security: Many of the visible buildings are heavily/ moderately damaged but have not collapsed. Several of these buildings have partially fallen or had substantial



debris fall from their exterior during aftershocks. Serious injuries have resulted because of this. Emergency room staff at the hospital we visited confirmed head injuries caused by falling pieces of siding and noted the high number of applications to the emergency room for hand and foot injuries due to nails, rebar, glass, etc. in and around collapsed buildings. They also drew attention to tetanus sickness because of dirty injuries produced by nails, iron, and other objects, as a result of the very low tetanus immunization rate.

Roads are blocked in highly damaged regions due to fallen structures and debris flooding into roads and residential areas. Transportation of humanitarian supplies and everything else, as well as travel by automobile in these locations, is extremely problematic, both in terms of driving safety and the issue of lengthy hours stuck in traffic.

Phone and internet connectivity issues remain, particularly in Hatay. Electricity is a major issue in both provinces.



Legal assistance on entitlement for damaged buildings to affected people: A new process and obligation to claim rights has emerged for disaster affected persons and survivors. Persons who have lost their relatives, who have been injured and/or whose buildings have been destroyed/damaged have the right to file a criminal complaint and file a lawsuit for compensation with the title of "right holder".

People whose houses or workplaces have been destroyed or damaged ask many questions and seek information about the eligibility of their own situation and how to make the necessary applications. It is crucial that people understand the procedures, such as submitting petitions and applying to the appropriate authorities within the statute of limitations and/or limitation periods, in order to exercise these rights. Those who are unable to acquire this information immediately may experience a further trauma in addition to the natural disaster since they will lose their rights.

A huge number of people need to access Legal assistance on entitlement for damaged buildings to affected people.

The Union of Turkish Bar Associations reported that 99 lawyers and trainee lawyers lost their life in the disaster area as of 17.02.2023, and 10 lawyers could not be reached and are believed to be under the debris. As a result of the large number of people affected by the disaster and the fact that the Bar Associations, which can provide free consultancy to these people, are also affected by the earthquake, the need for legal consulting in the field becomes increasingly important.

C. PSYCHOLOGICAL and PSYCHOSOCIAL NEEDS

To ensure that questions were understood by interviewees, they were questioned about the usual language used to express psychological distress, stressors, and other technical terms included in the survey. Based on the responses, talks concerning psychological and psychosocial needs used the same terminology, avoiding potential misunderstandings due to cultural differences or the usage of technical terms around mental health issues and stereotypes around speaking of them.

Level of emotional distress experienced by the respondents

- Almost all respondents in two provinces stated that emotional distress is prevalent in their surroundings (many added that this included me).
- When asked to rate how strongly they feel such emotional distress on a scale of 0 to 10, many of them reported having emotional distress in the high to very high range (from 7 to 10).
- Women with young children and middle-aged women with domestic responsibilities in particular, reported very high levels of stress.
- People who had lost a family member or several family members expressed their grief using highly emotional words, sorrow, and despair.

Psychological impact of earthquake

The following symptoms were mentioned by interviewees for children and adults in the earthquake-affected population. There were no significant differences in the symptoms of psychological impact of earthquake among adolescents (boys and girls) and adults (male and female), according to interviewees.

The following are some common symptoms for children and adolescents/adults:



Children: Unwillingness to play games; want to spend all of his/her time with the parents; quietening, continuously asking his/her friends who moved to another city; losing his/her cheerfulness; s/he stops smiling and speaking cheerfully as s/he used to; losing his/her curiosity, s/he used to ask everything, but now s/he doesn't; not being able to sleep; being in constant fear, starting to cry spontaneously or at night time.



Adolescents/Adults: Strong feelings of sorrow, anxiety and fear, problems with behavior, such as violence, negative coping mechanisms include smoking and napping, hopelessness, emotions of worry about the future, not being able to sleep; being in constant fear, starting to cry at nighttime.

Causes of emotional distress experienced by affected population

• Loss of loved ones; death in the nuclear family or among loved ones.



They tell me that you have children and that you must stay strong. So how will I get by? My children were left fatherless, and my brother and mother were trapped beneath the rubble. How will I move ahead?

