

## 3RP Basic Needs and Protection Sectors

### Joint Paper on Impact of Earthquake on Communities and Service Providers

13 February 2023

#### Rationale

- A joint Basic Needs and Protection Sector meeting was held on 13 February 2023 to take stock with partners on the impact of the Southeast Earthquakes of 6 February 2023 on communities and service providers. Discussions aimed to assess community access to basic needs and assistance, identify difficulties in access to essential services in the impacted region, to identify the needs of service providers (both public and I/NGOs) and to assess the overall protection situation in the short, medium and long term. . This document aims to provide information on the highlights and observations shared by partners during the meeting. Approximately 200 participants from donor institutions, UN agencies, I/NGOs and CSOs participated in the meeting.
- To inform the meeting, an overview of discussions currently held at the UN level was shared with partners. Accordingly, in coordination with the Government of Türkiye, the UN is working on a flash appeal to mobilise increased international support for the response to the earthquake, which is expected to be launched very soon. In terms of sector coordination, rather than activating the cluster system in Türkiye, the proposal is to build on existing coordination structures developed for the refugee response, but adapting, adding and expanding them given the scope and scale of needs caused by the earthquakes. Partners will be informed on the structure and role of emergency response coordination mechanisms shortly. In the meantime, 3RP partners/sectors are providing valuable feedback on affected populations in South-East Türkiye and helping information flow and coordination of support to the Government's response.
- As part of the 3RP's efforts to ensure an informed and coordinated response to the recent earthquake the 3RP Information Management team is carrying out an assessment collection exercise. Partners are kindly requested to share all assessments conducted on the earthquake through the online [Inter-Agency Needs Assessment Collection Tool](#). All submitted external assessments are compiled and shared through the online [Inter-Agency Data Portal](#).

#### Basic Needs Related Observations

- Interruption of service delivery on the partners' side due to direct impact of the earthquake on humanitarian staff and organization premises/facilities being damaged by the earthquake, and loss of resources are highlighted by partners. Partners mentioned the pressing shelter and protection needs of their staff as well as the needs of persons of concern.
- Service disruption is a key point. Partners discussed the need to be innovative and agile in sharing information and extending services in the coming days.
- Supporting mobile or temporary shelters to provide community-level support might be an action.
- ASAM, IOM, DRC, Concern Worldwide, Swiss Humanitarian Aid Unit are amongst the partners that conducted rapid needs assessment, and others will share once available at IA level.
- It is noted that aftershocks are still going on and harsh weather conditions make it harder for earthquake victims to meet their basic needs. Partners observed needs around food,

water, NFIs (diaper, baby formula, underwear, sleeping bags, power-banks, generators, fuel), Protection (Dignity kits and maternity kits, including winterised and menstrual health items), WASH (hygiene kits, mobile toilets), shelter (tents, lighting systems.)

- Partners observe and monitor needs of Turkish citizens as well as refugees and identify needs in the field, conduct distribution inclusively.
- In terms of shelter needs, refugees who had to leave the affected cities do not have places to go and have a hard time getting assistance. Partners indicate that there is a great amount of need for cash for shelter, cash for rent and in-kind assistance such as mattresses, blankets, etc.
- Needs differ for individuals in the impacted cities, and individuals who leave to other cities; yet common modalities such as cash support and in-kind support needs to be extended. In doing so, the sector should focus on relevance of each modality in its context, and think about specific groups who are less likely to benefit from social networks or less likely to access information.
- An escalating need for health support is expected now that removing debris, management of solid waste and excrete, provision of water, burial of the deceased is moving slowly or disrupted. Consequently, increasing need for access to health services including sexual and reproductive health (SRH) is observed and expected; specifically accessing medication of all kinds such as painkillers has become interrupted.
- Villages and counties are yet to be reached and needs are yet to be assessed in these contexts. There is a need to reach the villages and people immediately.

### **Observations on Protection Needs and Risks**

- As with basic needs partners, physical premises of protection service providers and staff capacity to deliver services have been impacted significantly. Some partners relocated to neighboring/other provinces across the country. Staff based in the region require urgent PSS and well-being support. Interruption in services in the impacted region and the mobility of both Turkish citizens and refugees across the country will result in the overstretching of capacities of service providers (both public and 3RP partners) in the receiving provinces, while the populations remaining in the impacted region will continue to rely heavily on existing services.
- Safety and security related risks as well as incidents are being reported by partners and through the media. Tensions between refugee and host communities are increasing, including based on rumors of refugees' looting of supermarkets and homes as well as perceptions of competition over assistance.
- Overall communication with refugees remaining in the region is limited due to destruction of /damaged infrastructure. Refugees are at risk of limited access to information on available services (sexual and reproductive health is particularly mentioned), distributions/assistance points on the ground and on the instructions issued by public institutions/local authorities. This is also a result of the language barrier (despite efforts of PMM and MoFSS to ensure availability of information in refugee spoken languages) and bares the risk of misinformation within impacted communities and between service providers. Partners identify a need for translators in refugee spoken languages, especially in health service delivery points.
- Many refugees lost their documentation during the earthquake. Partners report that refugees' access to essential public services is disrupted as documentation is being requested.

