TÜRKİYE / SYRIA EARTHQUAKE
WHOLE OF SYRIA SITUATION REPORT #4

23 February, 2023

THE SITUATION

• Seventeen days have passed following the magnitude 7.8 earthquake that struck Syria and Türkiye on 6 February, impacting the governorates of Idlib, Aleppo, Lattakia, and Hama. Prior to the earthquake, 15.3 million people were estimated to be in need of humanitarian assistance throughout the country.

• On 20 February, a magnitude 6.3 earthquake struck the Turkey-Syria border region, resulting in additional destruction and causing further stress and anxiety to communities that have already suffered significant loss and trauma. These recurring earthquakes also underscore the severe vulnerability and risks in these hard-hit regions.

• While casualty figures are increasing every day, more than 5,900 fatalities were reported across Syria as of February 12, most of which (more than 4,500) have been registered in the country’s north-west. Over 11,000 injured persons have also been reported.

• Partners working in Syria are themselves survivors of the earthquake and have experienced losses on numerous levels — homes, family members, colleagues, and fellow community members. Despite unwavering commitment to the response, this has inevitably limited the ability of organisations to operate at full capacity.

• Damaged health care facilities resulted in a lack of essential lifesaving obstetric and neonatal care services. This has impacted referrals for both normal and urgent deliveries and increased the risks of otherwise preventable maternal morbidity and mortality. Such emergencies may exacerbate the risk of complications due to premature births and miscarriages leading to an increase in demand for essential SRH services while there is reduced capacity to respond.

• Many people are still traumatised and uncertain of their future. As one woman hosted in a shelter in Aleppo said, “I haven’t been able to sleep since the earthquake. I’m very scared of the next disaster. I’m not scared for myself, but for my children.”

© UNFPA Syria. In Lattakia, Syria, a mother and her daughter receive a dignity kit at a temporary shelter following the devastating earthquakes. “I’m very grateful for this kit; it will help me a lot, as we need soap and shampoo. In the shelter, there are no hygiene supplies at all,” the mother told UNFPA.
In north-west Syria

- On 18 and 21 February, a delegation of UN agencies, including UNFPA, visited the affected areas in north-west Syria. They met with national and international NGOs, including UNFPA partners, and women and girls who are in some of the hardest hit areas. UNFPA reiterated its full support to and solidarity with the people impacted by the earthquakes, reinforcing the current rapid scaling up of response interventions.

- Since day one, UNFPA partners have been providing life-saving assistance to the population affected by the earthquake. Despite their own losses, they are at the forefront of rescuing people from collapsed buildings and providing first aid and immediate shelter inside UNFPA-supported facilities, including women and girls safe spaces.

- UNFPA and its partners are concerned about earthquake-related humanitarian needs in an already fragile context and are working to rapidly scale up sexual and reproductive health (SRH) and gender-based violence (GBV) services through outreach and referral, support to currently operating facilities, and assistance where services have been disrupted.

In government controlled areas

- UNFPA continues to support those affected by the earthquake with essential sexual and reproductive health and gender-based violence services, emergency referrals, psychosocial support, and supplies, including dignity kits, winter clothing, blankets, and kits for pregnant and breastfeeding women.

- The number of shelters remains fluid as shelters are being closed by authorities to encourage those who may have only been indirectly impacted by the earthquake to return home. Shelter closures require individuals to find accommodation with family, friends, or to return home.

- Structural assessments continue. Those whose houses are damaged or destroyed will be given the option to move to new shelters identified by the Operations Room (an emergency response team set up by the local authorities to coordinate the response to the earthquakes). The fluidity of the situation makes it challenging for mobile teams and partners to deliver assistance. This, however, reinforces the need for mobile teams that can easily adapt targeting of services as the situation evolves.

- Discussions are being held with the government and sectors to improve coordination and provide a more comprehensive and equitable package of care across all shelters.

HUMANITARIAN NEEDS

- The earthquake has further amplified the challenges of an already weak and fragile health system. Maintaining access to lifesaving sexual and reproductive health assistance, integrated SRH-GBV services, and other essential health services remains a critical response priority for UNFPA and its partners operating on the ground.

- Immediate needs include SRH medical supplies, menstrual hygiene management products, adequate and gender-sensitive WASH facilities, including showers and safe toilets to limit their exposure to GBV and sexual exploitation and abuse, water for cleaning/laundry, dignity kits, blankets, newborn items, winter clothing, tents and/or prefabricated structures to ensure continuation of provision of life-saving SRH and GBV services in the most affected areas.

- The primary needs for protection include psychological first aid, psychosocial support, in-kind medical assistance (including RH kits and medicine for chronic illnesses), dignity kits, GBV case management, and cash assistance.