(27 female)

• Very heavy damage houses; situations in which the house is entirely destroyed or substantially or very heavy damaged.



With a thunderous bang, our house fell apart. I have new three beanie

(4, qirl)



All of our belongings are buried beneath that wreckage. Our house was crumbled to dust. How is that possible? (35, female)



We are stuck here; I have no friends left. 3 of my close friends went to Ankara with their families. The school is closed until summer.

Every day I tell my parents 'let's move' as soon as possible.

(13, girl)



We no longer have a house! Even our family photographs are no longer available.

(45, male)

Property loss, particularly loss of automobile and workplace. Those who lost their workplaces in the earthquake
are also angry and frustrated because their workplaces were plundered.



I lost my business.

How can I be with my family

if I am not taking

care of myself?

(55, male)



'I had a flight ticket for the day after the earthquake. I was moving to Trabzon to stay with my aunts and start working there with my brother-in-law at an auto repair shop. I had been going to work up until I joined the military. Our house has been severely damaged. I can't leave my family here right now. My entire plan has collapsed as well!

(16, boy)

• Basic needs; inability to meet their basic human needs.



I can't tolerate the smell since there's no water, no electricity, and garbage everywhere.

(38, female)



I can't believe I'm telling my kids to defecate on the street corner because there are no toilets. I'm not sure if we'll ever be able to live in humane conditions again.

(32, female)



We try to bring clean water to our own water tanks via tanker in collaboration with neighbors, but it is not possible; tankers are all in earthquake zones. Our house was also heavily damaged by the earthquake; we don't have running water and are living on the dirt. We'd want to take a shower as well. (48, male)

Safety and security; loss of sense of safety and security for themselves and their children; some intruders.



We know there have been some kidnappings I worried about my younger sister. (17, girl)



Some criminals took or forced chickens from some gardens; we have chickens as well, so I feel like a target for these intruders. I don't sleep at night, I keep watch.

(39, male)



We are aware that intruders are present and are causing harm to certain individuals. For instance, our neighbor owned a showroom; when the building fell after the earthquake, they put 16 automobiles on this street. The first night, four of them were taken. They now stand watch with guns.

(57, male)



Uncertain conditions; uncertainty was the common issue mentioned by all participants as a cause of stress.

"

We can't even forecast the near future; I'm seeking for anything to hope for, but I can't find it. (22, male)

"

My limited skills to deal with the outside world is a particular source of concern for my future. My "father's house" made me feel secure until this earthquake.

(23, female)

"

I regularly see my doctor for examinations and prescriptions for my chronic diseases, but the state hospital where I was going has now collapsed. I have no idea what happened to my doctor, and I also have no idea where to go.

(72, female)

D. MHPSS CAPACITIES and RESOURCES

Coping strategies

Men, women, adolescents, children, and elder people interviewees were asked to identify their own coping mechanism. The examples of main coping channels used by each of these groups are presented below.



Men: Being involved in rescue work in collapsed buildings, distracting themselves with taking care of their family's needs, and dealing with garden and henhouse, meeting with neighbors to find solutions to bring clean water with tanker and buying the generator for commonly using.



Women: Spending time taking care of children and doing gardening tasks; seeking assistance from mobile aid trucks and relatives; speaking with other women; talking with relatives from various provinces; considering prioritizing use of current household resources.



Adolescents: Talking with friends/relatives from various provinces; spending time with other family members, thinking of the future and possible opportunities.



Children: Playing with other children, spending time with other family members, getting support from their core family members.



Elder people: Getting support from family and friends; praying.

MHPSS and earthquake response

Within the framework of Turkey's Disaster Response Plan (TAMP) and Response Services Regulation, AFAD oversees overall disaster and emergency coordination in the 11 provinces affected by the earthquake, while the Ministry of Family and Social Services is in charge of psychosocial support services. In this context, Ministry Psychosocial Support Teams assigned to 11 affected provinces, as well as Ministry of National Education psychosocial support teams deployed from other provinces, began their work. The Directorate of Family and Social Services' PSS teams have begun to operate in certain communal living places, but PSS is also required outside of the tent sites.