- There is a need to provide accurate and timely information to refugees on instructions issued by public institutions. While the Protection coordination platforms are sharing official instructions immediately via mailing lists, there are some unofficial/unvalidated instructions circulated which creates risk of misinformation and further vulnerabilities.
- Most at risk/vulnerable groups are identified as persons with disabilities (PwD), older persons (particularly unaccompanied), women (including single-parent, pregnant and lactating women) and children with limited access to assistance (such as SRH, GBV services and safe spaces for vulnerable groups including women and girls (WGSS), dignity and hygiene items), key refugee groups (KRG), unaccompanied and separated children (including those that fell under these categories post-earthquake). These groups are at higher risk of exposure to several forms of abuse, violence and trafficking.
- Access to safe accommodation for refugees (both in the impacted provinces and receiving regions) remains vague and ad hoc, which risks exposure to further vulnerabilities and protection concerns.
- Access to health services and medication is an urgent need in the region. This is not just the case for injuries/medical conditions that are a direct result of the earthquake, but for individuals that have chronic illnesses, pregnant and lactating women, and individuals living with HIV among others with urgent conditions.
- Gender-based violence, including SEA, sexual violence and abuse, people who sell or exchange sex, child, early and forced marriages are expected to increase due to loss of networks and livelihoods, increase of violence, disruption of social, health and education services. Further, SEA and GBV related risks are likely to arise including in distribution, collective shelter premises, in the houses of extended family members or in areas where security forces are not present. Women and girls and other at risk groups, such as PWD and KRG are at higher risk of exposure to GBV.
- Nearly 4 million enrolled children, including over 350,000 refugee and migrant children have been impacted by the earthquake. School closures may lead to learning loss, school dropout, impact on psychosocial well-being and other protection concerns as related to child labour, exploitation, child marriage, etc.
- The psychosocial impact of the earthquake, separation of families and severe trauma will have long lasting, negative consequences to the wellbeing of children and adults – there is an urgent need for psychological first aid (PFA) and MHPSS support. Partners observe that persons with disabilities, women, children and other persons with specific needs are most in need of MHPSS.

### **Prioritized Interventions and Recommendations for the 3RP Protection Sector**

- Update mapping of available protection, child protection and GBV services in the impacted provinces as well as receiving provinces/regions. The latter is also very important considering that in line with PMM's lifting of travel restrictions with the exception of Istanbul, persons of concern affected by the earthquake have started to leave the region. Sector members elsewhere, such as in Marmara and Aegean regions, started observing arrivals. To the extent possible, sector members identify persons in need of immediate assistance and provide protection assistance in cooperation with relevant public authorities. PDMMs, PDoFSSs, municipalities, and district governorates are also key local counterparts in this regard.
- Ensure accurate and timely information dissemination through Protection and other sector partners on updated referral pathways, including any changes in availability of services and changes in procedures.

- Emergency response specific multi-layered support to public institutions to strengthen inclusion of refugees (particularly those at highest risk/most vulnerable) in public service delivery.
  - Support coordinated protection and social service delivery particularly through MoFSS and PMM.
  - Work with MoFSS, PMM, and other relevant stakeholders to prevent family separation, identify and promptly refer unaccompanied and separated children, support speedy family tracing and reunification procedures.
  - Through AFAD, MoFSS and other relevant public institutions, support access to safe shelter for vulnerable host community members and refugees, including those with specific needs such as GBV survivors and unaccompanied children (etc.).
- Provision of psychological first aid (PFA) and PSS to refugees impacted by the earthquake.
- Contribute to inter-sectoral cooperation and coordination to ensure centrality of protection in all stages of humanitarian response. To this end, sector partners will ensure protection, GBV and CP mainstreaming (including from AAP, PSEA and child safeguarding perspectives) across the sectors and coordination structures, and that adequate risk mitigation mechanisms are in place. These efforts will aim to support inclusion of persons with specific needs and those at risk across protection and non-protection assistance and interventions.
- Support access to WGSS and safe child/youth friendly spaces and facilitate multi-sectoral responses through them, including as related to MHPSS, skills and learning, social cohesion.
- Provision of individual protection case management services and specialized services to trafficking victims, ensuring linkages to multisectoral responses (such as security, health, legal and others).
- Support cash for protection programmes in coordination with relevant sectors to prevent, mitigate and address protection concerns for children and families, including as related to CP/GBV.
- Increase capacity of both humanitarian organizations and NGOs & CSOs working in the area of protection of women and children in order to support the other sector leads for a better service provision in line with do no harm principle.
- Constant cooperation of sectors on exchange of information and sharing experience for a better multi-sectoral response in order to ensure the actions are taken in a comprehensive manner.

