AFFECTED POPULATION IN NUMBERS

- **15.8 million**
  Population in the 11 affected provinces including 1.7 million refugees and 2.6 million youth (15-24 age)

- **4.1 million**
  Women of reproductive age (estimate)

- **226,000**
  Currently pregnant women (estimate)

- **25,000**
  Expected births to happen within a month (estimate, under normal circumstances)

HIGHLIGHTS

- UNFPA is scaling up its response with partners to safeguard the health and rights of women and girls, including giving birth safely and living free from violence and abuse.
- 6,648 individuals reached with life-saving sexual and reproductive health (SRH) and gender-based violence (GBV) support including dignity and maternity kits in Türkiye’s earthquake-affected areas.
- UNFPA’s appeal for the earthquake response is requesting $19.7 million and aims to reach 1.5 million individuals needing life-saving humanitarian support. Up to date, only 17% of the appeal has been funded.

SITUATION UPDATE

- Following the 6 February earthquakes, another 6.4 magnitude earthquake occurred on February 20 in Hatay province, resulting in more damage to the healthcare infrastructures.
- 11 provinces were affected by the earthquakes in southeastern Türkiye, including Kahramanmaras, Adana, Adıyaman, Diyarbakır, Elazığ, Gaziantep, Hatay, Kilis, Malatya, Osmaniye and Şanlıurfa, with about 15.8 million inhabitants, including 1.7 million refugees.
- A State of Emergency for the affected provinces was declared by the government for three months.
Around 43,600 people lost their lives in the earthquakes, and approximately 110,000 were injured (as of 22 February).

The earthquakes caused significant destruction of residential and public buildings. 156,000 buildings were identified as collapsed or heavily damaged, and some 450,000 people have been evacuated from earthquake-hit areas.

Access to antenatal care and safe deliveries is a major concern as many health facilities are damaged.

Prevention of, and response to, gender-based violence (GBV) is a concern in provinces that have lost public GBV infrastructures such as counselling centres and shelters in the earthquakes.

There is a high need for mobile and temporary service units in the affected provinces.

Front-line service providers require self-care and training on providing SRH and GBV services in emergencies.

**EMERGENCY RESPONSE NEEDS**

- **Sexual and reproductive health needs:** The earthquakes caused severe destruction of health facilities. Around 15 hospitals, including maternity hospitals and several primary healthcare facilities have been damaged. Earthquake survivors face difficulties accessing health services and information on services that are available. Pregnant and lactating women and people living with HIV are among those with urgent needs.

- **GBV services provision and protection needs:** In times of crisis, women, girls, and other vulnerable groups face an increased risk of GBV. Disruption in protection, health and law enforcement services makes it even harder for GBV survivors to ask for and get timely support. There is a need for mobile and temporary accommodation-centred service delivery points, similar to the Women and Girls Safe Spaces model, to respond to the emergent protection needs of vulnerable groups.

- **Basic needs for hygiene and dignity supplies:** Access to basic needs remains a severe problem in the earthquake-affected provinces, particularly for menstrual hygiene, sanitary products, and clean underwear. The lack of sanitation facilities and safe spaces makes it difficult for women and girls to meet their basic hygiene and reproductive health needs with dignity.

- **Quality services needs:** Even though staff from other regions have been deployed to help out in the earthquake-affected areas, capacities of service providers, including public authorities and UNFPA implementing partners, remain strained. There is an urgent need for support to service providers, including capacity-building interventions for delivering quality GBV services in emergencies and self-care.

- **Youth needs:** Needs assessments among 300 clients of UNFPA-supported Youth Centers found that young people often live in temporary accommodation centres with several families under the same tent, which could lead to increased GBV risks. Over 20% of young women stated that they were pregnant, indicating emerging prenatal care and SRH needs.
UNFPA RESPONSE

- **Strengthening SRH & GBV service provision and coordination:** UNFPA coordinates closely with the government, regional authorities and all humanitarian actors involved in the response to the earthquake, with a particular focus on the coordination between all actors and service providers involved in SRH and GBV. UNFPA is also working on a training package to ensure that GBV services are delivered in line with internationally agreed-upon guidelines and standards. In addition, UNFPA works in close collaboration with the Ministry of Family and Social Services to ensure that front-line service providers receive appropriate levels of support to function effectively, cope with daily stress and have capacities to avoid situations of unacceptable risk. Service providers will continue receiving self-care sessions with UNFPA support in affected areas.

- **UNFPA-supported service delivery units:** UNFPA continues to deliver SRH and protection services for the most vulnerable groups through 5 static service units and 7 mobile units namely: in Adana (1 static/1 mobile), Diyarbakır (2/2), Hatay (0/1), Şanlıurfa (2/2) and Adıyaman (0/1). Through UNFPA-supported service units in Mersin and Ankara, SRH and GBV services are also available to survivors evacuated from the earthquake-affected areas.

- **Life-saving reproductive health commodities:** UNFPA works to ensure that SRH services and supplies are accessible in service delivery units and carefully monitors their stocks to guarantee uninterrupted delivery of services. 735 reproductive health supplies were provided to women.

- **Dignity and maternity kits:** UNFPA ensures that women, girls, young people and other vulnerable groups are reached with dignity and maternity kits through its partners. 5,543 dignity and maternity kits were distributed but, according to service providers’ reports, there remain significant needs.

**IN THE PIPELINE**

- **UNFPA ordered**
  - 315 Inter-Agency Emergency Reproductive Health Kits covering the needs of a population of 1 million people, including 250,000 women of reproductive age;
  - 15,000 dignity kits and 5,000 maternity kits to reach 20,000 women and girls.
COORDINATION

- UNFPA operates under the UN Earthquake Response Coordination Mechanism under Health and Protection.
- To ensure the smooth coordination and delivery of uninterrupted SRH services and life-saving commodities, UNFPA supported the Provincial Health Directorate with a rental vehicle in Adıyaman.
- UNFPA is part of the Multi-sector Initial Rapid Needs Assessment (MIRA) conducted under the leadership of United Nations Disaster Assessment and Coordination (UNDAC) and in coordination with the UNRC office, UN agencies and other humanitarian actors to support the Flash Appeal for Türkiye Earthquake response.

FUNDING UPDATE

$19.7 M required
17% funded

- $3.3 million, including UNFPA emergency funds, has been raised for the initial rapid response to cover life-saving SRH and GBV services, including IA Emergency RH Kits, dignity kits and maternity kits. This represents 17% of UNFPA’s appeal for $19.7 million for the Türkiye earthquake response.
- UNFPA has initiated global and national donation campaigns targeting individuals and private sector donors that would like to support women and girls affected by the earthquake in Türkiye and the region.

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