- Generators and fuel are urgently needed to ensure the continuation of critical emergency obstetric care, surgical interventions, and emergency transportation to health facilities. There are also challenges in securing fuel for the transportation of integrated mobile teams, hindering the implementation of their outreach services, including distribution of supplies (e.g. dignity kits), winterised items, and blankets for pregnant and breastfeeding women.

- There is a need for all humanitarian actors to mitigate the risk of sexual exploitation and abuse and GBV throughout the response. Protection and GBV referral pathways need to be activated and/or reinforced, particularly in any transit and reception areas that will receive displaced persons.

© UNFPA Syria The earthquakes have resulted in severe destruction in impacted areas throughout Syria, where humanitarian needs were already significant after more than a decade of conflict and instability. UNHCR estimates that over 5 million may need shelter support in Syria after this disaster.
UNFPA’S RESPONSE ACROSS SYRIA

Provision of essential life-saving sexual and reproductive health services

Across Syria, UNFPA and its partners are working to meet basic SRH needs and ensure that the minimum initial service package (MISP) for sexual and reproductive health in crisis services is available. UNFPA staff are in the field with partners to ensure timely and quality implementation of emergency response as well as assess the current situation and needs.

In north-west Syria

- As part of its commitment to leaving no one behind, UNFPA enhanced its outreach efforts to ensure that all segments of the population have effective access to critical SRH services. Through the activation of mobile clinics, health staff has provided essential and lifesaving services, information, and referral to people in need living in the most earthquake-affected areas.
- To date, 215 inter agency reproductive health kits have been distributed through a UNFPA partner to facilities that deliver SRH services, which will serve more than 49,000 women.
- UNFPA supported health facilities will ensure the continuation of critical SRH services. By distributing supplies prepositioned in December 2022 and providing tents and other operating equipment, UNFPA has helped partners resume their operations and/or initiate the process of rehabilitating their buildings. Moreover, immediately after the earthquake, UNFPA-supported health facilities received cases that had been referred from the damaged Adana Hospital, including three intensive care patients and five emergency deliveries.
- UNFPA continues to lead the SRH Technical Working Group and is conducting ongoing assessments of medical and non-medical needs to support the continuity of SRH services across northwest Syria. This includes supporting the continuation of lifesaving service provision by bridging urgent funding gaps that are putting critical health facilities on the verge of closure; enhancing the provision of medical supplies and Inter-Agency Reproductive Health (IARH) kits; supporting health facilities to cope with immediate operating costs (including fuel and generators); supporting maintenance or rehabilitation works of damaged health facilities; enhancing outreach efforts and upscaling the number of mobile teams providing integrated SRH-GBV services; and updating and re-activating cross-sectoral referral pathways.

In government controlled areas

- UNFPA delivered humanitarian assistance to Al Sheikh Maqsoud neighbourhood in northern Aleppo, an area with more than 17,000 people affected by the earthquake, more than half of whom are women. UNFPA provided women and girls with basic dignity kits and kits for pregnant and breastfeeding women, sanitary napkins, and winter clothes for families. This is the first time a UN agency or NGO has been allowed to distribute in this neighbourhood after the earthquake.
• UNFPA convened a National Reproductive Health Working Group meeting in Damascus on 19 February to review the SRH situation and discuss assessments and coordination arrangements. Discussions at the sub-national levels are taking place in collaboration with all partners, including the Department of Health (DoH), UN agencies, and NGOs to ensure a coordinated response.

• UNFPA is coordinating with the Health sector to ensure all health services are comprehensive and provide a full package of care, including SRH. UNFPA integrated mobile teams will be providing SRH services jointly with UNICEF and WHO in shelters and areas in coordination with the health sector and the DoH.

• UNFPA is developing a clear referral pathway for SRH and GBV services delivered at supported facilities, including through integrated mobile teams and SRH facilities to facilitate referrals of women and adolescent girls in need of specialised SRH services.

• UNFPA’s nine implementing partners are providing essential sexual and reproductive health services in 14 reproductive health facilities in the affected governorates and through 32 integrated SRH-GBV mobile teams. From 8-19 February, UNFPA’s partners reached approximately 27,539 women and girls with SRH and GBV services, including PSS in the affected areas.

• Through mobile teamsclinics and static facilities, UNFPA is supporting the delivery of quality integrated SRH services, including antenatal, postnatal, and neonatal care; referral to maternal and EmONC services; psychosocial support (PSS); and referral to case management services. The integrated mobile teams are conducting visits to the shelters and affected areas to facilitate access to critical SRH services for displaced women and girls.