MHPSS-focused NGOs and academics are not currently working in the sector. New teams are expected to begin working on the field in the following days.

It has been noticed that the vast number of affected individuals, the dispersion of settlements, and the depth of the trauma experienced by impacted individuals makes it difficult for current PSS teams to provide PSS services timely, effectively, and widely.

On the other hand, the situation for all public authorities who are already affected by the earthquake is challenging and exhausting.

It has been noted that many public authorities face significant difficulties when working extremely long hours against the time to address the incredibly diversified requirements of the affected population.

One of the most challenging issues for public officials is not being able to appropriately care for their children and families who were also affected by the devastating

earthquake. This has a significant emotional impact. The majority of public officials who are active in the earthquake response and must work for extended periods of time expressed a definite need for PSS for themselves.

A Helping the Helpers in PSS Program was sought, both individually and in groups. Similarly, NGOs responders sought the Helping the Helpers Program through individual and group sessions. Many public personnel

are unable to enter their homes because of damage, and they have to spend the night in their cars or outside. In these conditions, workers return to work the next day expecting a very stressful, hectic, and time-constrained pace. As disaster-affected people, public workers face trouble focusing, making decisions, appropriately listening to applicants, and helping. This circumstance is exceedingly tiring and may result in burnout syndrome. As a result, extensive support for helpers - psychological first aid programs - would be suitable.



E. COMMUNITY SOURCE of SUPPORT

Family relationships

Almost half of the respondents reported having good family relationships and that they felt supported by their families. Support received was mainly through phone calls – when the telecommunication infrastructure allows, and some small financial supports, and included the provision of advice on different matters, showing tolerance in times of stress or following the occasional bouts of anger that occur, addressing basic needs as much as possible, helping out with daily household chores, motivating and encouraging each other, and having someone listen so they could vent about their stressors.

Individuals who did not feel supported stated that their relatives had nothing with which to assist them, meaning that impacted individuals/families are living alone with no one to support them. Several respondents expressed dissatisfaction with their family ties.

Communication with children and adolescents

A significant number of interviewees having children reported that they had tremendous difficulties talking with their children and adolescents about their earthquake fears, worries, and questions. "We are also quite terrified, and we feel a responsibility to protect them, but we are also really powerless; we don't know how to talk to them in this situation," one group of interviewers mentioned.

Another group of interviews mentioned that "If it OK to take children to the cemetery? What is the minimum age for children to visit the cemetery? What will happen to my child if I cry at the cemetery? we have no idea about these concerns!" (38-year-old male specifically wanted to learn it.)

In general, a significant number of parents, caregivers, and teachers expressed a need for guidance in talking with and working with children and adolescents about what happened, the earthquake and its devastating impact, the situation we are now in, the strong negative emotions triggered by the earthquake, and how to express them, etc.





Groups considered to have suffered the most from the earthquake

According to the majority of interviewees, to have suffered the most from the earthquake is individuals who lost loved ones under the debris because search and rescue services did not arrive or did arrive late, despite hearing their loved ones' calls for help. Furthermore, being a witness to this heartbreaking circumstance put these persons in the most vulnerable category, as well.

- People rescued from the rubble of the collapsed building.
- This was followed by individuals who lost family members or loved ones in the earthquake, as well as those caring for badly injured family members or loved ones, and those were seriously injured.
- Interviewees also highlighted female heads of households, widows, and women as the categories most affected by the earthquake. Those with disabilities, particularly elderly persons with disabilities, were next.
- According to half of the interviewees, these groups are primarily supported by the community through traditional moral and emotional support. Financial assistance, although limited, was also mentioned.

The lack of necessary support to these vulnerable groups was justified by community members' preoccupation as affected population with their own problems and the limited emotional resources available to aid others beyond their immediate family. Nearly all interviewees emphasized that these individuals, including themselves were seriously traumatized so...

"NOW AND HERE' FOR 'EVERYONE'.

Perception of the affected population's psychological or psychosocial needs

When asked, almost all interviewees recognized that there are mental health and psychological needs in earthquake-affected locations. To go deeper into their perceptions of the affected population's psychological needs, we asked if they believed there were persons in need of psychological or psychosocial help.

