



# **TÜRKİYE EARTHQUAKES RESPONSE**

## **RAPID NEEDS ASSESSMENT REPORT**

FEBRUARY 2023



**CORUS INTERNATIONAL**

**Assessment Dates:** 17 – 24 February

**Location of Assessment:** Gaziantep, Kilis and Hatay Provinces





## ACKNOWLEDGEMENT



Corus International would like to express our gratitude to all those who contributed to this needs assessment report. First and foremost, we would like to thank the affected communities who generously gave their time and shared their experiences with us. Without their willingness to participate, this report would not have been possible.

We would also like to extend our appreciation to the local authorities and partners who supported our fieldwork and provided valuable insights into the local context. Their expertise and guidance were instrumental in helping us to understand the needs and challenges facing the communities affected by the earthquakes.

We thank the translators who made the interviews and discussions possible, dedicating their time and energy to providing details and information which accurately represent the perspectives of those interviewed.

Furthermore, we would like to acknowledge the dedicated Humanitarian Action team who worked to collect and process the data in a timely manner.

Finally, we would like to thank our donors for their generous support, which made this rapid needs assessment possible. Their commitment to providing urgent humanitarian assistance to those affected by the earthquakes is truly inspiring.



## EXECUTIVE SUMMARY

The earthquakes that struck Pazarcık and Elbistan on February 6, 2023, were among the most devastating natural disasters to hit Türkiye in recent memory. The magnitude 7.7 and 7.6 earthquakes were followed by over 9,000 aftershocks<sup>1</sup>, causing catastrophic damage to the southeast region of the country. From damage reports, it is estimated that over 130,000 buildings<sup>2</sup> in the 11 affected areas have fully collapsed or been severely damaged.

As of February 25, 2023, over 44,000 people have lost their lives, and more than half a million citizens have been evacuated from the affected provinces of Kahramanmaraş, Gaziantep, Şanlıurfa, Diyarbakır, Adana, Adıyaman, Osmaniye, Hatay, Kilis, Malatya, and Elazığ<sup>3</sup>. The earthquakes hit during the winter season, leaving many people without access to basic necessities like shelter, food, water, heaters, and medical care in freezing temperatures.

The UN Flash Appeal for Türkiye Earthquake response estimates that at least 9.1 million people have been directly impacted by the earthquakes in the 11 hardest-hit provinces<sup>4</sup>. The appeal calls for 1 billion USD to support the immediate lifesaving needs of 5.2 million affected people. The earthquakes are the most significant to strike the country's southeast region in hundreds of years.

The disaster has prompted a massive humanitarian response, with the government, international organizations, and local communities working together to provide emergency relief and support to those affected. Despite these efforts, much work remains to be done to help Türkiye recover from the devastating effects of the earthquakes.

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<sup>1</sup> <https://www.afad.gov.tr/kahramanmarasta-meydana-gelen-depremler-hk-basin-bulteni-35>

<sup>2</sup> <https://reliefweb.int/report/turkiye/turkey-earthquake-emergency-situation-report-21022023>

<sup>3</sup> <https://www.afad.gov.tr/kahramanmarasta-meydana-gelen-depremler-hk-basin-bulteni-35>

<sup>4</sup> <https://reliefweb.int/report/turkiye/flash-appeal-turkiye-earthquake-february-april-2023entr>



The purpose of this rapid needs assessment (RNA) is to quickly gather information about the immediate needs of individuals and communities affected by the February 6 2023 earthquakes in Türkiye. The assessment was conducted at the initial stages of the Corus response to provide timely and accurate information to inform the relief efforts.

**The primary objectives of this rapid needs assessment were:**

- Determine the immediate needs and gaps of the affected population, such as shelter, food, WASH, protection, MPCA, health.
- Assess the available resources, capacities, and infrastructure in the affected areas to provide aid and support.

The findings of this RNA are crucial for informing the development of an effective Corus response plan, allocating resources, and coordinating efforts among different agencies and stakeholders.



