Türkiye Earthquake Situation Report #1
10 February 2023

15.2 million
Population in the affected 10 provinces (including 1.7 million refugees)

4 million
Women of reproductive age (estimate)

214,000
Pregnant women (estimate)

24,000
Births in the next month (estimate, under normal circumstances)

SITUATION OVERVIEW

- On 6 February, two big earthquakes with 7.8 and 7.6 magnitudes, respectively, hit areas of Türkiye and neighbouring countries. The epicenters of the earthquakes were in Kahramanmaraş province in southeastern Türkiye. They also affected nine neighbouring provinces: Adana, Adıyaman, Diyarbakır, Gaziantep, Hatay, Kilis, Malatya, Osmaniye and Şanlıurfa. The earthquakes caused significant loss of life and mass destruction of residential and public buildings, including hospitals.
- As of 10 February 2023, some **19,000 people were reported dead and over 77,000 injured**. The death toll is expected to increase significantly over the coming days as large numbers of people are trapped under collapsed buildings with little chance of survival and their bodies not having been recovered yet.
- Some **15.2 million people** live in the 10 provinces affected by the earthquakes, including an estimated **1.7 million refugees**. Survivors are being relocated to other safer provinces. **There is a possibility of a significant amount of internal displacement**, which will affect further provinces.
- The affected population includes some **4 million women of reproductive age**, of which an estimated **214,000 are currently pregnant**. Some **24,000 births** are expected over the next month.
- Over 6,000 buildings have reportedly been damaged or destroyed, people are advised not to enter the damaged buildings.
- A **Level 4 Emergency** was declared by the Government of Türkiye. A total of 24,727 search and rescue personnel consisting of national and international personnel are working in the region.
- A **State of Emergency** was declared on 8 February 2023 for the 10 affected provinces for 3 months.
HUMANITARIAN NEEDS

- **Sexual and reproductive health (SRH) needs:** SRH services have been severely interrupted in the region. In Adıyaman, Iskenderun (Hatay) and Reyhanlı (Hatay), state hospitals have collapsed or are severely damaged. The state maternity hospital in Adıyaman was evacuated and deliveries have been referred to other provinces. Similarly, the maternity ward of Gaziantep Hospital is reportedly not safe and needs to be relocated. There is a need for field/mobile health facilities and, thus, necessary medical equipment for SRH services. The Presidency of Migration Management (PMM) has requested medicines and medical equipment for temporary accommodation centres. UNFPA is also receiving several requests from various state hospitals with regard to medical items, reproductive health supplies and medicines such as analgesics, antibiotics, first-aid kits, etc.

- **GBV and protection needs:** The earthquake has increased the GBV risk of women, young people, children, elderly, people with disabilities and other vulnerable groups due to a breakdown in social systems, lack of protection services, and limited access to health facilities. Displacement following the earthquake is resulting in overcrowding, unsafe and unhygienic living conditions in evacuation centres and shelters. Toilet facilities are often not accessible to people with disabilities. Sexual harassment cases are being reported from temporary settings. GBV case management processes and referrals were interrupted due to the earthquake. Violence monitoring and prevention centres are overwhelmed with the crisis response. Particularly vulnerable refugee groups, including GBV survivors, experience continuous discrimination and barriers in accessing services. Many cannot access safe accommodation, individual tents or areas with privacy, and do not have close family or friends to seek support. Some are denied services. The risks refugees are exposed to, including with regard to GBV, are heightened in light of virulent anti-refugee rhetoric in the media, as well as language barriers and the disruption of regular public and humanitarian service provision.

- **Basic needs for hygiene and dignity supplies:** Access to basic needs is a severe problem in the earthquake affected region, particularly for menstrual hygiene products. The PMM has shared with the international community lists of most needed items for temporary accommodation centres, including blankets, heaters, baby diapers and hygiene items for women and girls, as well as clothes and other protective clothing. The Provincial Health Directorates are requesting basic hygiene, dignity and maternity supplies to be delivered to women and newborn babies in the state hospitals.

- **Needs of particularly vulnerable refugee groups:** According to a rapid needs assessment conducted by UNFPA’s implementing partners, Positive Living Association and Red Umbrella Sexual Health and Human Rights Association, among 463 particularly vulnerable refugees, safe shelter and psychosocial support (PSS) counselling were identified as priorities. 59% of participants were not able to say where they would live after the earthquake, 24% continue to live in their houses, 10% reported living on the...
street, and 5% reported living in temporary accommodations like camps, churches, mosques, schools, open areas, tents or with friends.

- **Youth specific needs**: Young people in emergencies experience suffering, trauma and adopt negative coping mechanisms that can have severe consequences for their immediate and long-term well-being. There is a heightened risk of being out-of-education for a long time, deteriorating mental health and risk of sexual violence. A needs assessment conducted by UNFPA’s implementing partner, Youth Approaches to Health Association (YAHAs), in Diyarbakir with 38 beneficiaries (75% women and 15% men), between the ages of 15 and 30, found that 81.6% of earthquake survivors are still in Diyarbakir and 26.3% are living in temporary accommodation centres. 36.8% of survivors reported having infants younger than 24 months, 13% were pregnant, 8.7% were lactating, 4.3% have disabilities. The most urgent needs reported by the survivors included food, blankets, diapers, infant formula, winter clothing and cash.

### CURRENT UNFPA RESPONSE

- **Strengthening SRH & GBV Service Provision and Coordination**: UNFPA is working in close collaboration with the Turkish Ministry of Health in order to make sure that life-saving SRH services remain available to all earthquake survivors.

- **UNFPA-Supported Service Delivery Units**: Prior to the earthquake, UNFPA, through its partners, supported 7 service units in the affected provinces including Adana, Diyarbakir, Şanlıurfa and Hatay, providing SRH and GBV response services for the most vulnerable refugee groups and local communities (see map below). These units are being strengthened and re-positioned to respond to the emergency needs of the most vulnerable groups, including earthquake survivors.

- **Reproductive Health Commodities**: UNFPA is ensuring that life-saving SRH services will continue by providing reproductive health commodities to local health authorities. The procurement of RH kits has been initiated.

- **Dignity and Maternity kits**: UNFPA is making sure that women and girls are protected from gender based violence and receive necessary information and services, as well as dignity and maternity kits (including menstrual hygiene items), to remain safe and cover their basic needs. UNFPA already delivered 3,000 dignity kits to women in temporary accommodation centres in Osmaniye and Hatay. **100 maternity kits** were distributed alongside postnatal care counselling at the Şanlıurfa maternity hospital.

- UNFPA is initially deploying 9 surge experts for the emergency response.
FUNDING SITUATION

- $1 million has been received from UNFPA's Emergency Fund for the initial rapid response that will provide life-saving SRH and GBV services including IA Emergency RH Kits, dignity kits, maternity kits and psychosocial support.
- UNFPA prepared an Earthquake Appeal with an initial budget of $19.7 million to support the immediate acute response and initiate recovery of SRH ($11.7 million) and GBV services ($8 million).