## Annex

### Ongoing/Planned Assistance and Services

ACHSA: The assistances (mostly hygiene materials, baby formula, food, unused winter clothes) brought by the volunteers of the association and immigrants in Trabzon were delivered to the Trabzon Governorship Aid Collection Center.

- **Focal point for referrals:** Mahdi Mohebbi (mahdi@ahcsa.org - +90 501 326 1461) / Muhammet Gül (+90 507 952 9503)

Concern Worldwide: They conduct RNAs to assess the needs in the field in all the districts and provinces they are targeting currently. The main findings currently are the urgent needs of shelter (tents, blankets), diapers and milk for children.

IGAM: They are trying to collect information regarding the region. Many people have lost their homes and it is not possible to live in the region anymore. Refugees need help regarding access to information especially at bus stations and hospitals. Therefore, there is a huge need for access to information in the provinces on whether the provinces that they can migrate to are welcoming or not. Some volunteers at bus stations can provide this information to refugees. Additionally, refugees that shelter with their relatives also face problems since the living conditions of relatives are also not adequate.

IR Turkey: IR Turkey have been on the field in Gaziantep, Hatay and Kahramanmaraş, as well as in Syria. They provide services on basic needs such as food, shelter, heating and clothing. A significant amount of disaster funds has been allocated and the international fund-raising efforts is continuing. Instead of a large-scale needs analysis, IR Turkey is doing a gap tracking.

KAMER: KAMER Foundation is a women-led NGO. KAMER is one of the IPs of UNFPA Türkiye and they are implementing a women and girls safe space (WGSS) in Diyarbakır. The services provided in the WGSS include GBV Case Management, awareness raising on GBV (including PSEA), individual and group PSS activities for GBV survivor women and girls and SRH services. KAMER has taken an active role in providing support to the people in need by provision of dignity kits, psychological first aid and GBV and SRH services in Diyarbakır center as well as in other districts affected by the EQ.

- **Focal point for referrals:** Sibel Yalçın - Social Service Expert ([sibelyalcin@kamer.org.tr](mailto:sibelyalcin@kamer.org.tr), +90 535 603 60 73)

MSYD: They are primarily in Hatay but also in Gaziantep and Osmaniye, with its emergency response, health and mental health teams, is involved in rapid and daily field need assessments; organizing warehouse of governmental authorities (Konya Metropolitan Municipality and Hatay Metropolitan Municipality); distribution of basic needs, assistive health devices, such as wheelchairs, dried food items, canned food, non-food items such as hygiene materials; shelter needs; and water, sanitation and hygiene operation. MSYD call center actively receives calls, deliver basic information and conducts referrals.

- **Focal point for referrals:** 08504550000

**MSYDD:** They can offer limited social assistance to refugee groups who apply to or arrived at Istanbul Sultanbeyli and Ümraniye offices. Although it was stated that Istanbul is closed, 41 families (212 individuals) have requested support so far. MSYDD has a UNFPA supported service unit called Istanbul Center for Solidarity with Women (IKDM). The centre provides support on GBV case management, awareness sessions on GBV and SRH, obstetrics follow up, individual and group PSS sessions, and shelter support for women.

- **Focal point for referrals:** IKDM - Rümeysa Ayhan ([rumeysa.ayhan@multeciler.org.tr](mailto:rumeysa.ayhan@multeciler.org.tr), +90 534 515 11 86)

**Positive Living Association:** UNFPA supported service units which are run by Positive Living Association have been conducting needs assessments on the ground regarding the protection and SRH needs of key refugee groups and men and boys who are survivors of sexual violence. Since the 10th of February, they have been active on the field physically. They have mobile teams active on the field, assessing the needs of those affected and their mobile team also provide support in Mersin and Adana. Their service units in Adana and Mersin also carry out one-on-one counselling and provide protection services and SRH counseling to both those in the region and those who have been evacuated. Other service units in Istanbul, Ankara, Izmir, Eskisehir, Yalova and Denizli continue to support those who have moved out of the EQ affected provinces.