• Life-saving interagency Reproductive Health kits will soon be shipped to Aleppo, Lattakia and Hama. The kits help support clean and safe delivery for normal vaginal births as well as those requiring emergency obstetric and newborn care, in addition to providing contraception and treatment of sexually transmitted infections. The UNFPA Aleppo office has already received 25 kits for distribution to community midwives and public hospitals that provide emergency obstetric and newborn care.

• UNFPA partners are distributing sanitary napkins to support menstrual hygiene management for women and girls during the crisis. UNFPA is advocating for improved WASH facilities for better health and protection outcomes.

• The Ministry of Health has provided a list of the damaged primary healthcare facilities. UNFPA is undertaking rapid facility assessments of the RH facilities, including functioning SRH maternity hospitals, to assess the damage and needs and to ensure the continuity of SRH services.

Provision of essential psychosocial and GBV response services

The priority of the response is to ensure the availability and continuation of gender-based violence programmes across all affected areas. As the lead of the Whole of Syria GBV Area of Responsibility (WoS GBV AoR), UNFPA is also ensuring close coordination with all response actors to mitigate protection risks for women and girls. To that end, the GBV AoR has developed and disseminated, among humanitarian actors, tools that help non-GBV specialists mitigate the risks of GBV, and inform the beneficiaries about different forms of violence and how they can be addressed.

In north-west Syria

• Of 14 Safe Spaces supported by UNFPA, 12 are currently operational and providing critical and lifesaving GBV services to women and girls affected by the earthquake. Protection screening, case management services, and awareness raising about GBV services are continuously being provided, both within the service delivery point and through outreach teams. UNFPA continues to be at the forefront of the earthquake response, ensuring that critical GBV services are provided in hard-to-reach areas, reception camps, and informal settlements.

• To date, UNFPA has supported the distribution of 12,929 dignity kits to women and girls in the affected areas.

• UNFPA continues to lead the GBV sub-cluster for northwest Syria. Based on the capacity assessment conducted by the GBV AoR in north-west Syria on 20 February, 83 GBV service points are operating through partners and ten are not functioning due to the devastation caused by the earthquake. Preliminary findings also show that, of the services provided, the most impacted are the provision of dignity kits, cash assistance through case management, and wider cash-based interventions,
all of which have been reduced or interrupted to date. In the meantime, psychological first aid (PFA), case management, and referrals continue to be provided at operating Safe Spaces, with all but five extending their services to essential and critical earthquake services.

- The updated service map of the GBV AoR capacity assessment shows that two locations in Aleppo (Jandairis and Suran) are left without any operating Safe Spaces as the facilities are severely damaged. UNFPA and the GBV AoR are currently tracing the movement of the population in order to better target service delivery.

In government controlled areas

- UNFPA supports the Family Protection Unit of the Syrian Commission for Family Affairs and Population through a helpline to provide online Psychological First Aid, remote case management services, and referrals to people impacted by the earthquake, including survivors of GBV. The helpline provides women survivors of GBV, including sexual exploitation and abuse, with referral to qualified professionals for psychological, medical, or legal support. The helpline is open 24/7 and can be reached toll-free at 9416.

- Nine out of ten UNFPA-supported Safe Spaces are operating in Aleppo, Hama, and Lattakia, and continue to provide comprehensive GBV response services, including GBV case management. UNFPA supports six partners, namely SFPA, MOSAIC, ICDA, PRCS, and SSSD, to operate the safe spaces. One facility in Aleppo remains suspended due to structural damage.

- There are 32 integrated mobile teams operating in Aleppo, Hama, and Lattakia, providing integrated services that include SRH, psychological first aid, PSS, GBV case management, and distribution of supplies, including sanitary napkins.

- In Aleppo, Lattakia, and Hama, UNFPA distributed winter clothing kits (for a family of 5), dignity kits, kits for pregnant and breastfeeding women, packs of sanitary napkins, and blankets.

- UNFPA continues to ensure close coordination with all response actors to mitigate protection risks for women and girls. Field missions are being conducted on a daily basis to assess GBV risks in the affected areas.

- GBV sub-national working groups have been activated, in Hama, Aleppo and Lattakia to coordinate the GBV response by all GBV actors including UNFPA including the advocacy efforts to mitigate risk of GBV in the collective shelters.

- Sub-national SRH working groups will commence in Lattakia and Hama next week to enhance coordination, reduce duplication, and improve service provision. UNFPA continues to work closely with the Health sector to ensure SRH remains a key priority.

FOR MORE INFORMATION

Jennifer Miquel
Regional Humanitarian Hub for Syria & the Arab States
miquel@unfpa.org
(962) 79 575 675