The majority of them believed that if services for psychological or psychosocial assistance were made accessible in their region, persons in need would use them. When asked why, they indicated that the region's families have faced significant losses and terrible experiences, which have resulted in significant psychological support needs.



They went on to say that

- "frustration, anger, pain, sorrow, and so on are all very common in the community, which is dangerous for individuals and the people in their close circle, so we need psychologists. They may also prescribe medications to help us cope with these strong emotions, so many of us can go to them without fear of being stigmatized "said one.
- "If you had asked me before the earthquake, I would have responded that everybody who goes to a psychologist here is either pitied or teased, but the situation has changed dramatically. I'm not sure what a psychologist does, but we have to try because we don't have any other options" said other.

Furthermore, all key informants and/or representatives of relevant agencies and institutions stated that it is understood that, in addition to the most vulnerable groups mentioned above, children, specifically early childhood period and adolescents, specifically adolescents' girls, may require support to improve self-care and coping strategies to enhance individual resilience.

Perception of the issues that need to be addressed in the affected population

In addition to basic needs, interviwees were asked for their thoughts on the most critical issues.

According to the interviewees, the following are the most immediate issues that must be addressed, along with some quotes from them:

- Housing; equipped with heating, clean water, and power (tents and/or containers), adequate and appropriate toilets, and culturally acceptable and adequate undergarments.
- Immediate trash collection and environmental decontamination.
 - "Providing environments in which we may live without fear of infectious illnesses."
- Providing access to health care.
- Ensuring that children's education continues.
 - "Right now, the school buildings and roadside structures are damaged, the aftershocks continue, and

we cannot take the risk to send our children to school while the earthquakes continue. Our government has yet to provide a solution. But somehow, we expect that education must continue."

- Providing information on home entitlement and legal support aid till the outcome.
 - "Our house was destroyed/heavily damaged. That is our fault since we do not have compulsory earthquake insurance (DASK). But our house was just 5 years old and should not have collapsed. What legal remedy do we have against those who caused this? We want to be informed and obtain legal assistance."
- Providing psychological support to all affected people in need.
 - "Psychologists should come to us, or to a location within walking distance... I can walk, but people with small kids will find it tough."
- Arranging non-formal educational activities to pass the time and stimulate socializing for all affected people.
- Providing culturally appropriate services to elder people in the community.
- Providing skill-building activities for women such as entrepreneurship, microcredit, community leadership, and so on.

NOTE FROM THE INTERVIEWER:

Affected persons from various cities, districts, and socioeconomic levels raised the same points in different sentences:

"Trainings and opportunities are being offered for Syrian women and youth, including income-generating job skills, start-up money to begin working life, and even how to talk in a job interview. We want them as well; we want these chances for ourselves and our children our youth, just as Syrians have."

The interviewer mentioned that members of the host community can benefit from these activities/opportunities as well as the continuous chances afforded to Syrians.

A group of six persons interviewed stated that "To be honest, we differ from Syrians; we have a different perspective, and we want separate programs developed for us; isn't that our right as residents of this country?"



F. CHILD PROTECTION

The earthquake also had a severe effect on 5.4 million children across ten provinces. More than 1.858 unaccompanied children had been identified as of February 21. The following are some of the challenges or risks that children face:

Unaccompanied children in rubble fields

Following the earthquake, authorized search and rescue teams were unable to access numerous debris locations in a timely manner, raising concerns about how well legal processes for UASC children are being followed. Interviewees are deeply worried about the number of unaccounted for children in earthquake zones, and they presume that some of these children are being detained by persons with malicious intents. Parents are far more anxious about their own children's safety. Interviewed affected people have been reacting to the wreckage with their own efforts since the first day of the earthquake, and the confusion of how and to whom the rescued children were turned over is perplexing. Similarly, there is no procedure in the rubble regions of handing over UASC to provincial/district FSS officials or keeping a report when transferring them to the hospital, therefore there is worry about the fate of many alone children.

At this point, every attempt should be taken to reunite UASCs with their families, and if this fails, institutional care or alternative care models should be implemented in a way that protects the best interests and holistic well-being of the children.