- **Focal point for referrals:** Simay Sönmezates ([simay.sonmezates@pozitifyasam.org](mailto:simay.sonmezates@pozitifyasam.org)) / Oyku Yildiz ([oyku.yildiz@pozitifyasam.org](mailto:oyku.yildiz@pozitifyasam.org))

**Relief International:** They are conducting a needs analysis. They indicated that there is a need for mental support for persons with disabilities, women and children and people with specific needs. There are also problems regarding access to health services for people with chronic diseases. They will open a mental health center in Gaziantep for psychological health. RI also indicated that a training about psychological first aid or PSS for any interested organization can be provided.

**RESLOG:** They indicated that they do not have the capacity to involve in emergency relief but immediately after the rescue work, they will conduct a municipality-based assessment with their partners; and they can work with the municipalities for a Resilience Assessment and reinstating municipal services in the earthquake region.

**STL:** With their emergency response team, they respond to WASH and shelter needs in Hatay. Their Urfa, Diyarbakir and Adana teams carry out their work by following urgent needs and inter-agency coordination in their own fields. Additionally, they also conduct needs analysis. Under the coordination of HQ, they conduct calls with mukhtars in Hatay and Adiyaman to determine basic and protection needs. They have established/working on a wellness support mechanism by identifying internal and external resources for the direct and indirect impact of disasters on their own employees. Finally, they expanded the scope of their existing projects and develop a response plan that includes both refugees and local people.

Şanlıurfa Harran University Women and Girls Safe Space: Harran University WGSS is one of the IPs of UNFPA. The services provided in the WGSS in the premises of Migrant Health Center, is GBV Case Management, awareness raising on GBV (including PSEA), individual and group PSS sessions for GBV survivors and women&girls, and SRH services. On top of the services provided they also implemented a quick needs analysis and distributed dignity kits in the hospital. In addition to Şanlıurfa, Harran University WGSS also extended their support to the earthquake survivors of Adıyaman.

- **Focal point for referrals:** Feride Öztürk - Social Services Expert ([feride\\_ozturt33@outlook.com](mailto:feride_ozturt33@outlook.com), +90 531 329 56 77)

Şanlıurfa Municipality Women and Youth Support Center: Şanlıurfa WYSC is one of the IPs of UNFPA. The services provided in the WYSC are the following: GBV Case Management, awareness raising on GBV (including PSEA), individual and group PSS sessions for GBV survivors and women and youth and SRH services.

- **Focal point for referrals:** Gazal Aydoğdu - Social Services Expert ([gazalaydogdu6312@gmail.com](mailto:gazalaydogdu6312@gmail.com), +90 543 970 01 90)

TRC: In the affected cities, TRC staff work under the disaster management coordination. They have two separate teams - one disaster response and other PSS teams. In Osmaniye PSS tent was set up and has started its activities. At the moment they are not conducting protection specific activities, but protection colleagues work under these teams and report any protection issue. In the other TRC community center cities, they are in contact with PDMMs, MoFSS, trying to understand the situation and also supporting refugees when needed. So far TRC has provided transportation support to 54 refugees in Ankara which is an ongoing support. TRC is also in contact with MoFSS in Ankara at central level and collect information about the damage of protection institutions - women shelters, social service centers, childcare institutions. TRC indicated that no childcare institution and women shelter collapsed, all child or women are safe, and they are being evacuated to other cities. Some ŞÖNİMs are operational but TRC do not know specifically which ones yet. TRC also try to create a referral pathway for protection cases. They have an updated service mapping for affected cities, and they regularly update daily and share this mapping with 168 call center staff, volunteers and staff working in the field.

WFP: WFP is supporting PMM with food parcels to 13 Camps, including the camps hosting IDPs / earthquake victims. They provide support to TRC for hot meal provision in 10 provinces, and 31 municipalities in the Region for hot meal provision. WFP started working with ASAM for remote districts and villages of Hatay and Adana with ready to eat food and food parcels to HHs. In coordination with IOM and UNHCR they are also supporting recently set-up Camps hosting IDPs, with food, mobile kitchen and staff for the kitchens.

Youth Approaches to Health Association: The team has been on the Diyarbakır field since 9 February 2023. YAHA has been conducting Needs Assessments for Diyarbakır since 9 February and for Hatay since 14 February. YAHA is providing sexual and reproductive health, gender-based violence and psychosocial support and visiting tent settlements and hospitals in collaboration with the local governmental actors, distributing dignity kits, and providing services in the UNFPA funded Diyarbakır Youth Center.

- **Focal point for referrals:** Muhammed Bahri Telli ([bahri@sagliktagenc.org](mailto:bahri@sagliktagenc.org), +90 554 338 82 07)