The Corus Humanitarian Action team applied four methods of data collection while conducting the RNA of earthquake affected areas and populations in Türkiye:

- 1. Qualitative interviews:** Face to face interviews with affected populations using open-ended questions to understand the needs, gaps, and existing services provided across sectors and locations. 6 qualitative interviews were conducted.
- 2. Key Informant Interviews (KIIs):** Discussion style interviews with people who have specific know and expertise about needs and gaps in the affected areas. 5 KIIs were conducted.
- 3. Focus groups discussion FGDs:** Semi-structured group discussion with a group of affected individuals better understand conditions, situations, experience, expectations, or perceptions. 1 FGD was conducted in Islahiye.
- 4. On site observation:** Direct observations collected from community shelters, smaller informal camps, larger more formal camps, and informal tented areas. Observations focused on conditions, accessibility, and availability/absence of goods and services in a given location. On-site observations conducted in 8 sites across 5 locations.
  - Kilis (1)
  - Islahiye (3)
  - Nurdagi (1)
  - Antakya (2)
  - Kirikhan (1)



## LIMITATIONS:

1. Structured focus group discussions were largely not appropriate due to the extreme sensitivity of the population following the earthquake shock.
2. Long, in-depth interviews with affected populations were not appropriate due to the sensitivity of the situation. Therefore, not all questions in the survey were able to be captured at each location/interview. This could limit the depth and accuracy of the data collected.
3. Structures were not yet in place in all assessed sites, which made it difficult to facilitate structured FGDs. Inadequate seating for longer discussions, for example, may have limited the number of people willing to participate. This could have a broader impact on the representativeness of the data collected.
4. Sampling strategy: due to challenging conditions on the ground i.e. limited access to populations, for example, meant that it is difficult to reach certain groups, which could impact the representativeness of the data collected. Additionally, limited time in camps/sites meant that data collection was rushed in some cases, which could impact the quality of the data collected.



## FINDINGS

This sections highlights the key information and results from the rapid needs assessment.

### MULTIPURPOSE CASH ASSISTANCE (MPCA)

Through discussions with KIIs and interviews with affected populations, the results of the survey on MPCA were:

- All KIIs reported that support through provision of goods in kind is still the best approach to meeting people's basic needs.
- Nearly all affected populations interviewed reported that they would prefer to receive goods in kind instead of cash.
- One respondent mentioned that cash would be appropriate for people who lost a family member who was the primary income earner, people who lost their cars which were used for transport to work and people whose businesses were destroyed.

The primary reasons cited as to why cash was not preferred at current were:

- Markets in many areas are dysfunctional.
  - From a KII, "There is nowhere to spend cash as there are no goods to buy in the markets."
  - In Hatay, many goods being distributed are coming from Adana, Adiyaman, Istanbul, etc.
  - Inflation is very high and due to pressure on markets cost of essentials good has increased.
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## FOOD

- Food was consistently reported as a priority need.
- Hot meals are being provided in larger and more structured camps, though reported as insufficient.
- Dry packaged food is not being regularly distributed in structured central camps but was reported as a need across assessed areas.
- While some food trucks and hot meal distributions are reaching informal community tent areas, hot meals are not regularly or systematically being provided in community tent areas.
- Packaged food is sometimes provided in less structured community tent areas but is sporadic and insufficient.
- In one camp, packaged food was distributed but there was no water to cook it with.

## SHELTER & NFIS

- Insufficient number of tents reported in multiple locations and identified as a key need.
- Very cold temperatures reported and observed in assessed areas. Need for both warm and secure shelter. Overexposure to weather conditions reported and observed having health impacts on populations.
- Women's undergarments identified as a gap in multiple locations but is a priority need.
- Plus size clothing for adults reported as a need in multiple locations in both Hatay and Gaziantep.
- General cooking kits and eating utensils identified as a need in community camps.
- Warm and sufficient bedding and mats identified as a priority need in multiple locations.

## HEALTH

55% of locations assessed were observed to be overcrowded and all locations included an element of increased exposure to winter conditions.

- The major health issues observed and reported were related to sanitation and hygiene and mental health psychosocial support.
- Overcrowded camps, poor hygiene, and insufficient water for bathing can lead to various health concerns, including:
  - Increased risk of infectious diseases: Overcrowding and poor hygiene practices can facilitate the spread of infectious diseases like diarrhea, cholera, and typhoid fever. While not reported, due to the observed and reported latrine facilities there is serious concern for the spread of diarrhea and cholera. In Northwest Syria, there have already been 2 deaths from Cholera<sup>5</sup>.
  - Skin infections: Insufficient water for bathing and poor hygiene can lead to skin infections like scabies, lice, and fungal infections. Scabies and lice are already being reported in camps.
  - Mental health issues: Living in overcrowded and unsanitary conditions can increase stress and anxiety already being experienced following the earthquake.
  - Mental health, counselling, and psychosocial first aid was identified in all regions surveyed as an area requiring significant resources and attention.