Safety net

Given the severity of the earthquake and the volume of the affected population, there are severe risks to the protection and well-being of children. The most significant of them is the socio-ecology model's deterioration of the safety net. The family, the school, and, in traditional structures, the community and neighbors, who used to safeguard and care for children in ordinary times, are no longer as available and inclusive protectors of children as they once were in most settings. When a child's connection to school is disrupted, the chance of reporting child abuse, domestic violence, and child, early and forced marriages (CEFM) drops dramatically. In such criminal cases, the child suffers significant harm while the perpetrator walks free.

A large number of UASCs require immediate access to high-quality placements and support that fulfills their needs and encourages them in achieving their long-term potential.

Multiple earthquakes-toxic stress

Big earthquakes in the region are followed by big aftershocks and subsequent earthquakes in neighboring provinces. Children are at risk of developing mental health problems in these circumstances, especially when there were multiple occurrences one after the other, earthquakes with continued aftershocks, with little time to recover. In this situation, children experience a prolonged period of high fear and anxiety, where they do not understand what is happening. This means that they are exposed to toxic stress for a long time. This can be expected to have negative effects on some children in the medium and long term.

In addition to basic needs, children urgently need to be supported with holistic mental health and psychosocial support-oriented activities. Otherwise, although each child's level and duration of exposure is different, this situation can negatively affect many aspects of the child's life.





IV.KEY FINDINGS and RECOMMENDATIONS

The destructiveness of the earthquake, the length of the shaking, the frequency and magnitude of the aftershocks, and the recurrent large earthquakes have very commonly 'deeply' shaken the basic sense of trust of individuals. As a reason, it is critical to involve MHPSS services in all phases of the response at all times.



Improve the accessibility and inclusiveness of MHPSS services for vulnerable groups such as women, persons with disabilities, children, and the elderly; and



Guarantee that all interventions are executed with the necessary adjustments for people with disabilities.



Consider factors that impact accessibility of services to different groups, such as a lack of safe spaces, social norms and values that impede girls' and women's access, and so on;



Consider MHPSS service providers providing initial outreach and trust building activities to any future arrivals to improve acceptability.

This report recommends actions that can complement the existing response with the aim to improve the living conditions of the earthquake affects population and strengthen their resilience at this critical time.

IMPORTANT CALL TO ALL EARTHOUAKE RESPONDERS

Public agencies, INGOs, NGOs, local initiatives, private sector, academia, etc.



Use The Sphere Handbook: Humanitarian Charter and Minimum Standards in Humanitarian Response, in your programming and implementations related to all of the following sectors.



Use <u>The MERS Minimum Recovery</u>
<u>Standards</u> in your programming and implementations related to enterprise and market system response.



Use <u>The Child Protection Minimum</u>
<u>Standards (CPMS)</u> in your
programming and implementations to
response child protection.

ATTENTION: If you need additional info about Sphere Minimum Standards, MERS, CPMS you may reach to Nirengi Association at info@nirengidernegi.org



FINDINGS	RECOMMENDATIONS
A huge number of people need tents and containers with adequate equipment and heating in short term.	 Shelter and settlement responses in urban settings require specific expertise. Working in urban contexts requires expertise in urban planning and design and knowledge of rights, regulations, laws, and policies relating to housing, land, and property. A strong understanding of local housing and financial markets is crucial. Be prepared to engage with Professional unions, civil society, and the private sector. The private sector can play a role in delivering sustainable market-based solutions. The responses should build on local norms and services and avoid creating parallel structures Be prepared to work in two different types of shelter settings; one is scattered settlements (tents pitched next to houses, or greenhouse tents in gardens) and the other is container sites. Prepare for information activities such as basic disaster awareness, earthquake structural awareness etc. (e.g. for those who live near damaged buildings, etc.)
A huge number of people need immediate and appropriate household items.	 Ensure that household items* are provided on a need-based and impartial, non-discriminatory basis. * Household items are for sleeping, food preparation and storage, eating and drinking, thermal comfort, lighting and personal clothing, bedding buckets, water storage and hygiene items, etc. Consider environmental issues related to how items are packaged or delivered.
Affected populations have deep anxiety and concern about the possibilities and equity of security of tenure in housing and settlement options.	 Implement shelter and settlement programmes to support security of tenure. Use local expertise to adapt programming to the different types of tenure, especially for vulnerable groups. Ensure that documentation, such as tenure agreements, is properly prepared and reflects the rights of all parties. Reduce the risk that the shelter programmes may cause or contribute to tensions within the community and with surrounding local communities. Undertake due diligence in programme design and implementation. Achieve as much legal certainty about tenure as possible (the "secure enough" approach), given the context and constraints. Coordinate and work with local authorities, legal professionals, and interagency forums.



FINDINGS	RECOMMENDATIONS
A huge number of people need immediate and appropriate WASH intervention and WASH items.	 Work within the expertise and knowledge required by WASH interventions, particularly in urban settings. Recognize that at-risk groups are less visible in areas with higher population density, and specifically target them. Ensure that WASH items* are provided on a need-based and impartial, non-discriminatory basis. * WASH items are need tap (using) water and drinking water; latrines (separate for men and women); sanitation, garbage collection; enough spare traditional underwear; sanitary pads and diapers.
Lack of awareness and knowledge among the affected community about proper sanitation and hygiene practices in environments lacking water and toilets.	 Keep in mind that due to lack of water and toilet facilities, the affected population may neglect to participate in already poor sanitation practices. It is needed immediate response with the expertise by WASH. Provide persistent, regular, repetitive information on how inadequate hand hygiene, defecation in the environment, inadequate garbage collection and disposal in the absence of water and latrines can lead to public health problems and epidemics. Involve disaster affected community leaders in this information campaign. Conduct practical demonstrations with the participation of them, offering practical solutions for what can be done in environments where water and latrines are not available, particularly in shared living areas.



FINDINGS	RECOMMENDATIONS
A huge number of people need	Work within the expertise and knowledge required by FOOD and
adequate and quality food for a	Nutrition interventions, particularly in urban settings.
healthy life.	Be prepared to work in two different types of shelter settings; one is
	scattered settlements (tents pitched next to houses, or greenhouse
	tents in gardens) and the other is container sites.
	 Organize and make sure food and nutrition responses should work
	with WASH. For example, affected people require an adequate
	quantity and quality of water to prepare nutritious food and to adopt
	safe feeding practices. (continues on next page)



FINDINGS	RECOMMENDATIONS
A huge number of people need adequate and quality food for a healthy life. (continues)	 Be aware of acute malnutrition for different affected groups, such this major Kahramanmaraş earthquake, it may be necessary to include infants under six months, pregnant and breastfeeding women, older children, adolescents, adults and older people in nutrition assessments or nutritional programmes.
A considerable number of household need to resume/leverage their small-scale farm and livestock family activities.	 Help prioritize the livelihoods response by bringing together those who have lost their livelihoods with individuals, groups, and donors who can give guidance on how to create new opportunities. Use MERS Minimum Recovery Standards in your programming and implementations related to Enterprise and Market System response.



FINDINGS	RECOMMENDATIONS
A huge number of people need to access health services and medical supplies.	 Urban crises require a different approach to health interventions. Be aware that the number of affected people in need can quickly exceed the health service capacity that can be provided; it will be challenging to identify affected people at risk or without access to healthcare, therefore conduct outreach programs to access people in health risks. Use technology to instantly provide accurate information about health care and services to counter 'rumors and misinformation' that have the potential to spread rapidly in cities. Recognize: People seeking move in towns and cities rarely know about existing health services or how to access them, risking a further increase in communicable diseases. Conduct outreach programs to help people cope with new urban stresses such as inadequate access to shelter, food, healthcare, etc. Secondary and tertiary health care providers are often more active in cities, so increase their capacity to deliver primary health care. Involve them in early warning and response systems for communicable diseases and increase their capacity to deliver normal specialized services. Ensure that affected are aware of family planning and where/ how to access contraception.



FINDINGS RECOMMENDATIONS

A huge number of people need to access legal assistance on entitlement for damaged buildings to affected people.