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<sup>5</sup> <https://www.reuters.com/world/middle-east/twenty-two-people-died-cholera-outbreak-post-quake-northwest-syria-civil-defence-2023-02-28/>

- People were observed to be under severe stress and trauma and reported needing mental health support and resources.
- Due to increased exposure in winter conditions in camps, affected populations reported needs for lotion, chapstick, vaseline to aid with chapped and broken skin.

#### **Results of hospitals/clinics functionality and services being provided**

- Hospitals and clinics in Antakya are not functioning.
- Mobile clinics are being operated but are not sufficient to reach all the needs of the population.
- There are mobile clinics operating but they are unable to provide comprehensive medical care to all those in need.
- There is a lack of access to medical care due to the closure of hospitals and clinics.
- In city centers such as Adana and Gaziantep hospitals are operating but transportation to these locations poses a challenge to affected populations staying far from city centers.
- In some locations medicine, medical supplies, and equipment has been donated but there are no medics, doctors, or pharmacists to treat people.

#### **WATER, SANITATION, HYGIENE, (WASH)**

- Severe deficiency of adequate water, sanitation, and hygiene services available to affected populations. Reports of skin diseases such as scabies and lice noted as being common in larger centralized camps.
  - In all structured camps it was observed that the number of latrine facilities were insufficient for the number of residents. In one camp it was observed that there were only 4 toilets available for a population over 1,000.
  - No sanitation committees were observed to be in place in camps and latrine facilities were in very poor condition.
  - In structured camps toilets were not gender sensitive.
  - In structure camps toilets did not have water while in the community areas water was retrieved from wells but limited.
  - In one observed community center gender sensitive toilets were available.
  - In community/residential camps close by to people's home, it was observed that there were typically staying in smaller groups and using toilets which were still accessible in the neighborhood.
  - In 33% of RNA locations water was available for washing, though limited in supply.
  - In 55% of RNA locations water was not available for washing.
  - Water supply for washing was more available in community center and community tented areas.
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## PROTECTION

- In one location tension was observed while on site due to food shortages.
- Cases of rape and gender-based violence have been reported in earthquake affected areas.
- Increased tensions, stresses were cited as commonly occurring due to the extreme conditions people are facing in shelter and in affected areas.
- Only one location had space for children to play while others did not have a specific designated area for children or guardian for children.
- Child-friendly spaces were reported across KIs and interviews with affected persons as priority needs.
- Referral mechanisms for protection cases are not widely known.



## RECOMMENDATIONS

### Based on the findings of the RNA:

- **Meeting basic needs is still a priority:** provision of temperature appropriate and safe shelter, dry food packages, hot meals, and NFIs, should continue to be prioritized in programming.
- Targeted **WASH response** to include setting up sanitation committees, water trucking, and installation of emergency latrines for overcrowded camps.
- A number of health concerns can be addressed through **improved WASH facilities** along with **hygiene packages** and **promotion of good hygiene practices**.
- Key **health messages should be disseminated** in camps to inform people of health risks in camps .
- **Hygiene packages must include feminine hygiene items (underwear and pads).**
- Dry shampoo, bathing wipes, and hand sanitizer should be considered as additional items in the hygiene kits to support interim period of shortage of bathing facilities.
- Market functionality varies from area to area, therefore, it is **essential to conduct market assessments** in specific areas where assistance is targeted **to determine feasibility of cash programming**
- Accessibility of marginalized groups must be included in assessment to ensure inclusive design.
- Inflation must be considered when determining the cash transfer amount.
- Livelihoods grants to be considered during recovery phase.
- **Mental health and psychosocial support should be a top priority in programming.** Trained professionals provide on site or through hotline assistance to people requiring psychosocial support.
- Designated **child friendly spaces** should be established in camps and container cities for children. Child friendly spaces should be equipped with games and toys for children as well as adult supervision.
- **Protection should be prioritized.** Greater coordination and attention towards identification or establishment of protection related referral mechanisms. Disseminate messaging on mechanisms to affected populations.
- **All programming must be designed in an inclusive way**, recognizing different languages, statuses, vulnerabilities and needs.