- Help affected people to claim their rights on legal assistance on entitlement for damaged buildings through information and documentation, and support efforts to strengthen respect for rights.
- Advocate that affected people generally have rights regardless of whether they have certain documents.
 - » Provide information and refer affected people to institutions that can provide these documents and support them.
- Advocate for full respect of affected people's rights and international law, contribute to a stronger protective environment.



FINDINGS

A huge number of people need to access both PFA and MHPSS (including medications and supplements for mental health).

RECOMMENDATIONS

Mental health and psychosocial problems are common among adults, adolescents and children in all humanitarian settings. The extreme stressors associated with crises place people at increased risk of social, behavioural, psychological and psychiatric problems.

- Enable all affected people of all ages to receive healthcare that addresses mental health conditions and associated impaired functioning.
- Enable different psychological interventions at different levels for affected people based on the community MHPSS needs assessment through well trained, well skillful MHPSS teams:
 - » Psychological first aid
 - » Psychological counselling (individual and group sessions)
 - » Other psychological interventions
 - » Clinical mental healthcare
- In the context of this devastating earthquake, coordinate with other
 organizations to develop/use a more specific MHPSS toolkit content
 needs to be derived, which focuses on loss and mourning.
- Prioritizing maternal mental health in the aftermath of this devastating earthquake is of particular concern due to the potential impact on child care.
- Be prepared to provide MHPSS in two different types of shelter settings; one is scattered settlements (tents pitched next to houses, or greenhouse tents in gardens) and the other is container sites.



FINDINGS RECOMMENDATIONS

Too many children are unprotected, face numerous risks, and are vulnerable and easily targeted by malicious individuals or groups.

- Ensure that all interventions are based on the principles of sexual exploitation and abuse protection (PSEA).
- Engage development/follow up procedures that are safe, transparent, accountable, and in the best interests of the child, such supportive engagement of local governments, specialized NGOs, and bar associations, etc.
- Engage development of alternative mechanism to backing in the context of this devastating earthquake interrupted care and support systems for children to prevent abused physically, sexually, emotionally, or digitally in consultation with Ministry of Family and Social Service such as Helpline for UASC, reporting of UASC to MoFSS.
- In the context of this devastating earthquake, priorities identification and protection of UASC and access equal, safe access to assistance, protection, health, and all services, including education.
- Use <u>Child Protection Minimum Standards</u> in your programming and implementations related to Enterprise and Market System response.
- Be aware that child, early, and forced marriages (CEFM) are on the rise during times of conflict and humanitarian crisis, and take the necessary precautions.



FINDINGS

A huge number of children and adolescence need to access quality, safe, inclusive education, including early childhood development education (ECDE).

RECOMMENDATIONS

Due to the devastating earthquake, all educational activities were completely disrupted. However, given the restorative, healing, protective, and preventive roles of education, It is critical that education begin as soon as possible, especially in disaster areas.

- Ensure all affected children access inclusive, quality and safe education.
- Build strong, trust based relationships with the Ministry of Education and local education authorities to support disrupted education.
- Identify barriers to girls' attention in education during assessments and design interventions to support enrolment and retention.
- Foster complementarity between the early phase of the education response and child protection. (continues on next page)



FINDINGS RECOMMENDATIONS

A huge number of children and adolescence need to access quality, safe, inclusive education, including early childhood development education (ECDE).

- Consider the educational needs of children and youth of all ages.
 Include preschool (ECD), primary school, secondary school-aged children and university-aged youth in the education response.
- Prioritise Early Childhood Development in Emergencies (ECDiE)
 program: Assess need, design, and implement ECDiE, supporting
 each of the four core components of a response: early learning
 and stimulating environments, positive child-caregiver interaction,
 protective environments, and holistic child wellbeing.
- After schools reopen, closely monitor and address students'
 attendance, particularly adolescent girls' attendance, as well as
 their special needs for school attendance, particularly in the 11
 earthquake-affected provinces.
- Collaborate with the Ministry of Education or provincial education directors to provide psychosocial support (PSS) programs in schools.
 Help PSS programs by providing psychological first aid (PFA) and social emotional learning (SEL) programs, with a special emphasis on loss and grief.



www.nirengidernegi.org